Explaining the Social Determinants of Health

Public health experts use the term “social determinants of health” to refer to the idea that nonmedical factors such as geography, income, and education have a significant effect on health.

While this is an important idea to get across to the public, there are good reasons to rethink the impulse to use the SDOH label. Communications researchers have found that this term doesn’t make sense to the average person. What’s more, the phrase can even leave mistaken impressions that the “social determinants of health” has something to do with socialism or a belief that people lack free will.

Here are helpful things to keep in mind when you’re trying to explain why some demographic groups experience better or worse health outcomes than others.

1. Replace the phrase “social determinants of health” with plain-language alternatives.

Scrap the phrase whenever possible in favor of explaining the concept in ways that people understand. You can start out with the idea that “the places where we live, learn, work, and play shape our health in many ways.” You can use phrases like “the essential conditions for good health” or “the foundations of community health” to focus people on environmental and social factors. You can remind people that environments matter with phrases like “what surrounds us shapes us” or “place matters.”

No matter how you decide to introduce the concept, follow up with explanations and examples that help people grasp what you mean.

2. List less; explain more.

It’s rarely helpful to list numerous social determinants in a single communication, even if you have a graphic to make it more interesting. It’s better to select two factors, explain how each shapes health contexts, and show how the different contexts connect to health outcomes.
3. Replace deterministic phrasing with probabilistic phrasing.

If we want the public to support change, we need to talk in ways that show change is possible. Avoid leaving the impression that demography is destiny. Instead, talk about social conditions in ways that make it clear that we, collectively, design our surroundings—and that we can redesign them to make them better. When we say that a social condition may contribute or could cause a problem, we leave space for an intervention to make a difference.

**See the Difference**

**Instead of this**

The “social determinants of health” are defined as the conditions in the environments in which people live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks. Social determinants of health include aspects of the social environment (e.g., discrimination, income, education level, marital status), the physical environment (e.g., place of residence, crowding conditions, built environment [i.e., buildings, spaces, transportation systems, and products that are created or modified by people]), and health services (e.g., access to and quality of care, insurance status).

Nonmedical issues such as housing, income, transportation, and food insecurity—otherwise known as social determinants of health—account for 60 percent to 80% percent of individual health outcomes.

Housing is an important determinant of health and substandard housing is a major public health issue. Poor housing conditions are linked to a wide range of preventable health conditions, including respiratory infections, asthma, lead poisoning, injuries, and poor mental health.

**Try this**

The places where people live, learn, work, and play shape health in many ways. For example, some neighborhoods have plenty of places to get affordable, nutritious food, while others are cut off from the supply of fresh produce. Place affects diet, which affects health. Other aspects of the places where people live matter, too. The availability of good homes and jobs nearby can create stronger communities, which benefits mental health. On the other hand, the wrong arrangement of buildings and roads can leave people feeling stressed and isolated—and even lead to higher levels of pollution. Our housing, economic, and social policies are also health policies.

People’s incomes and surroundings play a large role in health outcomes, because these factors affect access to nutritious food, clean air and water, opportunities for physical activity, and more.

Homes play a major role in health. When a large share of income goes toward the rent or mortgage, it is often harder for people to afford healthy food—and might mean there isn’t money for fixing leaks or drafts that create damp conditions and can add to breathing problems.

**Suggested Explanations**

Effective explanations build, step-by-step, to show people what affects what and make use of relatable examples to support understanding. Compared to a textbook definition, explanations like the ones below are significantly more effective in shifting attitudes and boosting support for sound public health approaches.
Economic Stability
Our incomes and financial stability affect our health. When people have higher, more stable incomes, they are able to spend money on things that improve their health, such as better medical care or gym memberships. On the other hand, when people are chronically worried about being able to meet household expenses, their bodies may be flooded with unhealthy levels of stress hormones. This toxic stress response contributes to high blood pressure, heart disease, and even cancer.

