



Video Transcript: Social Determinants of Health in Family Planning Care

The Social Determinants of Health in Family Planning Care. This video was created by the Reproductive Health National Training Center (R-H-N-T-C).

Social and structural determinants of health are the conditions in which people are born, live, learn, work, and play. Social determinants of health include things like: employment, education, health care, access to healthy food, stable housing, racial discrimination, and reliable transportation. Structural determinants of health include things like the cultural norms, policies, institutions, and practices that shape the distribution of power and resources within communities.

These determinants play a significant role in shaping opportunities for health and well-being, they can contribute to the experience of chronic stress, and cumulatively impact the development of health during the course of one's life and across generations.

Differences in the social and structural determinants of health shape differences in the conditions we experience and in turn, result in differences in health and health inequities.

Disparities in rates of hypertension are one example. The prevalence of hypertension among Black women of reproductive age, for instance, is more than twice that of women the same age in other racial groups. And, Black women have a higher risk of dying from hypertensive disorders of pregnancy.

Chronic stress, a known risk factor for hypertension, is a driver of this disparity. As a result of structural racism and discrimination, Black communities are more likely to experience poverty, residential segregation, police violence, inadequate access to healthcare, and poor treatment in the healthcare system. These conditions contribute to chronic stress and hypertension among Black communities.

Understanding the social and structural determinants of health among communities served by family planning agencies is key to providing culturally responsive and client-centered care. Family planning providers should screen clients for social determinants of health to understand the conditions of their clients' lives and adjust care accordingly. Additionally, by understanding the social context and stressors among clients, family planning agencies can build partnerships with community organizations so that providers can connect clients with local resources to support the social factors that impact their health.

For example, let's consider Sarah. Sarah is a 26 year old family planning client; she is a student at a community college with a part-time job, and no health insurance. She is given a diagnosis of hypertension.

The family planning provider recognizes potential stressors in Sarah's life and asks her if she would like to talk about how she is feeling as she thinks about balancing school, a job and managing her blood pressure. They explore the stressors in Sarah's life. They talk about who in Sarah's life she feels close to and can reach out to for support. They talk about other social supports to manage stress, including a peer support group at the community center.

They also talk about lifestyle changes that can improve Sarah's blood pressure such as increasing physical activity, getting enough sleep, and making changes to her diet. But, as part of her intake, Sarah filled out a social risks screening form and indicated challenges with food stability. So, the family planning provider offers Sarah information on a local food pantry and a nutrition assistance program. Sarah shares that she is interested in enrolling in the nutrition assistance program. The family planning agency has a relationship with the nutrition assistance program given that many clients' in the community experience food insecurity. The provider is able to give Sarah an application for the nutrition assistance program as well as the name and contact information of the enrollment specialist at the program.

When Sarah is given a referral for a follow-up appointment for monitoring and treatment of her hypertension, the front desk staff calls to make the appointment for her with a primary health care agency that the family planning program has a referral agreement with. The staff asks if Sarah would prefer an in-person visit or if a telehealth visit would be more convenient.

In addition to a follow-up appointment, Sarah was given a prescription for an initial supply of hypertension medication so she could start treatment right away and she was provided the contraceptive method she came in for.

By offering holistic and tailored care, family planning providers can adjust care plans according to the social context of clients' lives, suggest strategies and resources that are realistic and acceptable, and support clients in achieving their full health potential.

For more information, and to find related resources, go to R-H-N-T-C.org