

Thinking Outside the Box:

Addressing Social Determinants of Health in Pediatric Medicine

Donna Ricketts, MPH

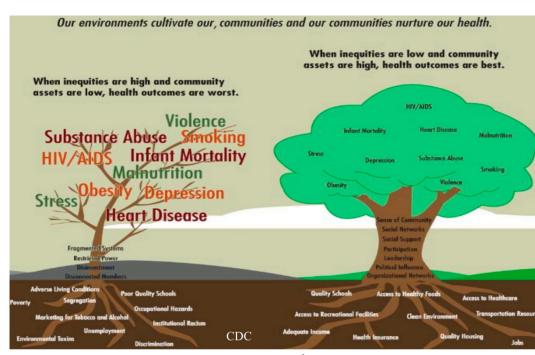
Lecturer, Health Education Department, San Francisco State University

SCOPE OF THE PROBLEM



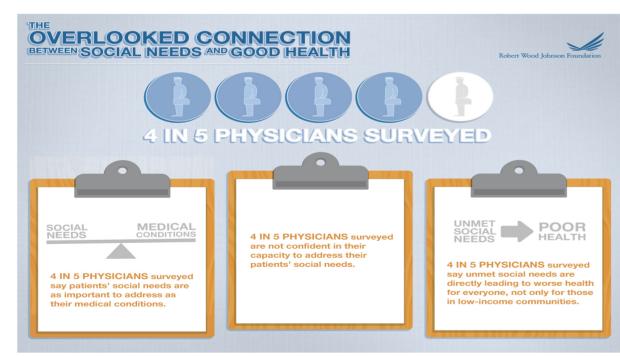
Child health in the United States has become more dependent on social factors.

Research has shown that the social determinants of health (SDOH) are the main factors that will determine whether a child will be healthy or ill.



www.cdc.gov

Despite evidence supporting the role of social forces in determining good or ill health, most physicians finish their training ill-prepared to address these issues.



www.rwj.org

Traditionally, a residency curriculum does not specifically address the social determinants of health or how to advocate for families' cultural, social, or economic needs.

PURPOSE

The purpose of this project was to develop a well-defined and comprehensive Social Determinants of Health curriculum for use in pediatric resident training programs on how to take action to address the broader social determinants of health.

METHODS

LITERATURE REVIEW
EVALUATION OF CURRICULUM
KEY INFORMANT INTERVIEWS

Literature Review

A literature review search was conducted using PubMed and Google Scholar for potentially relevant literature on the existence of social determinants of health curricula in pediatric resident training programs.

Evaluation of Curriculum

I evaluated two well-known pediatric training curriculums for evidence of specific training on the social determinants of health.

Key Informant Interviews

Four informative interviews were conducted in person with 2 experts in the fields of public health and pediatrics.

RESULTS

Literature Review

The review of the literature identified several curriculums that addressed some aspects of SDOH, but no comprehensive curriculum specifically developed to train pediatric residents about the social determinants of health.

Evaluation of Curriculum

The evaluation of these two programs provided insight to want is currently being done to prepare resident pediatricians on addressing the SDOH as well as the current gaps in curriculum.

Key Informant Interviews

The experts responded to three questions:

Why teach social determinants of health to resident pediatricians?

Pediatricians are serving a population that cannot speak for themselves, so by default they will be advocates for their patients whether they know it or not.

How does training affect the way pediatricians practice?

- ➤ Thinking outside the box.
- ➤ Looking at the whole picture.
- >Obtains knowledge of the root causes of ill health and the skills necessary to intervene on behalf of their patients.

How should SDOH curricula be incorporated in to a pediatric residency program?

- ➤ Early, effectively, patiently, and with exquisite care.
- ➤ Longitudinally offering ongoing exposure.
- ➤ Provide opportunities to observe others and practice the behaviors they observed.
- ➤ Provide residents with community exposure to raise awareness to what people in the community face day to day and for residents to learn from the community they serve.

SDOH CURRICULUM

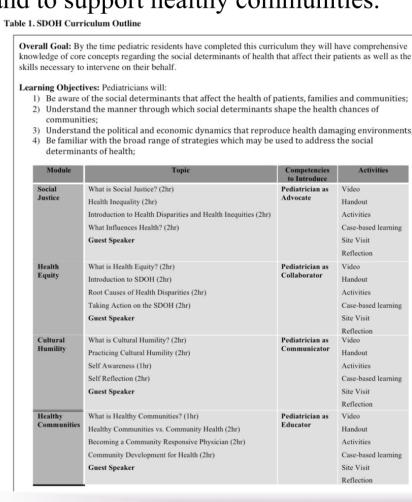
Given the gap in pediatric training that involves explicit attention to the SDOH, a comprehensive curriculum is proposed.

This curriculum consists of 4 core concepts within the SDOH discourse: *Social Justice, Health Equity, Cultural Humility* and *Healthy Communities*. These lessons provide residents with the opportunity to learn about the root causes of health inequities and how to develop strategies to reduce those inequities.

In addition it will focus on four competency areas:

Pediatrician as Advocate - Because pediatricians are serving a population that cannot speak for themselves they must step into the role of advocate and be able to identify needs and facilitate access to resources for patients, families and communities.

Pediatrician as Health Educator - It is crucial that pediatricians become effective in health promotion and disease prevention in order to educate families and to support healthy communities.



Pediatrician as Collaborator –

With the focus being on the health of the child and his/her family, the pediatrician must be able to collaborate with key individuals, organizations and systems whose work impacts the wellbeing of the child.

Pediatrician as Communicator –

It is essential that pediatricians are able to effectively communicate with the community they serve despite social, economic, cultural and language barriers.

CONCLUSION

Pediatric residency programs do not provide adequate training on the SDOH despite the mounting evidence of pediatricians' uneasiness or inability to confront the health inequities and disparities experienced by the community they serve.

To address the gap in pediatric training that entails specific attention to the SDOH, a well-defined and comprehensive Social Determinants of Health curriculum for use in pediatric resident training programs on how to take action to address the broader social determinants of health is proposed.

Acknowledgements

Thank you to Emma Sanchez, Ruth Cox, Mickey Eliason and all the HED Faculty at San Francisco State.

Special thank you to Dr. Gena Lewis, MD and Dr. Melanie M. Tervalon, MD, MPH.

References

Complete list of references available by email request donnar@mail.sfsu.edu