Housing and Homes
The places where we live shape our lives, including—and especially—our health and safety. Sometimes it’s easy to see how homes affect health. It’s not hard to connect housing to health when lead is in the water, mold is in the air, or crumbling staircases cause injuries. It can be less obvious how the cost of housing affects health, but it makes sense. When housing is expensive, it’s harder to pay medical bills, join sports leagues, or eat well, which opens the door to chronic disease and other health problems. Right now, our policies are causing the cost of houses and apartments to rise steadily, while dampening wage growth and income levels. To ensure that everyone has a fair and full opportunity to be healthy and well, we must make affordability measures a priority in our local, state, and federal housing budgets.

Hunger/Access to Healthy Food

In brief:
About one in eight people in the United States experiences hunger: They aren’t able to get enough food or enough healthy food. For everyone to have a full opportunity for health, we must ensure all neighborhoods have access to fresh, nutritious foods and expand programs that make healthy food affordable for all.

Fuller explanation:
About one in eight people in the United States experiences hunger, which means they aren’t able to get enough food or they aren’t able to get enough healthy food. Our patchy food system doesn’t consistently supply every community with fresh, healthy groceries—and even if they are nearby, they may be too expensive to afford. When it’s not possible to count on getting fresh, healthy food, people eat what’s most readily available or cheapest. Highly processed food usually has low levels of nutrients the body needs but high levels of salt, sugar, or fat. A steady diet of that kind of food can contribute to chronic diseases, such as high blood pressure, diabetes, and heart disease. To ensure everyone has a full and fair opportunity for good health, we can make sure that all neighborhoods have access to fresh and nutritious food and expand programs that make it affordable to eat the foods that keep our bodies healthy and functioning well.

Education Access and Quality
Educational opportunities form part of the foundation of a healthy, thriving society. Because learning opportunities in childhood, adolescence, and adulthood influence people’s skills, employment, and incomes, educational quality affects access to environments and resources that promote good health. When neighborhoods are anchored by good schools, families are more connected, which builds well-being.
Health Care Access and Quality
Good health care is a vital part of a healthy, thriving society. Our families, communities, and economy are all stronger when people can get the medical attention they need when they need it, regardless of their income or circumstances.

A lack of access to care, on the other hand, has a negative ripple effect throughout society. When people can’t see a doctor regularly, it can result in higher levels of health problems that could have been prevented. When people delay getting care due to costs, problems often become harder and more expensive to treat. In the meantime, our neighbors, coworkers, and loved ones aren’t as healthy as they could be, and our health care system isn’t fulfilling its potential.

The quality of care matters, too. Some people avoid care because they can’t see a doctor who speaks a language they understand, or because they have experienced health care discrimination based on their income, their race, or another characteristic. Some health care settings don’t have the resources to ensure that every patient gets the respectful, effective care everyone deserves.

To build a fairer, more prosperous community, we must expand programs that make high-quality health care available, accessible, and affordable for all.

Neighborhood and Built Environment
The places where we live shape our lives, including—and especially—our health and safety. When neighborhoods are thoughtfully planned out, amply resourced, and carefully maintained over time, they support healthy, thriving communities. When we don’t invest appropriately in the built environment, it can undermine health in many ways. For example, when an area is poorly lighted, people may be less likely to walk to everyday destinations. Less physical activity can mean more health problems. We need to make sure all neighborhoods are thoughtfully designed to meet the needs of the people who call them home.

Social and Community Context
People’s relationships and interactions with family, friends, coworkers, and community members can have a major impact on their health and well-being. When people have strong social support and can turn to others for advice or help, it can be easier to resolve life’s problems. When people are disconnected from others, there are fewer opportunities to talk, walk, or laugh together. Without these experiences, physical and mental health can decline.

Many policies we put in place affect social and community connections, for better or worse. For example, when neighborhoods are thoughtfully planned out and well maintained, with good parks and other inviting spaces, people are more likely to get to know each other. When we allow public areas to fall into disrepair or fail to keep communal spaces well-lit and full of life, it can drive people away from civic spaces and from each other.

To ensure everyone has a full and fair opportunity for health, we can adopt approaches and interventions that promote the social connections we all need for well-being.