Social Determinants of Health (SDOH) and Health Equity (HE) Subcommittee and Recommendations

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SDOH and Health Equity Subcommittee Chair
The charge of the Social Determinants of Health & Health Equity Subcommittee is to:

- Identify how the themes of social determinants of health (SDOH) and health equity (HE) can contribute to the organizing framework of our charge, and their relation to health disparities and law and policy.

- Conduct a high-level discussion of the approach to integrate SDOH and HE in Healthy People 2030 (HP2030)

- Consider how social determinants of health and health equity relate to
  - health disparities
  - law and policy
• **Members:** Glenda Wrenn Gordon (chair), Susan Goekler, Cynthia Gomez, Dushanka Kleinman, Nico Pronk, and Joel Teitelbaum

• **Scope of Work/Deliverables:** Develop a report of recommendations regarding the:
  1. Role of SDOH and HE in the **priorities** and **scope** of HP2030
  2. **Inclusion of cross-cutting themes** of SDOH and HE throughout HP2030

• **Future Work:** Develop recommendations for how to represent these themes in HP2030, including:
  o How best to integrate SDOH into measurement and reporting into the objectives
  o The relationship between SDOH and HE
Since the June 27 Secretary’s Advisory Committee meeting, the SDOH & HE Subcommittee met twice by conference call:

- August 8, 2017
- August 16, 2017
Overview of Issues Discussed

- Examined the history of SDOH in Healthy People, and the progress achieved in HP2020 for SDOH-related objectives
- Discussed what approach should be used for SDOH in HP2030 and how adding the concept of health equity might inform that approach
  - Recommendations shared with the Approaches subcommittee
- Studied whether current measurement and interventions are adequate to cover SDOH and Health Equity or if there are new strategies and measures that should be explored
- Utilized a broad conceptualization of SDOH and Health Equity to discuss: adequacy of current SDOH framework; advances and new conceptualizations of health equity; definitions and nomenclature; and the relationship between SDOH and Health Equity.
To understand how Healthy People 2020 currently incorporates SDOH into the initiative’s structure

- Social Determinants is one of the 12 topics that organize the 26 Leading Health Indicators (LHI)

- Created with Healthy People 2020, the SDOH topic area has 33 objectives, with 8 objectives that are newly created and not part of other existing Topic Areas
The evolution of reporting progress by race/ethnicity over time in Healthy People

- Healthy People 2000 reported on race/ethnicity progress in the final report

- Healthy People 2010 integrated progress by race/ethnicity through all the Topic Areas
Considerations

Reporting on SDOH is new for Healthy People 2020 and many SDOH objectives are informational and do not have an explicit target

• Difficulty of setting targets without clearly identified and defined evidence based interventions

• May need to establish a baseline measure for certain targets
How the themes of SDOH and health equity can contribute to the Organizing Framework

**Recommendation 1.1:**
• Include SDOH and Health Equity as Cross-Cutting Themes in Healthy People 2030.

**Rationale:**
• Including SDOH and health equity as cross-cutting themes could encourage prioritization of SDOH and health equity within topic areas, and could also prompt Healthy People topic areas to assess opportunities to address SDOH when they might not otherwise do so.

**Issues for Consideration:**
• In the proposed HP2030 Framework and approach, SDOH and Health Equity are addressed as cross-cutting themes.
• There are opportunities to incorporate an understanding of the impact of SDOH and the goal of health equity into other aspects of Healthy People 2030, such as data, and to take SDOH and health equity into consideration in decisions about prioritizing Healthy People objectives.
Recommendation 1.2:
• Maintain SDOH as a distinct topic area.

Rationale:
• Maintaining a separate topic area for SDOH would ensure that it continues to be acknowledged as a significant and uniquely overarching public health issue, and that progress towards addressing SDOH (and achieving health equity) is readily assessed. Healthy People users will be able to select and view SDOH data separately, even if the data are embedded within other topic areas. This will make it easier for groups that are doing work to address SDOH to use Healthy People data.
• The creation of the National Institute on Minority Health and Health Disparities (NIMHD) offers an example of maintaining a separate identify for an issue, even as its work is integrated into that of other, existing groups.

