

Talk with Patients About Social Determinants of Health to Improve Care

Social determinants of health (SDoH) are all of the external factors that affect health outside of the health care delivery system. These factors are critical to understanding patient health and care.

SDoHs have a profound effect on health outcomes.

- Patients who live in polluted environments may face increased respiratory issues.
- Patients experiencing financial insecurity or homelessness might have transportation barriers that limit health care access, making them three times more likely to miss multiple appointments.
- Research [shows](#) negative impacts from SDoH contributed to nearly one-third of patient deaths in 2011.

These issues highlight the importance of discussing SDoH with patients and developing language to address those challenges.

A recent [white paper](#) on the results of a 500-patient survey suggested

that despite the noted importance of SDoH in health care, few clinicians are successfully discussing or addressing social issues with patients. Sixty-eight percent of patients surveyed experienced at least one of the social determinants of health, but over 46 percent of patients offered assistance with an SDoH stressor declined that help.

The survey found that clinicians who attempt to discuss SDoH with their



patients may not be approaching the conversation effectively. Most



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conversations about SDoH happen with patients who are least likely to be impacted by these factors or who are least likely to accept help in addressing these issues.

How clinicians see their role in addressing SDoH may factor into this lack of success. In a 2018 [survey of clinicians](#), nearly half responded that they felt helping get affordable housing was not within the capabilities of their clinic, while 31 percent responded that other resources were better positioned for help getting sufficient food. A lack of experience with discussing non-medical determinants also was cited.

One important step in addressing often hidden SDoH issues is asking patients about potential social challenges in a sensitive and culturally acceptable way. A growing number of clinical tools can help frontline practitioners ask about problems such as lack of employment, food insecurity, and discrimination; or factors that can further complicate care such as low literacy, legal or immigration status, fears regarding health care or barriers to making appointments. For example, a simple screening question such as “do you ever have difficulty making ends meet at the end of the month?” can be used to identify patients living below the poverty line.

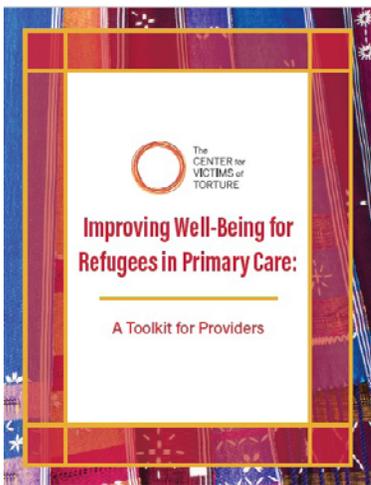
Asking about these issues in a caring way is essential in its own right because evidence shows that compassion and empathy make patients more open about their symptoms and concerns, yielding more satisfying interactions, and more accurate diagnoses that directly affect patient care.

Tips and Resources for Talking to Patients About Social Determinants of Health

- ♦ Patients often feel guilt for their social need. Part of delivering compassionate care is alleviating that guilt. If patients apologize for not wearing underwear or ask to charge their phone, for example, reassure them that their situation is not a burden to you providing good care.
- ♦ Patients can often feel irrational about the fears and SDoH stressors they harbor. Normalize those fears by assuring the patient that others have the same feelings.
- ♦ Reframe your patient-provider communication in these instances from reactive to proactive. Instead of comforting a patient who is upset by their stress-related symptoms, frame those feelings as normal from the onset.
- ♦ [The CLEAR toolkit](#) is a set of clinical decision aids to help clinicians adopt a social determinants of health approach in everyday practice.
- ♦ The Protocol for Responding to and Assessing Patients’ Assets, Risks, and Experiences ([PRAPARE](#)) is a screening tool that is part of a national effort to help health centers and other providers collect the data needed to better understand and act on their patients’ social determinants of health.
- ♦ [Upstream Risks Screening Tool & Guide](#) contains suggested language and questions on education, employment, social support, immigration, financial strain, housing insecurity and quality, food insecurity, transportation, violence exposure, stress, and civic engagement.

CLINICAL CORNER

Improving Outcomes for Refugee Patients



The Center for Victims of Torture (CVT) has just released a free, downloadable toolkit for clinicians who work with refugee patients.

Many of the examples and case studies in the toolkit are based on CVT’s clinical work with Karen refugees as part of their [Healing Hearts program](#).

“Improving Well Being for

Refugees in Primary Care: A Toolkit for Providers” gives clinicians the tools to improve treatment plans for patients

who have lived through traumatic experiences.

The toolkit acknowledges the difficulty of fully attending refugee patients with complex, interrelated needs in fast-paced primary care systems, and demonstrates the impact of language used by clinicians with concrete examples from CVT’s experience in the clinic setting.

