



FACTSHEET

THE WHY, WHAT, AND HOW: ADDRESSING THE SOCIAL DETERMINANTS OF MENTAL HEALTH IN THE PACIFIC SOUTHWEST REGION

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Why do we as behavioral health providers need to be concerned about the social determinants of health?

We as behavioral health providers are striving to provide the highest level of care to the individuals and communities that rely on us, so it is important that we are as current as possible with our knowledge of the field. The current trend in our training focuses on the genetic and behavioral components of mental illness. This focus prioritizes medication management and support for individual behavioral change. But what if we considered that medical care, healthy behaviors, and genes and biology altogether account for only about half of a society's overall health outcomes?ⁱ Then we could begin looking seriously at the **environmental and social conditions** that play an outsized role in the mental health and well-being of those in our care. We call these conditions the **social determinants of health**. They are listed in *Figure 1* on the following page, originally

published by the California Department of Public Health's Office of Health Equity.

The World Health Organization defines the social determinants of health as the conditions in which people "are born, grow, live, work, and age" and notes that these determinants are shaped by the distribution of money, power, and resources. The primary categories of conditions include access to and quality of **education** for children and **employment** for adults, the **distribution of wealth** and other forms of opportunity within society, and characteristics of **housing and other built structures**.ⁱⁱ Research has shown that the social determinants of mental health are largely the same as the social determinants of chronic physical health conditions.ⁱⁱⁱ

But how exactly do these conditions impair our mental health? There are several robust models, one of which is referenced in *Figure 2* on the following page.^{iv}

Mental health and many common mental disorders are shaped to a great extent by the social, economic, and physical environments in which people live.

ACHIEVING HEALTH & MENTAL HEALTH EQUITY AT EVERY LEVEL

Transforming the conditions in which people are **BORN, GROW, LIVE, WORK, and AGE** for optimal health, mental health, and well-being.

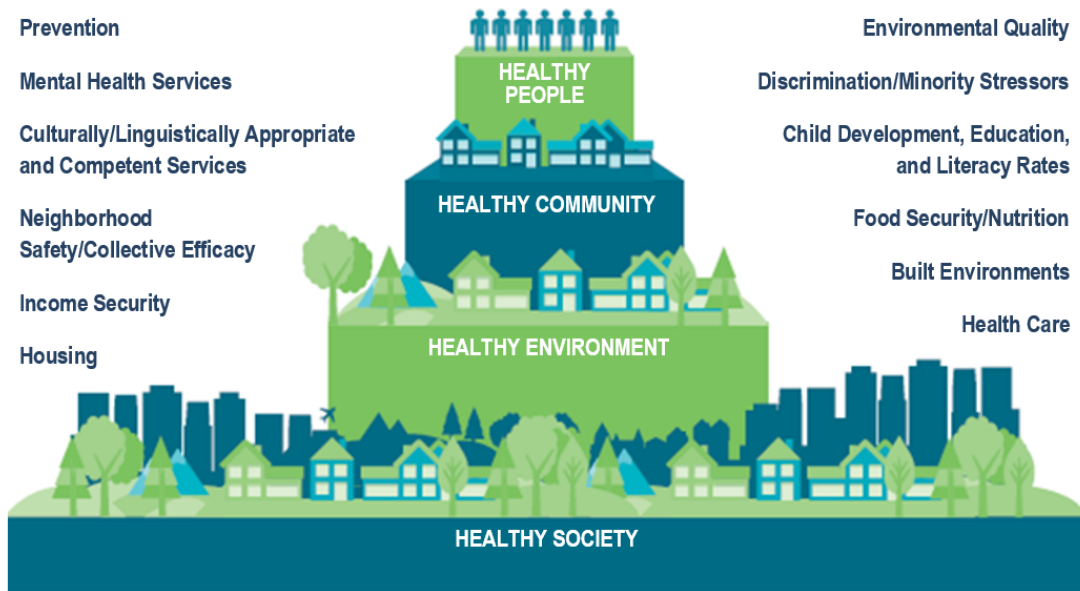


Figure 1. Achieving Health & Mental Health Equity at Every Level
 Source: California Department of Public Health, Office of Health Equity, inspired by World Health Organization, Robert Wood Johnson Foundation, and many others.

