ADDRESSING SOCIAL DETERMINANTS OF HEALTH IN NURSING PRACTICE

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HEALTHY PEOPLE 2020- SDOH

SDOH

Neighborhood and Built Environment

Health and Health Care

Social and Community Context

Education

Economic Stability

(Office of Disease Prevention and Health Promotion, 2017)
SOCIAL DETERMINANTS OF HEALTH

- Social determinants of health (SDOH) are “the conditions in which people are born, grow, work, live, and age” (WHO, 2016), including:
  - Social gradient Stress
  - Early life experience
  - Social exclusion
  - Work
  - Unemployment
  - Social support
  - Addiction
  - Food
  - Transportation

- These important characteristics of the human experience are receiving increased attention due to their influence on health, disparities, and quality of life.
Nurses and other healthcare providers can be on the front lines of addressing these conditions on the individual level.

Nurses on the front lines have an opportunity to have a significant impact on health status among the most vulnerable populations by addressing SDOH as a part of their daily practice.

Nurses are in a unique position to implement interventions that address SDOH and their related health outcomes.
GAPS IN CURRENT PRACTICE

- Nurses must develop a comprehensive understanding of the SDOH and a specific set of assessment skills to address these sometimes intimate issues in practice.

- The nursing literature in the United States with regard to SDOH is emerging yet still limited.

- Historically, SDOH have not been intentionally incorporated into nursing education as a curricular thread.
PROJECT

- Original purpose was to demonstrate that mid fidelity simulation can develop clinical reasoning, cultural competence, and awareness of social determinants of health for RN to BSN students.

- Pilot study revealed lack of basic knowledge and comfort with the content.

- Research purpose revised to further explore findings from the pilot.

- The purpose of this exploratory descriptive research study was to
  - (a) determine the knowledge, attitudes, and beliefs of nurses regarding SDOH, and
  - (b) to discover how the experience will translate into practice.
SAMPLE

- RN to BSN students in Baltimore metropolitan area
  - N=107
  - Average Age: 33
  - Average Years of Practice: 7
  - From multiple specialty areas, primarily acute care settings
METHODS

- SDOH Knowledge, Attitudes, and Beliefs Survey
  - 40 items administered pre and post simulation
  - Adapted from Klein et al., (2011)

- Mid fidelity simulation
  - Participants worked in dyads
  - Simulation focused on malnutrition in the older adult
  - Use of standardized patients

- Reflective narrative completed post simulation.
  - What was the most influential part of the experience?
  - How do you anticipate that participating in the simulation will change your professional nursing practice?
  - What new insight related to the Social Determinants of Health have you gained?
SIMULATION:
STANDARDIZED PATIENTS
RESULTS

- Participants reported differing levels of *knowledge, confidence and likelihood to discuss* different types of SDOH:
  - High levels related to social support, stress, addiction and transportation.
  - Low levels related to social gradient, food insecurity, social exclusion/inclusion, and unemployment and job security.

- All of the participants identified that nurses should be involved in addressing issues related to SDOH in practice.

- Narrative data revealed that the participant’s own discomfort, anticipated patient discomfort, a lack of skill and time, and a dependency on other professionals to address these issues prevented them from adequately addressing the SDOH in their practice.
DISCUSSION

- There is a **pressing need** to address how nurses can best assess for SDOH and provide interventions that mitigate related health outcomes, within the current fast-paced practice environment.

- Findings suggest that nurses believe this is part of nursing practice but lack the skills necessary to develop and lead innovative initiatives that address SDOH in the current fast-paced practice environment.
IMPLICATIONS FOR NURSING PRACTICE

• Get “Back to Basics”.

• Enhance nursing curricula in both academic and clinical settings related to the SDOH.

• Empower nurses to address these issues on individual, community, national, and global level.

• Further research related to nursing practice and SDOH is needed.
There must be a paradigm shift among nurses so that they view addressing SDOH as part of nursing practice and not something that is delegated to others.

Nurses must be part of the larger conversation related to SDOH as there are potentially 3.1 million opportunities to make significant impacts on the health status of the most vulnerable.
THANK YOU!

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