

SingHealth Community Forum 2022

Social determinants of health based on context of family system

Adj Corinne Ghoh, Department of Social Work, National University of Singapore

Coverage

What are social determinants of health?

How do these factors affect the family's decision in managing their own health and well-being?

How can we include these factors in our service planning and delivery for better health outcomes?



Social determinants of health

- Refer to conditions in which people are born, grow, live, work and age.
- These are non medical factors that influence health outcomes.

(Source :Social determinant of health. The solid facts. World Health Organisation (Europe), 1998)

Research on social determinants of health (WHO, 1998)

People's social and economic conditions affect health outcomes throughout life course

- Poor childhood conditions, financially disadvantaged, those in lower social ladder faced higher risk of serious illness and premature death

Stress harms health

- Social and psychological circumstances can cause long – term stress leading to poor mental health (including anxiety, social isolation, poor self esteem etc)

Research on social determinants of health (WHO, 1998)

Foundations of adult life are laid in prenatal and early childhood.

- Prenatal and infant development is impacted by mother's nourishment, smoking, and poor financial situation.
- Poor nutrition for child will negatively affect growth and development,
- Mental exhaustion and depression associated with poverty reduce the parents' stimulation of the child, and can impact emotional attachment of child.

Social exclusion

- Issues of poverty, unemployment and homeless can lead to poor health outcomes and increased risk of premature death.
- Marginalised groups in society e.g. prisoners, persons with disability, mental illness etc, will have problems gaining access to education and employment and will suffer health and social consequences.

Research on social determinants of health (WHO, 1998)

Unemployment puts health at risk

- The health effects of unemployment are linked to both its psychological consequences and financial problems, especially debt.

Alcohol dependence, illicit drug use and cigarette smoking are all closely associated with markers of social and economic disadvantage

- Drug addiction will worsen inequalities in health and lead to social breakdown.

Research on social determinants of health (WHO, 1998)

Good diet and adequate food supply

- Central for promoting health and wellbeing

Cycling, walking and the use of public transport promote health

- provide exercise, reduce fatal accidents, increase social contact and reduce air pollution.

Friendship, good social relations and strong supportive networks

- improve health at home, at work and in the community. Disadvantaged people can be restricted in their opportunities to obtain and use social capital

“Super Social Determinants of Health”

(Sieck et. al, 2021)



Refers to the activities necessary to ensure equitable access to and use of information and communication technologies, including :

- affordable broadband Internet service,
- Internet-enabled devices,
- access to digital literacy training, quality technical support,
- applications and online content designed to enable and encourage self-sufficiency, participation, and collaboration

Digital Inclusion (Sieck et. al, 2021)

**Neighbourhood
& Physical
Environment**

Education

Food



**Healthcare
system**

**Economic
sustainability**

**Community &
social context**

Digital literacy & Internet Connectivity

- COVID-19 pandemic has accelerated digital adoption with lockdowns, working from home arrangements, online meetings, education and shopping.
- Singapore has among the highest levels of digital coverage in the world.
 - 89% of resident households have access to a computer, and 98% have access to the internet (2019 IMDA Annual Survey on Infocomm Usage)
 - Need to improve digital access of digitally excluded communities

A laboratory setting with a pipette dispensing a drop of yellow liquid into a petri dish. The background is a blurred blue and white, suggesting a clean, clinical environment. The text is overlaid on the image in white, with the main title in a larger font and the subtitle in a smaller, bold font.

Social determinants of health

Research in local context

Systematic review on literature on low socioeconomic citizens in Singapore (including public rental housing communities) (14 articles) (Chan et. al, 2018)

- **Low socioeconomic (SES) influences one's health, rate of morbidity and mortality**
- **SES is linked to education level, income status, employment status**
- **Housing in Singapore is linked to SES especially public rental housing**



Local Research on Social Determinants of Health

Health status of low SES

Prevalence of depression due to medical comorbidities such as falls and visual impairment

Low awareness of diseases

Untreated and uncontrolled hypertension due to being busy and lack of time, cost of screening and treatment

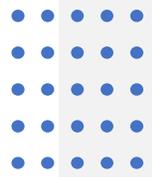
Link between chronic pain and unemployment due to issues of instrumental activities of daily living

Protective factors are social networks



Health seeking behaviour of low SES

- **Low participation in health screening** due to lack of time, lack interest and thinking that they are not at risk
- **Not knowing** where to go for screening, feel that they are healthy or not at risk and lack interest
- **Lack of trust** in healthcare system/ professionals
 - Lack of time to discuss about screening
 - Embarrassment associated with screening modality eg PAP smear for cervical cancer
 - Misconception that mammogram cause cancer
 - Traditional medicine better (social distancing with doctors)
- **Fear** of diagnosis/treatment



Healthcare Utilisation

- SES and perception influence healthcare utilisation
- Rely on own knowledge or family/friends before seeking medical treatment and advice
 - more preferred (public housing communities) alternative medical practitioners to western- trained doctors in primary care. Some reasons include waiting time, costs of treatment, priorities, fear of diagnosis etc
- Strong consistent link between public rental housing patients and readmission risk , ED attendances and increased utilisation of hospital services (Low et. al (2016)).
- **Knowledge, attitude and priorities** play a part



How do factors of SDH affect family's decision on managing their own health and well-being?