CONCEPTUALIZING THE SOCIAL DETERMINANTS OF MENTAL HEALTH

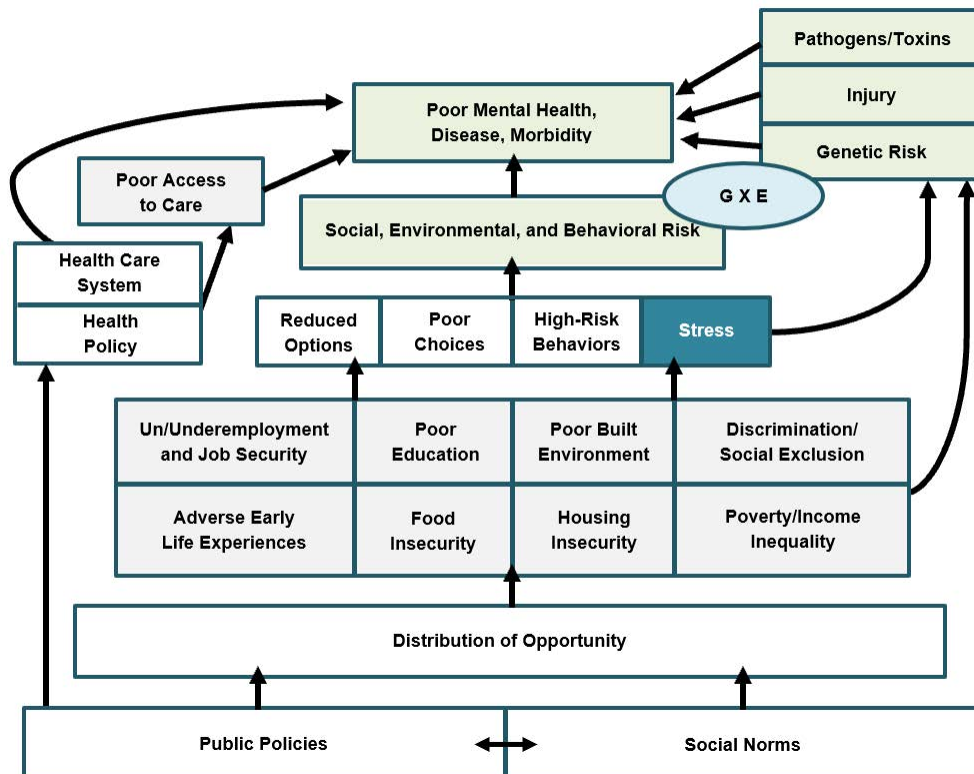


Figure 2. Conceptualizing the Social Determinants of Mental Health
 Original source: <https://focus.psychiatryonline.org/doi/10.1176/appi.focus.20150017>
 Actual authors/designers of the graphic: Michael T. Compton and Ruth Shim.

Consider the role of stress in this model. Stress is caused by our bodies' response to spiking cortisol which, over time, is inflammatory. By itself, stress is not necessarily a bad thing. Well-timed, occasional cortisol spikes can be healthy and productive. Ongoing high levels of cortisol, however, can be depleting and damaging.^v

We all experience stress in our lives, but that does not necessarily lead to mental health challenges. What the social determinants of health model illuminates is that stress doesn't happen in isolation from other factors. Most often, the negative social determinants cluster, causing a cumulative effect. Stress is experienced in the context of broader social, economic, and political settings that, when combined, can be deleterious for people who are already facing the greatest inequities and vulnerabilities. For example, those living in poverty tend to have increased levels of stress coupled with social exclusion, lack of social capital, malnutrition, and exposure to violence and trauma. With this cumulative effect, stress becomes a major risk factor for mental health disorders.

