A Consumer Advocacy Framework for Addressing Social Determinants of Health

There is a burgeoning interest in the social determinants of health among health care payers, providers and policymakers. Addressing the social determinants of health is recognized as a key strategy to improve health outcomes, and potentially reduce health disparities. The consumer community has long advocated for the adoption of upstream approaches that effectively identify and mitigate problems related to poor health, including access to healthy food, stable housing, and access to other social services. This document provides a guiding framework to help inform policymakers and the private sector in their emerging efforts to address the social determinants of health.

Social determinants of health are the conditions in which people are born, grow, live, work and age. These non-clinical factors affect everyone's health and well-being, including their physical, behavioral, and mental health. Social determinants of health include housing, food, levels of education and income, transportation, community safety, and family and social supports, including long-term services and supports. Some people's social determinants can have positive effects on their health, while others can have negative effects, which may create inequitable health outcomes. These social determinants can also change over the course of a person's life.

The following framework represents the shared values of a diverse and broad consumer community.

A Framework for Addressing Social Determinants of Health

Health equity should be an explicit goal. Everyone in the United States should have a fair and just opportunity to live their healthiest life possible. Therefore, achieving health equity should be an explicit goal of all efforts to transform health care and the health care system. Without making equity an explicit goal, unintended consequences can further perpetuate and worsen existing health disparities.

For example, as a group, people with disabilities fare worse than and report poorer health than their nondisabled counterparts across a wide range of health indicators and social determinants of health. In addition, women frequently face unique health inequities due to social determinants that negatively affect their access to and experience of care.

Multi-sector partnerships are essential. The health care sector should establish partnerships with other sectors that are directly addressing social determinants rather than addressing them alone. Through partnership, the health care sector can share the responsibility to mitigate harmful social determinants of health and improve individual and population health.

A person-centered approach. Efforts to address the social determinants of health and to achieve health equity should be person, - family- and community-centered and reflect the perspectives, preferences, and decision-making of individuals and communities most affected.

Policymakers and the private sector can support efforts to address social determinants of health by:

O Acknowledging and addressing structural racism and other forms of discrimination that create and reinforce inequities.

CONVERSATIONS ABOUT THE SOCIAL DETERMINANTS OF HEALTH ARE INCOMPLETE WITHOUT DISCUSSING RACISM. PUT SIMPLY, RACISM IS A BARRIER TO HEALTH EQUITY.

Structural racism, sexism, and other forms of discrimination based on gender identity, sexual orientation, national origin, immigration status, disability, and age, underlie many of the adverse social determinants of health that cause persistent health inequities. Policymakers must

- support programs and policies to mitigate the harmful impact of all forms of discrimination as a critical component of any strategy to increase health equity.
- O Building and supporting well-resourced cross-sector and community partnerships. Addressing complex social and economic problems requires multi-sectoral solutions. The health care sector should meaningfully engage with public health, behavioral health, and social services, including community-based organizations, broadly defined. However, each of these sectors is severely underfunded and requires ongoing investment to support and sustain community interventions.
- Protecting and strengthening Medicaid and Medicare. Policymakers and the private sector should oppose efforts to undermine patient access and choice, including efforts to reduce eligibility and covered services, under the guise of flexibility. Greater flexibility should expand existing coverage to address the social determinants of health and should safeguard and reinforce consumer protections in Medicaid and Medicare.
- **O** Requiring robust and privacy-preserving data collection, analysis and reporting. Increased screening and collection of social determinants of health data are essential to better understand a patient's life circumstances and provide more holistic care. Greater investment is needed to integrate multi-sector data and support data sharing between clinical and community-based providers. Individual privacy and confidentiality should always be protected while promoting the goal of integrated whole health.
- O Implementing equity-driven measurement and evaluation that go beyond cost effectiveness. Measurement is a critical tool to create accountability for identifying, reducing, and ultimately, eliminating disparities and achieving health equity. Evaluation and measurement limited to cost-effectiveness or short-term return on investment will not adequately capture the return on upstream investments to improve long-term health.
- O Leveraging and building upon existing care delivery models and resources that offer promising opportunities to advance health equity. There are current health care models and providers that have the experience and expertise to effectively address the social determinants of health, which should be leveraged and further invested in. There are also easily accessible and useable tools and resources that should be more widely implemented.

Conversations about the social determinants of health are incomplete without discussing racism. Racism plays a direct role in health outcomes and contributes to negative social determinants of health, such as low educational attainment and low income. Put simply, racism is a barrier to health equity. Policymakers and the private sector should be committed to addressing racism and its negative impact on the health of our nation for social determinants of health interventions to truly be successful.

The consumer community is encouraged to see a growing recognition of the social determinants of health from policymakers and the heath care sector. These recommendations are not an exhaustive list, but they highlight some of the essential elements of any policy solution or invention that policymakers or leaders in health care should consider.

Many well-intentioned health policies have had unintended consequences because of the lack of consumer input and engagement in decision-making processes. The opportunity to meaningfully address social determinants of health will be wasted if the voices and views of affected consumers, families, and communities are not valued and incorporated into policy actions at every level.



















¹ According to an <u>analysis</u> by the Joint Center for Political and Economic Studies, between 2003 and 2006, 30.6% of direct medical care expenditures for African Americans, Asians, and Hispanics were excess costs due to health inequalities. While health equity is an economic issue, cost savings should not be the only factor considered when developing or evaluating interventions to address the social determinants of health.

^{© 2019} National Partnership for Women & Families. All rights reserved.