Recommendation 1.2, continued:

Rationale (continued):
- This remains a relatively new domain within Healthy People, and several objectives within the SDOH Topic Area lack targets.
- While there have been important advances in the understanding of SDOH during this decade, maintaining a separate topic area for SDOH would reflect the developmental status of public health approaches to addressing SDOH.

Issues for Consideration:
- SDOH measures may be based on data from non-health sectors, with limitations on how they are measured.
- Due to the multi-sectoral nature of SDOH, a more integrated organizational approach could encourage advances in measurement of SDOH, and the identification of emerging best practices for strategies to address SDOH.
How Social Determinants of Health should be considered as an objective selection criterion within Healthy People 2030

**Recommendation 2:**
- SDOH should be applied as a selection criterion for Topic Area objectives.

**Rationale:**
- As a Topic Area workgroup is reviewing objectives and determining what to include or exclude, this criterion could ensure that objectives related to SDOH are included in Healthy People 2030 where appropriate. For example, if a Topic Area workgroup wanted to eliminate the objective on high school graduation rates, which are a strong indicator for SDOH, this criterion would support its inclusion.

**Issues for Consideration:**
- This recommendation will be of value in developing objective ways to prioritize objectives.
- Criteria for relevance of additional SDOH objectives may include factors such as whether:
  - a measure has been identified,
  - a valid data source is available,
  - an evidence base has been established for interventions that can result in significant progress on the objective or LHI.
How Social Determinants of Health and Health Equity Relate to Health Disparities, Law, and Policy

• The Subcommittee reviewed, considered, and continues to discuss how SDOH and Health Equity relate to health disparities, law, and policy.

• Disparities are measured and monitored in an integrated manner throughout many relevant Healthy People 2020 objectives. Within a specific health area, disparities are driven by multiple health determinants such as biological and genetic risk, environmental factors, individual behaviors, and treatment availability.

• SDOH are widely understood to be underlying drivers of health disparities because they are both determinants of disparities that are observed in many of the health determinants, and they are directly linked to many health disparities.
How Social Determinants of Health and Health Equity Relate to Health Disparities, Law, and Policy - Continued

• Robert Wood Johnson Foundation (RWJF) distinguishes between health equity and health disparities by suggesting that disparities are what is measured.

• It is important to consider whether measures under the Healthy People 2030 framework should assess: objectives related to social determinants, measures of disparities themselves, or a combination of both.
How Social Determinants of Health and Health Equity Relate to Health Disparities, Law, and Policy

• Given the evolving definition and understanding of health equity, the Committee will review and discuss the brief on health equity under development to explore the historical use of this concept in Healthy People, its evolving definition, and current views on the health equity construct as an achievable outcome.

• The Subcommittee continues to contemplate the ways in which law functions as a SDOH, and how policymaking across a range of health-related social factors (e.g., housing, nutrition, transportation) affects health equity.

• The Subcommittee requested a briefing paper that describes:
  1. How law can create, perpetuate, and ameliorate health-harming social conditions, and
  2. Whether state and local level efforts to implement “Health in All Policies” approaches may serve as a model for addressing SDOH and advancing health equity.
• Continue to explore Health Equity through:
  o Discussion about the Health Equity brief under development.
  o Exploring nomenclature and recent advances in definitions, and measuring and discussing health disparities.

• Further discuss how SDOH and Health Equity relate to health disparities, law, and policy by:
  o Examining SDOH concepts, current science, and the role of SDOH and Health Equity
  o Continuing to contemplate how law functions as a SDOH, and how policymaking across a range of health-related social factors (e.g., housing, nutrition, transportation) affects health equity.
  o Reviewing the brief under development about law.

• Develop additional recommendations in these areas.
SDOH and HE Subcommittee Discussion

Moderated by
Glenda Wrenn Gordon, MD, MSHP, FAPA
SDOH and Health Equity Subcommittee Chair
Next Steps and Committee Vote

Dushanka Kleinman, DDS, MScD
Committee Co-Chair