How Do We Begin to Address the Social Determinants?

This extension of our role in the behavioral health field will require some new skill sets. We likely already feel very comfortable with case management, behavioral therapies, and health education, but to be effective at altering the social determinants of mental health, now we must also develop our ability to address the dynamics of social justice, political will and power, policy action, and resource distribution. This requires working in the areas of community capacity building and organizing, civic engagement, strategic partnerships, and advocacy.

Addressing serious mental illness and engaging in evidence-based practices for mental health promotion and treatment require multi-sectorial intersections. No individual,

organization, or even sector can do it alone. Strive for partnerships with civil rights advocates, early childhood educators, education and employment experts, urban planners, healthcare institutions, health plans, and other professions in the public health arena and in the realm of policy and politics. It is these **social justice collaborations** that are required to dismantle generations of historical, political and economic inequities that are embedded throughout the social determinants of health.

With your partners in place, you will need to go through a process to determine which strategies will have the most impact based on which social determinants of health are most prevalent for your clients and program participants. Fortunately, free resources such as the following exist to help you identify best practices for specific social determinants – complete with databases and tools to support your selection and implementation efforts.

Free Resources

County Health Rankings and Roadmaps <http://www.countyhealthrankings.org>

The annual Rankings provide a revealing snapshot of how health is influenced by where we live, learn, work and play, enabling a starting point for change in communities. Maximize your chances of success by choosing policies and programs that have been shown to work in real life AND that are a good fit for your community based on your local data. The [What Works for Health](#) database provides evidence summaries and ratings for policies, programs, and systems changes that can improve health. The [Roadmaps to Health Action Center](#) lays out a series of steps for creating healthy communities.

Free Resources

The Protocol for Responding to and Assessing Patients' Assets, Risks and Experiences (PRAPARE) Implementation and Action Toolkit

<http://www.nachc.org/research-and-data/prepare/toolkit>

This toolkit is freely available online and contains resources, best practices, and lessons learned to help guide each step of the implementation process, ranging from implementation strategies and workflow diagrams to Electronic health Record templates and sample reports to examples of interventions to address the social determinants of health. The PRAPARE Implementation and Action Toolkit is modularized, with its chapters focusing on the major chronological steps that are needed to implement a new data collection initiative on socioeconomic needs and circumstances. It is based on the current experiences of seven health centers.

Food Insecurity: Example of a Social Determinant of Health and its Mental Health Implications in the Pacific Southwest

To illustrate the implications for mental health on a single social determinant of health that is highly relevant for the Pacific Southwest, let's turn our attention to food insecurity. A growing body of research highlights the negative consequences of food insecurity for children's developmental, behavioral health, and mental health outcomes. These consequences can include psychological stress; depression, mood, anxiety, and substance disorders; children's ability to make and maintain friendships; and increased suicidal ideation and attempts among teens.^{vi}

Cities in this region account for 11 out of 43 of the most expensive cities in the world,^{vii} providing an indication of the Pacific Southwest's outsized cost of living. While food insecurity is an unfortunate condition across communities throughout this region, many rural and isolated areas in particular struggle with basics such as access to affordable, healthy food. Swaths of northern and central California, southern Nevada, and much of Arizona are in this unenviable position.^{viii} In the Pacific Islands, the Federated States of Micronesia and Marshall Islands were included in a UNICEF report that raised an alarming picture of rising food prices, with the cost of some staple food items up by as much as 50-100% since 2009. Families reported increased economic stress in meeting the increased cost of food, with impacts on children's access to adequate nutrition, education, and protection.^{ix}

The pain of hunger and food insecurity impacts virtually all racial and ethnic groups and geographic regions. However, the data from California show that low-income Latinos, African Americans, and American Indians/Alaska Natives have been disproportionately impacted by hunger and food insecurity. More than 40 percent of these individuals experience food insecurity, as do more than 26 percent of all California children. Ironically, many of California's most food-insecure communities are located in the very heart of the state's agriculturally rich – and increasingly Latino – San Joaquin Valley. For example, the percentage of children in Fresno County who are food insecure is almost double that of food-insecure children in San Mateo County.^x

