



STARFIELD SUMMIT

...where primary care research inspires policy and practice

## STARFIELD HEALTH EQUITY SUMMIT ISSUE BRIEF

### Theme: Social Determinants of Health in Primary Care

Title of IGNITE Presentation Topic

An Action Learning Approach to Teaching the Social Determinants of Health

Why This Is an Important Topic to Address (brief description):

- Inequities in health stem largely from social determinants, and result in significant differences in health and health outcomes. Addressing the underlying causes of disease and ill health is necessary to improve the health of individuals, communities and large populations. Health professionals (HP) need to be educated about these root causes of disease, how to address them and approach them together with communities, learning from the communities' expertise.
- Most approaches to educating HP about the "Social Determinants of Health" (SDH) have involved mostly classroom activities and lecturing, without emphasis on true community engagement or experiential learning in the community with community members as equal partners.
- Clinicians' training influences the way they will practice for the rest of their professional careers. Providing these learners with experiential opportunities to engage in community improvement and addressing SDH will hopefully affect their ability to engage communities and improve health throughout the rest of their lives.

What We Think We Know (Bulleted evidence + Seminal references):

- The literature shows us multiple frameworks for addressing the SDH that can be adapted to teaching.
- Some Frameworks put the community in charge of addressing the improvement of population health and the well-being of the community. In some cities, public health departments address upstream, structural and social factors that perpetuate health inequities. WHO provides a framework with a broad public health and systems context for impacting the SDH. CDC's Tom Frieden's framework shows us the largest impact for population health interventions to improve health is to address socioeconomic factors, yet we continue to educate clinicians to mostly only work on the top of the pyramid, with less impact in overall health.
- New frameworks and requirements for education of health professionals on the SDH are emerging for all health professions. ACGME now requires that institutions engage residents in the use of data and QI to improve systems of care, reduce health care disparities, and improve patient outcomes through experiential learning. The ABFM addresses SDH in its milestones.
- The recently published IOM Framework for Educating Health Professionals to Address the SDH exhorts us to create -through education- highly competent professionals who understand and act on the SDH in ways that advance communities and individuals toward greater health equity.

#### References

- A Framework for Educating Health Professionals to Address the Social Determinants of Health authored by the Committee on Educating Health Professionals to Address the SDH; Board on Global Health; Institute of Medicine; National Academies of Sciences, Engineering, and Medicine. The PDF is available from The National Academy Press at <http://www.nap.edu/21923>
- The Population Health Milestone-Based Curriculum with link to different specialty reports: <https://cfm.duke.edu/population-health/population-health-milestones-graduate-medical-education> Full report [https://cfm.duke.edu/files/field/attachments/Population%20Health%20Milestones%20in%20Graduate%20Medical%20Education\\_web\\_0.pdf](https://cfm.duke.edu/files/field/attachments/Population%20Health%20Milestones%20in%20Graduate%20Medical%20Education_web_0.pdf)
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- The Practical Playbook: Helping Public Health and Primary Care Work Together to Improve Population Health. <https://www.practicalplaybook.org/>
- ACGME CLER brochure accessed 4.10.17 [https://www.acgme.org/Portals/0/PDFs/CLER/CLER\\_Brochure.pdf](https://www.acgme.org/Portals/0/PDFs/CLER/CLER_Brochure.pdf)
- Bay Area Regional Health Inequities Initiative: BARHII's Public Health Framework for Reducing Health Inequities. 2014 <http://barhii.org/framework/>
- Structural competency, website calling for a new approach to the relationships among race, class, and symptom expression- multiple links to articles and curriculum: <http://structuralcompetency.org>
- Using Social Determinants of Health to Link Health Workforce Diversity, Care Quality and Access, and Health Disparities to Achieve Health Equity in Nursing. Williams SD, Hansen K, Smithey M, et al. Public Health Reports. 2014;129 (Suppl 2):32-36
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- Principles of Community Engagement- 2nd edition (2011) [https://www.atsdr.cdc.gov/communityengagement/pdf/PCE\\_Report\\_508\\_FINAL.pdf](https://www.atsdr.cdc.gov/communityengagement/pdf/PCE_Report_508_FINAL.pdf)
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### Questions for Group Discussion

#### Questions to Address in Group Discussion

- What do we need to do to graduate true “upstreamists” in the delivery of health care? What kind of curriculum can we develop, and implement that will educate clinicians about SDH, engaging them with community partners in a collaborative manner? What should the elements of the curriculum be?
- How should academic centers create (and pay for) time in clinicians’ schedules to allow them to become involved in experiences to address the SDH?
- How do we get out of traditional lectures and train people who will look for the root causes of illness, and help advance whole communities toward greater health equity?
- What methods should be used to evaluate the learner and community outcomes of the new curriculum on SDH? What kind of data should be gathered and what should be measured to track and assess skill development?
- How do we engage nay-sayers, those who think medical education should only involve the “biomedical determinants of health”?
- Will educating HP learners about SDH help improve the health and health equity of the nation? How will we measure success? Is there a way to measure return on investment?

#### Implications for Action (In Research, Education, Policy, Practice and Organizational and Community Action)

- New non-traditional lectures and models of training health professionals will emerge.
- Academic centers will need to provide more time for education of social determinants on health, give social determinants the importance currently given to training on the “biological determinants of health”.
- Learners, faculty and researchers will dedicate more time to the understanding of the root causes of illness, they will engage with communities, and help advance whole communities toward greater health equity.
- The outcomes of these new education plans will need to be researched.
- There needs to be a common methodology developed for capturing the impact of curriculums that address the social determinants of health. Metrics to measure the success of these new educational models will need to be defined.
- Can/Will Electronic Health Records assess community data and link SDH to individual patient care?