

THE SOCIAL DETERMINANTS OF HEALTH

and the impact on health and healthcare

SOCIAL DETERMINANTS

FACTORS THAT INFLUENCE YOUR HEALTH

The conditions in which you live, learn, work and age affect your health. Social determinants such as these can influence your lifelong health and well-being.

HOUSING	POVERTY
	
HEALTHY FOOD	GRADUATION
<p style="color: red; font-weight: bold; margin: 0;">6.5 million children live in low-income neighborhoods that are more than a mile from a supermarket.</p>	
LITERACY	HEALTH COVERAGE
	
INGANERATION	ENVIRONMENT
<p style="color: white; font-weight: bold; margin: 0;">The incarceration rate in the U.S. grew by more than 220% between 1980 and 2014, though crime rates have fallen.</p>	<p style="color: white; font-weight: bold; margin: 0;">More than 89% of U.S. adults had health coverage in 2014. But 33 million Americans still lacked insurance.</p>
ACCESS TO CARE	
	

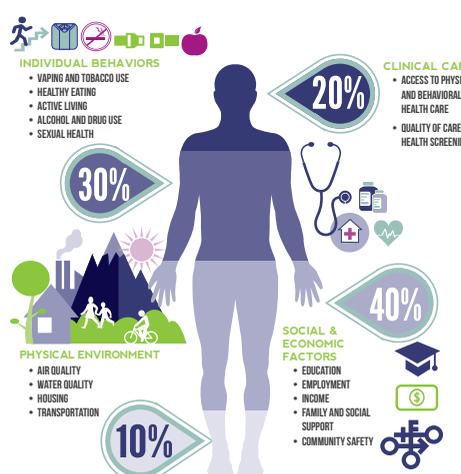
The **NATION'S HEALTH**

A PUBLICATION OF THE AMERICAN PUBLIC HEALTH ASSOCIATION

www.thenationshealth.org/sdoh

Source: American Public Health Association, 2016

WHAT MAKES US HEALTHY?



INDIVIDUAL BEHAVIORS

- VAPING AND TOBACCO USE
- HEALTHY EATING
- ACTIVE LIVING
- ALCOHOL AND DRUG USE
- SEXUAL HEALTH

CLINICAL CARE

- ACCESS TO PHYSICAL AND BEHAVIORAL HEALTH CARE
- QUALITY OF CARE AND HEALTH SCREENINGS

PHYSICAL ENVIRONMENT

- AIR QUALITY
- WATER QUALITY
- HOUSING
- TRANSPORTATION

SOCIAL & ECONOMIC FACTORS

- EDUCATION
- EMPLOYMENT
- INCOME
- FAMILY AND SOCIAL SUPPORT
- COMMUNITY SAFETY

Source: healthyjeffco.com, 2016; adapted from McGinnis Et Al, 2002.

Sally is a young mother. She has visited the emergency room at her local hospital three times this month because of asthma attacks. Every time she goes to the emergency room, the doctor treats her asthma and then sends her home with a referral to a pulmonary specialist and a prescription for medication to help her control her asthma at home. What her doctor doesn't realize is that Sally can't fill her prescription. You see, Sally doesn't

she must take the bus, with her toddler and infant in tow. But Sally doesn't have money for the bus, let alone for her prescription. In fact, Sally is not sure whether the little money she has will last for the rest of the of the month for food and rent, and she fears she may soon be evicted from her run-down apartment. The chronic stress caused by financial hardship combined with poor living conditions contribute to Sally's frequent asthma attacks, which result in visits to the emergency room.

Whether in the hospital or the doctor's office, church or the community center, stories like Sally's abound. While access to quality healthcare is an important factor in maintaining good health, it isn't the only factor. *The social, economic and environmental conditions in which we live play a critical role in determining our overall health and wellbeing.*

The World Health Organization defines the "social determinants of health" as the conditions in which people are born, grow, live, work, and age. Since healthcare alone accounts for only 10 to 25 percent of the variance in an individual's health over time, our focus must turn to addressing other variables: individual behaviors (30 to 40 percent), social and economic factors (15 to 40 percent) and physical environmental factors (5 to 10 percent). The remaining 30 percent is attributed to genetic factors. (McGinnis Et Al., 2002.)

No institution alone can address the systemic issues that contribute to poor health. That will require a partnership of business, health systems, government, and civic and religious organizations.

There is growing recognition among healthcare professionals, policymakers and community advocates that in order to improve health, healthcare delivery and reduce costs, the entire system must take a broad approach to healthcare financing and delivery, and community collaboration, to include social services and supports. For example, if Sally's emergency room doctor had understood the social, economic and environmental barriers preventing Sally from filling her prescription, and had been able to link her to reliable social services and community support systems, perhaps Sally would have been able to fill her prescription and control her asthma at home and avoid a trip to the emergency room.