The toolkit depicts scenarios between a provider and patient to illustrate how asking questions in a more culturally-appropriate way can yield richer information to address a patient’s health issues. It includes concrete examples and recommendations for medical providers to incorporate into their practice.

[More >>](#)

[Download the toolkit.](#)

NEWS AND RESOURCES



New *The State We're In* Podcast: the Role Community Plays in Individual Health

Produced by the BlueCross BlueShield Minnesota Center for Prevention, *The State We're In* podcast explores themes related to health, health equity, and community. In this episode, LaTrisha Vetaw discusses the roles of individuals and community, the importance that lived experiences and seeing yourself as a part of your community play in shifting the narrative around health, especially physical activity, access to healthy spaces such as parks and walking paths. Vetaw has over a decade of experience serving her community, both as Health Policy and Advocacy Director at NorthPoint Health and Wellness Center and most recently as a Minneapolis Park Commissioner At-Large. [More >>](#)



Video Promotes Breastfeeding to Somali Moms

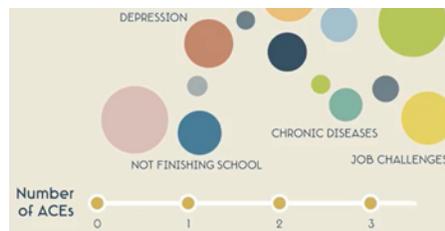
The video, produced by Allina Health and WellShare International, with assistance from Somali WIC breastfeeding peer counselors, explains the benefits of exclusive breastfeeding in Somali with English subtitles.

[More >>](#)



Poll Shows Impact of Social Isolation and Loneliness on Older Adult Health

Chronic loneliness is associated with memory loss, physical deterioration, eroding mental health, and lower life expectancy. The recent AARP-sponsored University of Michigan National Poll on Healthy Aging asked a national sample of adults age 50–80 about their health, health behaviors, and experiences and feelings related to companionship and social isolation. One in three respondents reported feeling a lack of companionship, and 27 percent reported feeling isolated from others during the past year. Older adults who are unpaid caregivers, are low-income, or that identify as LGBT are at an increased risk for chronic loneliness. The poll highlights the importance of treating isolation and loneliness as a public health issue. [More >>](#)



Resources to Prevent Adverse Childhood Experiences (ACEs)

The wide-ranging health and social consequences of ACEs underscore the importance of preventing them before they happen. This Centers for Disease Control and Prevention online resource contains links to tools and research on how ACEs can be prevented. [More >>](#)



Website to Help Older Adults Recognize and Reduce Isolation

AARP Foundation's Connect2Affect initiative is an online resource to help build the social connections older adults need to thrive, including a searchable directory to find nearby programs and services such as transportation, volunteer programs, and senior centers. [More >>](#)



Decolonizing the American Indian Diet to Improve Health

American Indians are [twice as likely](#) as whites to have Type 2 diabetes, and they have 1.5 times the [rate of obesity](#) as non-Hispanic whites. By returning to a diet that is closer to what their ancestors ate, indigenous communities in Minnesota are trying to curb a rising health crisis.

Dream of Wild Health (DWH), is a nonprofit that aims to bring indigenous foods into the urban American Indian diet. DWH runs a community-supported agriculture program that sells produce including native corn, beans, and squash at three farmers markets in Minneapolis and St. Paul. DWH partners with urban and tribal organizations on programs that work to restore the mental, physical, and emotional health of the American Indian community. [More >>](#)

EVENTS



National Minority Health Month – April 2019

April is National Minority Health Month, and the theme for this year's observance is Active & Healthy. Physical activity promotes health and reduces the risk of chronic diseases and other conditions that are more common or severe among racial and ethnic minority groups. The Office of Minority Health will join partners throughout the country in raising awareness about the important role an active lifestyle plays in staying healthy throughout the month of April.

[More >>](#)



UNIVERSITY OF MINNESOTA

Global Health Course May 6-31, 2019 University of Minnesota Minneapolis, MN

Offered in collaboration with the Centers for Disease Control and Prevention, this four-week in-person global health course provides intensive training ideal for any physician or health care provider who serves a globally mobile population, such as immigrants, refugees or international travelers. The course is comprised of lectures, case presentations, classroom discussions, simulation scenarios, and laboratory sessions. [More >>](#)



SAVE THE DATE

Becoming an Asthma Educator and Care Manager – Licensed School Nurses and Public Health Nurses Thursday, June 13, 2019 Willmar, MN

Asthma rates are higher in low-income areas and among minorities. Offered by the Minnesota Department of Health Asthma Program, this free workshop is for licensed school nurses and public health nurses working in Minnesota schools and communities. Registration is limited to 50, on a first come, first served basis. For more information, contact the [MDH Asthma Program](mailto:health.asthma@state.mn.us), health.asthma@state.mn.us.

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