Social Determinants of Health
Considerations for Behavioral Health Providers
Social determinants of health are the conditions in which people are born, grow, live, work and age. They include factors like socioeconomic status, education, housing status, transportation access, neighborhood and physical environment, employment, and social support networks, as well as access to health care.
Emerging Recognition of Need to Address Social Determinants

- Efforts to improve health in the U.S. have traditionally looked to the health care system as the key driver of health and health outcomes.
- However, there has been increased recognition that improving health and achieving health equity will require broader approaches that address social, economic, and environmental factors that influence health.
Growing Initiatives

Outside of the health care system, initiatives seek to shape policies and practices in non-health sectors in ways that promote health and health equity.

Within the health care system, there are multi-payer federal and state initiatives as well as Medicaid-specific initiatives focused on addressing social needs. These include models under the Center for Medicare and Medicaid Innovation (CMMI), Medicaid delivery system and payment reform initiatives, and options under Medicaid.

Managed care plans and providers also are engaged in activities to identify and address social needs. For example, 19 states required Medicaid managed care plans to screen for and/or provide referrals for social needs in 2017, and a recent survey of Medicaid managed care plans found that almost all (91%) responding plans reported activities to support the social determinants.
Importance of Addressing Social Determinants

- Though health care is essential to health, it is a relatively weak health determinant.
- Research shows that health outcomes are driven by an array of factors, including underlying genetics, health behaviors, social and environmental factors, and health care.
- While there is currently no consensus in the research on the magnitude of the relative contributions of each of these factors to health, studies suggest that health behaviors, such as smoking, diet, and exercise, and social and economic factors are the primary drivers of health outcomes, and social and economic factors can shape individuals’ health behaviors.
- Further, evidence shows that stress negatively affects health across the lifespan and that environmental factors may have multi-generational impacts.
- Addressing social determinants of health is not only important for improving overall health, but also for reducing health disparities that are often rooted in social and economic disadvantages.
An approach that incorporates health consideration into decision making across sectors and policy areas

Identifies the ways in which decisions in multiple sectors affect health, and how improved health can support the goals of these sectors

The ACA established the National Prevention Council (20 federal departments, agencies, offices that worked with multiple stakeholders to develop the National Prevention Strategy
Accountable Health Communities

- Provides funding to test whether systematically identifying and addressing the health-related social needs of Medicare and Medicaid beneficiaries through screening, referral, and community navigation services will affect health costs and reduce inpatient and outpatient utilization.
- In 2017, CMMI awarded 32 grants to organizations to participate in the model over a five-year period.
- Twelve awardees will provide navigation services to assist high-risk beneficiaries with accessing community services and
- 20 awardees will encourage partner alignment to ensure that community services are available and responsive to the needs of enrollees.
Arizona requires coordination of community resources like housing and utility assistance under its managed long-term services and supports (MLTSS) contract. The state provides state-only funding in conjunction with its managed behavioral health contract to provide housing assistance. The state also encourages health plans to coordinate with the Veterans’ Administration and other programs to meet members’ social support needs.

The District of Columbia encourages MCOs to refer beneficiaries with three or more chronic conditions to the “My Health GPS” Health Home program for care coordination and case management services, including a biopsychosocial needs assessment and referral to community and social support services.

Louisiana requires its plans to screen for problem gaming and tobacco use and requires referrals to Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and the Louisiana Permanent Supportive Housing program when appropriate.

Nebraska requires MCOs to have staff trained on social determinants of health and be familiar with community resources; plans are also required to have policies to address members with multiple biopsychosocial needs.
Current Contextual Challenges

- The Trump Administration is pursuing a range of new policies and policy changes, including enforcing and expanding work requirements associated with public programs and reducing funding for prevention and public health.

- These changes may limit individuals’ access to assistance programs to address health and other needs and reduce resources available to address social determinants of health.
Of all the public health issues we currently face, perhaps the most central is the role that toxic stress and trauma play in the basic vulnerability of individuals, families, and communities.

Science is now clear, those things that we experience and/or witness, especially as children, can result in changes to brain functioning, and therefore have a significant impact on our future behavior, health, and overall well-being.
Trauma experiences and the disruptions caused, particularly in a child’s life, may result in temporary of permanent effects on his or her brain.

These lead to developmental delays or regression, self-regulation problems, difficult social relationships and learning problems.

Toxic stress is a “strong, frequent, and/or prolonged activation of the body’s stress management system” in response to repeated intense adverse experiences.

The more adverse experiences, the greater the likelihood of health problems, including heart disease, diabetes, substance use disorders and mental health disorders, including depression.
Perhaps the most debilitating issues for the populations we collectively serve are not the disorders they present with, but rather poverty, disenfranchisement, and the ancillary social problems that these conditions exacerbate.

There are significantly increased rates of depression among low socioeconomic groups, and exposure to risk factors is disproportionately high in contexts characterized by social disadvantage where vulnerable groups are overrepresented.
Social Determinants and Behavioral Health

- There is convincing evidence of the correlation between depression/other behavioral health disorders and stressful life events.
- Reasonable evidence implicates discrimination, income inequality, food insecurity, hunger, unemployment, toxins, urbanization, lack of housing, overcrowding, low social capital, poor sanitation and built environment, and minority ethnicity.
- Overall rates of mental health service use are generally lower amongst the disadvantaged. Low mental health literacy and stigma may reduce the ability of people with depression and other behavioral health disorders to use treatment services effectively.
Advocacy

- Resources are allocated based on policy decisions by policy makers (Advocacy)
- Partnerships with social service agencies
- Getting upstream by addressing the social determinants, particularly in childhood, is an effective prevention strategy and could both bend the cost curve and improve the health and well being of the individuals, families and communities we serve and address the B4Stage4 current reality