

Social Determinants of Health (SDoH)

This is an excerpt from the <u>Magellan Healthcare</u> January *eMpowered for Wellness* newsletter, which can be found <u>here</u>. Sign up to receive this monthly newsletter <u>here</u>.

A message from Thomas Lane, NCPS, CRPS, senior director, community and recovery supports

Welcome to Magellan's first 2020 edition of eMpowered for Wellness! Magellan has been creating and sharing the eMpowered for Wellness e-newsletter for more than six years, starting with our first issue in the fall of 2012. We continue to offer thought provoking articles on a range of topics, along with resources and other selected information to advance peer support and peer-provided services throughout healthcare systems and beyond.

This month's feature article covers social determinants of health, including how each maps back to the Eight Dimensions of Wellness. The social determinants of health are an emerging area of social science and have received a great deal of attention over the last several years. So, the question is, what do we do with this knowledge? How can we translate what we've learned, and continue to learn, to improve personal health, well-being and quality of life? Read more in the feature article.

These days, it seems like everyone who is involved in healthcare is talking about social determinants of health, or SDoH for short. So, what's all the attention about? What are SDoH? The World Health Organization defines social determinants of health as follows:

"The circumstances in which people are born, grow up, live, work and age, and the systems put in place to deal with illness. These circumstances are in turn shaped by a wider set of forces: economics, social policies, and politics."

- Social determinants of health key concepts, World Health Organization, 2008

Social determinants include things like housing, access to healthcare, built environment, transportation, education, employment, food security, community and social connections, and economic status. Each of the SDoH, along with other conditions described by different organizations, represent a complex set of factors that impact and influence each other. Ultimately, all of these things contribute to our personal health outcomes and quality of life, *including how long we live!* Pretty important stuff!

As healthcare and other systems continue to assess and interpret data related to SDoH, we are building a clear framework to incorporate and address these factors in our approach to delivering services and supports to promote wellness. This is especially valuable when looking at community and neighborhood health. For many of us who consider ourselves advocates and activists for improving personal well-being and community health, understanding the role and potential of what I call 'community health impact partners' is critical to our work and success.

Community health impact partners can be anyone, really. They may work for healthcare-focused organizations or governmental entities. They may be health activists and advocates. They may be your neighbor who owns a gym, or the volunteer person who organizes a weekly farmer's market. What they have in common is the ability and willingness to look through a lens of wellness when thinking about their role and contributions to their community. If you want to know who a community health impact partner is, just look in a mirror. We all have something to contribute.

There are some great resources out there to further inform our work, too. I encourage you to spend some time exploring these resources to learn more.

- Check out <u>The Community Guide</u>, an excellent web-based portal created by the Community Preventive Services Task Force (CPSTF). This task force was created by the U.S. Department of Health and Human Services in 1996, so they've been doing the work for quite a while now.
- Another resource is the <u>Community Tool Box</u>, a free online portal operated by the Center for Community Health and Development at the University of Kansas.
- If you are interested in the intersection of health, community development and finance, check out Build Healthy Places Network. Their stated mission is to "shift the way organizations work across the health, community development, and finance sectors to collectively advance equity, reduce poverty, and improve health in neighborhoods across the United States."

If you're like me, you will find these resources especially interesting, as they offer new solutions to advance community health. Please share them with others.

If you're interested in learning more about SDoH, take a look at what the World Health Organization is doing. They recently held a strategic meeting on social determinants in Geneva on September 12 and 13, 2019; presentations are available on the website.

Let's shift the conversation. How can we apply what we know about SDoH and community health to impact people? You. Me. Family members, neighbors and co-workers. How can we support improved health and wellness at the individual level? Here's one framework for moving forward.



Eight Dimensions of Wellness

Much of the groundwork in this area was done by a phenomenal researcher, Dr. Peggy Swarbrick. I'm a big fan of the Eight Dimensions of Wellness, as developed by Dr. Swarbrick and adopted by SAMHSA. It's a balanced, holistic framework and readily maps back to the SDoH. Keep in mind the interconnectedness of these dimensions.



Key aspects of wellness

When we use a wellness framework in our work, it's important to have context for what wellness is. I believe the following descriptions of wellness give us a good grounding. I like to keep things simple. Jerry Johnson wrote this in his 1986 book, *New Dimension in Wellness: A Context for Living*.

"Wellness is the process of creating and adapting patterns of behavior that lead to improved health in the wellness dimensions and heightened life satisfaction."

"Wellness is a conscious, deliberate process that requires a person to become aware of and make choices for a more satisfying lifestyle."

My quick view on key takeaways from these extracts –

- 1. **Wellness is a <u>process</u>!** It's a journey, and everyone's path is different, although some common elements are shared. We can learn from one another.
- 2. **Wellness involves <u>patterns</u>!** What does that mean? I like this definition of 'patterns' from the Cambridge dictionary, "...a particular way in which something is done or organized, or in which something happens."
 - As a woodworker, I understand patterns well in terms of the repeatability, the consistency with which something is built. Similarly, the way we go about pursuing improved personal wellness must be rooted in patterns of action and behavior, i.e. the choices we make.



3. Wellness is a <u>deliberate</u> effort! Living well is an intentional thing! It doesn't just happen. Critical to this is choice, as I mentioned above. In 2002, Dr. Steven Onken published a groundbreaking paper, <u>Mental Health Recovery: What Helps and What Hinders</u>, as part of NASMHPD's NTAC series. One of the key findings was the need for skills development around making choices. Having decision support tools and knowing how to use them is foundational, as a person builds decision-making skills. Accordingly, Magellan is compiling resources in this area and we will be sharing a decision-support toolkit on our <u>Recovery and Resiliency e-Learning Center</u>, in early 2020. Be sure to check it out for updates!

Wellness dimensions anchored back to SDoH

So, thinking about SDoH at a personal level through an 'Eight Dimensions of Wellness (8DW)' lens. What does that look like? Here are some thoughts on each of the eight dimensions. Let's start at the top and go clockwise.

- 1. Emotional In my experience, this wellness dimension reflects the other seven and the extent to which an individual has hope in their life
- 2. Financial Maps back to a couple of SDoHs, particularly Employment and Education
- 3. Social Clearly, a connection to Social and Community Support
- 4. Spiritual Closely related to Social and Community Support, as a SDoH
- 5. Occupational Maps back to Employment, but it's really bigger than that
- 6. Physical Mostly mapped back to Access to Healthcare
- 7. Intellectual Ties most directly to Educational
- 8. Environmental Associated with the Built Environment SDoH and Transportation; also connected to the availability of green spaces and access to nutritious food

It's readily apparent these Eight Dimensions of Wellness are interdependent and overlap in many areas. We are whole people. While it's helpful to think about what's going on in our lives in each of these dimensions, the concept of what I call 'wellness-capital' is one way to look at an aggregate picture across the dimensions. More on that next time.

I'll leave you with this. When we are able to look at an overall picture of the resources and organizations in our communities that have the potential to impact the health and well-being of citizens, and recognize that a 'whole community' approach is needed in order to influence each person's health and wellness trajectory, we are able to make progress from a holistic perspective. Just as the Eight Dimensions of Wellness come together and are interrelated, so too is there value in working from a perspective that SDoH are interrelated and connected.