"You have to have a place to live or there's no reason to worry about food. You have to pay for food before you can pay for healthcare. Getting healthcare is really the last thing you think about when you are just getting by."

Sarah, Colorado Resident and former SNAP recipient

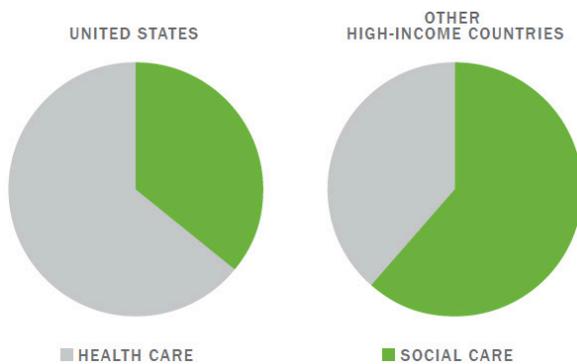
The ability for the physician to make those connections could have improved Sally's health and quality of life while reducing the healthcare costs associated with treating her in the emergency room.

Health systems, hospitals, clinicians, community health workers and patient navigators could all benefit from integrated systems that allow them to link patients to social programs and community resources.

THE SOCIAL DETERMINANTS OF HEALTH

and the cost of healthcare

The **United States** is the **only country** that **spends more** treating **health issues** vs **social care programs**



Source: American Public Health Association

PROGRAMS THAT IMPROVE HEALTH AND DECREASE HEALTHCARE COSTS

Sector	Intervention	Outcomes
Housing	My First Place, including subsidized housing with case management services for young adults with disabilities aging out of foster care	Better health outcomes; \$44,000 per person per year in net savings*
Nutritional Assistance	Supplemental Nutritional Program for low-income Women, Infants, and Children (WIC)	Better health outcomes; \$176 million per year in net savings in U.S.
Case Management & Care Coordination	Nurse-Family Partnership, including home visits by nurse practitioners for low-income first-time mothers	Better health outcomes; modest net savings over 12-year period (\$789 per family)
Community Outreach & Mobile Clinics	Family Van, including health educators, dietitians, and counselors for communities with high health-care utilization	Better health outcomes; return on program investment estimated to be a total savings of about \$1.4 million due to avoided emergency department visits
Partnerships Between Housing & Health Care	Bud Clark Commons, including supportive housing and case management for Medicaid recipients experiencing homelessness	Better health outcomes; less hospital use resulting in 55% reduction in total monthly Medicaid costs

Source: Adapted from Lauren A. Taylor, et. al; The Blue Cross Blue Shield of Massachusetts

What is the impact of social service investments on health outcomes and costs?

Efforts to improve health and healthcare while decreasing associated costs must be made within the context of the many social determinants of health. Naturally, this will require collaboration across multiple systems; no one can tackle this alone. There is strong evidence linking social service programs (i.e. housing, prenatal, food and nutrition support) to improved health outcomes and decreased healthcare costs. There is also evidence that formal partnerships between healthcare organizations and social services result in cost savings and better health. (Taylor, et al; June 2015)

Educating, engaging and collaborating for a healthier Colorado: the role of the Colorado Prevention Alliance.

The Colorado Prevention Alliance (CPA), a statewide collaborative of public and private health insurers and other academic, government, and community partners working to improve population health through disease prevention, is uniquely poised to facilitate these collaborative efforts. The CPA is dedicated to improving systems of care in a way that is efficient, cost effective and responsive to the social, economic and environmental realities that people and communities face every day.

The CPA has convened three group meetings since June of 2015, hosting more than 60 people, representing 40+ organizations from various sectors, to share information and formulate strategies to address social determinants of health. Many of these entities have engaged in ongoing discussions exploring models of integrating social needs programs into health systems and technical solutions for a community resource database from which organizations large and small, across the state, could find reliable information on resources to refer patients and families. A task force has been meeting for the last year, and through that work, they have connected with pediatrician Dayna Long with Children's Hospital in Oakland CA. Dr. Long has implemented a social needs program in her hospital, rooted in cultural humility and the community, and through the help of a benefactor, created a technological solution called FIND Connect. The Family Information and Navigation Desk (FIND) connects patients and families to community, state and national Resources. (<http://ucsfbenioffchildrens.org/possible#Long>)

Please join us in our effort to bring the social determinants of health to the forefront for a healthy future for all Coloradans!

- Participate in our workgroups (food insecurity, screening for SDOH)
- Communicate these efforts with others; invite others to one of the groups/convenings
- Introduce us to others who can speak to our efforts/strengthen our alignment and collaboration
- Share your ideas on implementing strategies to reduce inequity and address SDOH

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