

# **SOCIAL DETERMINANTS OF HEALTH**

California Task Force Member primer developed in collaboration with Dr. Lucy Andrews, Commissioner Lara appointee and Task Force representative for hospice and palliative care providers

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# **QUALIFICATIONS, ASSUMPTIONS AND LIMITING CONDITIONS**

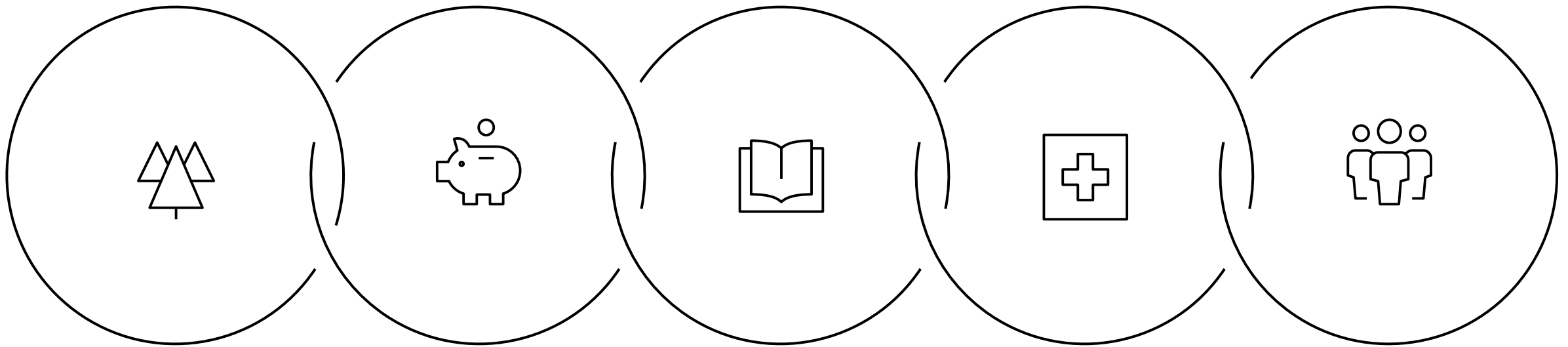
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# WHAT ARE SOCIAL DETERMINANTS OF HEALTH?

**Social Determinants of Health (SDoH)** are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks



## Physical environment

- Housing and safety
- Transportation
- Access to public spaces and parks

## Economic stability

- Employment
- Income
- Debt
- Job opportunities

## Education

- Language and literacy skills
- Access to information
- Quality of education

## Health care

- Insurance coverage
- Provider availability
- Quality of care

## Community

- Social network
- Support groups
- Proximity of friends and family

Source: U.S. Department of Health and Human Services

# WHY ARE SOCIAL DETERMINANTS OF HEALTH IMPORTANT?

## SDoH Case Study: Medicare Advantage (MA)



### Situation

- Social isolation is a significant issue for aging adults and can have a major impact on overall health
- MA plans in the Western U.S. implemented programs to connect members who self-identified as lonely with social workers and volunteer phone pals



### Action

- Social workers and volunteer phone pals regularly called or visited to build relationships and help address members' needs, including:
  - Assisting with transportation
  - Accomplishing house chores
  - Providing companionship
  - Providing other services



### Results

- Program alleviated burden and stress on family caregivers while enriching lives of members and reducing feelings of loneliness
- After implementation, the MA plans saw:
  - 56% increase in member engagement with other programs (e.g., exercise programs)
  - 21% decrease in hospital admissions
  - 3% decrease in emergency department use

## Influence of SDoH on health outcomes:

Proportion of a health outcome influenced by SDoH

**70%**

Proportion of a premature death linked to SDoH

**60%**

## Value of SDoH-driven wellness programs:

**3%**

Hospital re-admission rate for participants in a SDoH focused wellness program

**21%**

National average hospital re-admission rate

Sources: Influence on health outcomes (Population Health Institute, University of Wisconsin); contribution to premature death (U.S. Dept. of Health and Human Services); hospital re-admission rates (Senior Helpers)



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