Clearly, it is in the best interest of the behavioral health field to prioritize changing the policies and systems that maintain food insecurity. Some advocacy efforts are aimed at funding school, community, and home gardening programs. Others are aimed at

utilizing supplemental poverty measures which take into account an area's cost of living when determining eligibility for food programs. Still others seek to expand the Summer Food Service Program, which is a federally funded program that reimburses public and private schools, nonprofit agencies, and local governments for providing free, nutritious meals to children (18 and younger) in low-income communities through the summer months when school is not in session. There are also efforts such as Waste Not OC^{xi} aimed at reducing waste by distributing to local pantries food from restaurants that would otherwise be thrown away. Combined, these are the kinds of changes that change the landscape into one of food security for all.

Online Tools

Uncovering the social determinants of health and addressing them is critical for improving the health of populations because these factors affect current mental health as well as potential mental health later in life. Through an appropriate assessment process, behavioral health professionals must determine which social factors are driving widespread health disparities so that they know where to intervene. Thus, conducting a social determinants of health assessment is key to improving individual and population health.^{xii} The following are resources to help you design your strategies for data collection, analysis, and action – all of which will differ depending on your setting, scope, clientele, and human and financial capacity.

Online Tools for Assessment, Connection, and Tracking of the Social Determinants of Health

FINDconnect | <http://www.findconnect.org>

FINDconnect is an innovative solution that empowers patients, care teams, and community organizations to collaboratively address social determinants of health such as food insecurity, housing instability, and developmental issues. This family-centered and customizable technology platform enables data sharing across care providers and settings, greatly improving the quality and consistency of care.

Healthify | <https://www.healthify.us>

Healthify helps healthcare organizations find community services, track social needs, and coordinate referrals with community partners to radically improve the health of the people they serve. Using Healthify's tools, users can search, filter, edit, share, and refer community organizations, social services, and government benefits.

NowPow | <http://www.nowpow.com>

NowPow connects people to high quality community resources to help address their chronic health and social conditions or just stay well. From stress management to smoking cessation, fitness classes to family planning, NowPow makes it easy to leverage knowledge into action. NowPow's data engine is a deep and complete community resource directory regularly updated by an in-house team. It has powerful filters and data-driven condition and assessment algorithms built in to ensure that the recommended resources reduce barriers to care.

References

- ⁱ Portrait of Promise: The California Statewide Plan to Promote Health and Mental Health Equity. A Report to the Legislature and the People of California by the Office of Health Equity. Sacramento, CA: California Department of Public Health, Office of Health Equity; August 2015.
- ⁱⁱ Social determinants of mental health. World Health Organization; 2014.
- ⁱⁱⁱ Compton, MT, Shim, RS: The social determinants of mental health. Focus 2015: 13 (4): 419-425.
- ^{iv} Ibid.
- ^v <https://health.clevelandclinic.org/what-happens-when-your-immune-system-gets-stressed-out/>
- ^{vi} <http://mcsilver.nyu.edu/sites/default/files/Child%20Food%20Insecurity%20and%20Mental%20Health.pdf>
- ^{vii} <https://www.expatistan.com/cost-of-living/index>
- ^{viii} <http://map.feedingamerica.org/>
- ^{ix} Situation Monitoring: Food Price Increases in the Pacific Islands. United Nations Children's Fund (UNICEF), Pacific; April 2011.
- ^x Portrait of Promise: The California Statewide Plan to Promote Health and Mental Health Equity. A Report to the Legislature and the People of California by the Office of Health Equity. Sacramento, CA: California Department of Public Health, Office of Health Equity; August 2015.
- ^{xi} <https://www.wastenotoc.org/>
- ^{xii} <https://patientengagementhit.com/news/how-health-centers-measure-the-social-determinants-of-health>



Questions?

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