Social Determinants of Health Part II

EHM E18 Week 2

Today we will:

- 1) Define the SES-health relationship
- 2) Identify natural, built, and social factors of environments.
- 3) Define and apply risk exposure and resource deprivation theory.
- 4) Provide examples of risk factors, protective factors, resilience, and prevention

Social Class and Health

Social Class

<u>Social class</u> = groupings of individuals who are similar in terms of **income**, **education**, **power**, and **prestige** in society.



Sociologists combine these attributes to measure **socioeconomic status** (SES)

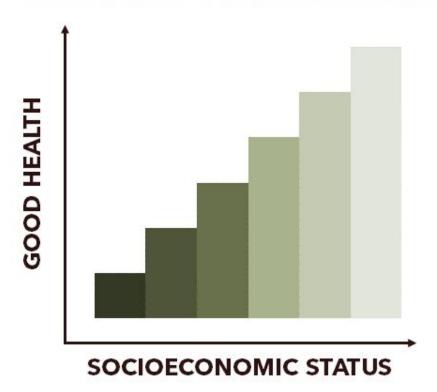
Social class & health

There is a robust, **positive** relationship between social class and health.

As SES increases, health improves

But why is that?

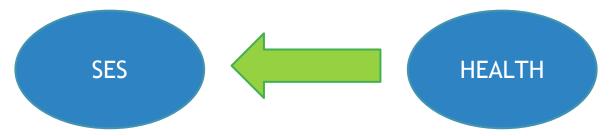
THE HEALTH-WEALTH GRADIENT



Social class & health

When examining the association between **social class and health**, theories fall into two broad categories:

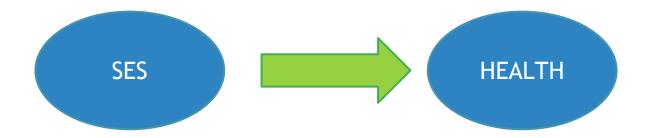
1. **Social Selection**: poor health causes downward mobility (lowering of class position)



Social class & health

When examining the association between social class and health, theories fall into two broad categories:

2. **Social Causation**: class position causes poor or degrading health



Social Causation or Social Selection?

Anna is 27 years old and arrives in your clinic because she has been experiencing regular shortness of breath and wheezing. You ask Anna if she has ever been told she has asthma and she says no. She says that she experienced similar problems when she was in college, but since she was a smoker then, the university clinic doctors told her it was likely due to smoking. She has quit smoking but she is currently unemployed since her difficulty breathing often limits her ability to work and she is currently living in a state that practices "right to work" laws which give employees like her very little protection. She also lives in a non-expansion state and doesn't have insurance at the moment as a result.

Social Causation

Theories of **social causation** also fall into two broad categories:

- 1. Relative Disadvantage
- 2. Absolute Deprivation

Relative Disadvantage

Some theorists argue that **relative disadvantage** is the most important socioeconomic determinant of health.



Relative Disadvantage



Absolute Deprivation

Other researchers argue that **absolute deprivation** is the most important socioeconomic determinant of health.





Absolute Deprivation

Rather than a strictly **psychological** mechanism...

Rick makes more money than me, which is **stressful**.

Absolute Deprivation

...the social condition of absolute deprivation determines access to health resources (preventive factors) and exposure to risks.

Rick makes more money than me, which is **stressful**, but Rick also has **enough money** to provide three meals a day for his family so they aren't hungry or malnourished, while we have to limit our meals and often don't meet nutritional standards.

Social Class and Health

You were asked to answer some questions about the **Jones Family** before lecture today:

- 1. What sliding scale clinics did you find in your community?
- 2. Where these clinics open on Sundays or in the evening? What were their hours?
- 3. What other options for care does someone without insurance like Jon have?

Communities and Health

The Built and Natural Environment

We can divide features of a community or environment into **three** broad categories:

- 1. Natural
- 2. Built
- 3. Social

The Natural Environment

The natural environment: these features exist in the natural world

- Fertile soil
- Green spaces
- Temperature

Why are we talking about natural features in a social determinants class?

The Natural Environment



The Built Environment

Built: these features are man-made

- Quality of housing
- Sidewalks
- Transit access

The Built Environment







The Social Environment

Social: these features depend on social interactions

- Informal Social Control
- Collective efficacy
- Social capital
- Exposure to crime and violence

The Social Environment

Social environments can take many forms.

It can be...

- Where you work
- Where you go to school
- Where you live
- Where you spend time
 - o IRL
 - Online



Social control is the capacity of a group (*not neighborhood per se*) to regulate itself based on desired principles & to realize collective goals. - Yen and Syme (1999)





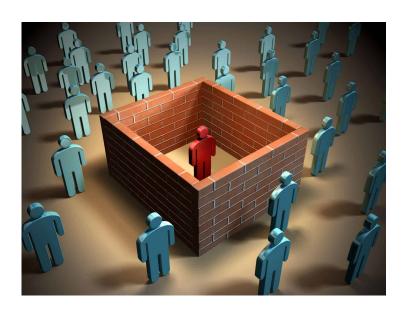
Collective efficacy is social cohesion among neighbors combined with their willingness to intervene on behalf of the common good. - Sampson et al. (1997)



Social capital can be thought of as "who you know". Social capital can be used access economic capital or other resources.



Social isolation is a state of complete or near-complete lack of contact between an individual and society. It is a **lack of** social capital.



Crime and violence are also forms of social control and might restrict how people move about their built or natural environments or how much **stress** they are exposed to.



Risk Exposure Theory

There are two primary theories to explain how these features affect health outcomes:

1. **Risk Exposure Theory**: a high prevalence of social or environmental health risks in certain communities leads to a higher prevalence of disease and death.





Resource Deprivation Theory

There are two primary theories to explain how these features affect health outcomes:

- 1. Risk Exposure Theory
- 2. **Resource Deprivation Theory**: health disparities exist because some groups are more likely than others to live in communities that are lacking the necessary infrastructure for a healthy lifestyle.





Communities and Health

You were asked to answer some questions about the **Jones Family** before lecture today:

- 1. How accessible are bus routes for the Jones Family and others in your community?
- 2. Are food deserts common in your community? How many children live in food insecure households?
- 3. How much would it cost to make the "Budget Friendly Chicken Chili" at your local grocery store?

Social Determinants in Patient Care

Collect narratives from Seattle faculty/WWAMI on these factors

- 1. Risk factors = things that put us at an elevated risk for a given health outcome
- 2. Protective factors = things that decrease our risk for a given health outcome
- 3. Resilience = for individuals that are exposed to risks, ways of adapting and overcoming (I would love if folks could also mention here that this is a lot to ask of a person who is already burdened and that while resilience stories are nice, resilience usually means wear and tear on the body so I hope folks can talk about looking upstream here as well)
- 4. Prevention = community programs that have looked upstream to address some of that factors cover here