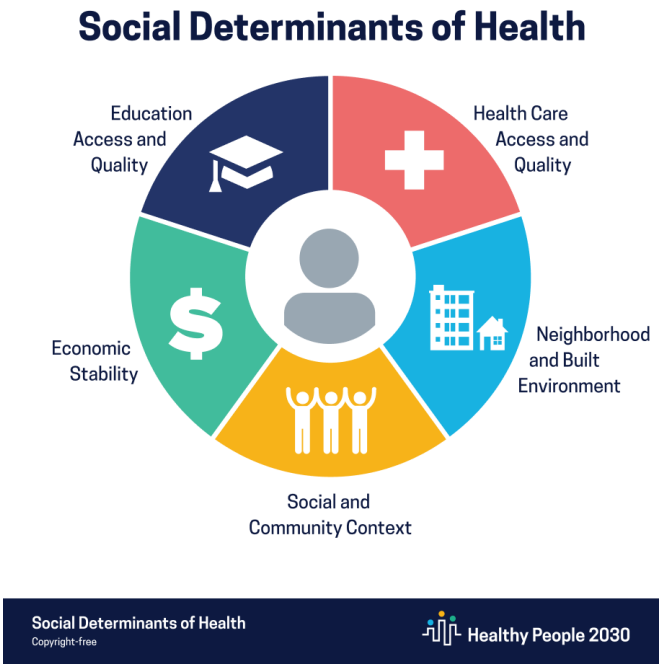
SOCIAL DETERMINANTS OF HEALTH OVERVIEW

Social determinants of health are the conditions in which people are born, grow, live, learn, work, play, worship, and age. Though these factors are distinct from physical determinants of health, they affect a wide range of health risks and outcomes.

SOCIAL DETERMINANTS OF HEALTH



Examples

- Safe housing, transportation, and neighborhoods
- Racism, discrimination, and violence
- Education, job opportunities, and income
- Access to nutritious foods and physical activity opportunities
- Polluted air and water
- Language and literacy skills

Healthy People 2030, U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. Retrieved April 26, 2022, from https://health.gov/healthypeople/objectives-and-data/social-determinants-health/

How Can Social Determinants of Health Impact Your Patients?

Have you ever worked with a patient who experienced some of these challenges?

"I can't make it to my appointment, my car still isn't working and I don't have public transportation nearby."

"I'm not able to afford fresh fruits and vegetables right now. We're really sticking to the basics to try and make our food budget stretch."

"I'm feeling really anxious these days, but my insurance doesn't cover me going to talk to someone about that anxiety."

"I can't afford the copay for my prescription each month, so I take half the recommended amount to make the medicine stretch an extra month."

While these challenges may occur outside of the patient examination room, these challenges can have an impact on the patient's health outcomes.

SCREEN AND INTERVENE

Addressing Social Determinants of Health in the Health Care Setting

Screen: Health care providers can address social determinants of health in the health care setting by screening for these issues, much like they might screen for a physical illness. Patients may not always bring up social determinants, so intentionally asking about them with a screening tool can open the conversation. Several screening tools are available for providers to integrate into their practice workflow.

Intervene: Providers who choose to screen for social determinants of health in their practice should also be ready to intervene with a solution. Intervention may look different across providers and may also vary depending on community resources available. Here are some options a provider may engage with for intervention:

- Provide a community resource list
- Refer to the local 2-1-1 or other phone-based referral platform
- Make a referral directly to a resource through an online resource referral platform
- Refer to a trusted community health worker to provide individualized resource referral and care

Community Health Workers Can Help

Health care providers may not have time to talk with every patient about community resources, or may feel they do not have an accurate understanding of community resources to make a meaningful referral. In those cases, providers can work with trained community health workers to facilitate the intervention and referral.

Community health workers are frontline health care workers that focus on helping members of marginalized or underserved communities to connect with services to overcome social needs and challenges. Community health workers provide many services, including health education, guidance, and translation and interpretation services tailored to the community they serve. They advocate for underserved individuals while assisting with social and health services that improve the patient's qualify of life and may ultimately reduce health care expenditures. Health care providers can think about community health workers as being a meaningful extension of their services to patients.

Want Support in Implementing Social Determinants of Health Screening and Connecting Your Patients to a Community Health Worker?

The Screen and Intervene program has a team that will support you in implementing social determinant of health screenings into your practice with training tools and one-on-one support. The program can also set up a referral loop to a trusted community health worker, so your patients can get connected to the social resources, like healthy food, that they need to improve and maintain their health.

If you want more information, please contact:

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The Screen and Intervene Program, funded by Florida Blue, is brought to you by the following partners:

Alliance for Community Health
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