Case Example



The Tan Family resides in a HDB rental flat. Husband aged 45, has been in out of prison. He works as a food deliverer. Income is unstable ranging from \$2000 to \$0 if he does not work. He smokes heavily.

Wife, aged 38, is working part time to make ends meet and also looking after 3 kids aged 5, 8 and 10 years. She is stressed looking after the children and has history of depression.

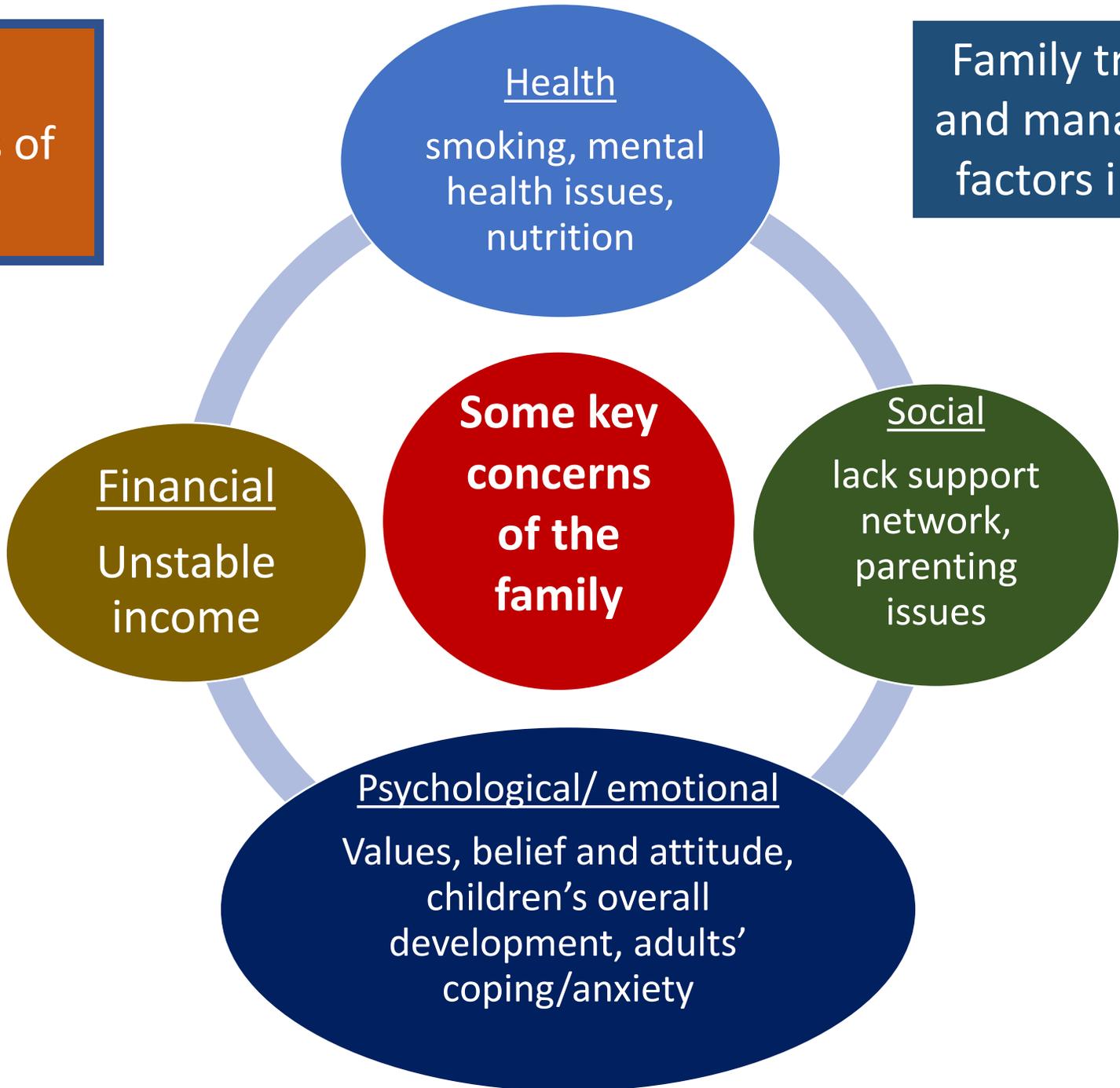
The 10 year old child is not attending school regularly as he cannot wake up on time. Children eating bread and canned food most of the time.

Family does not have many friends or extended family network. Family receives Comcare financial assistance.

Applying the research on social determinants of health , what are your concerns for this family?

Social Determinants of Health

Family trying its best to cope and manage life. What are the factors impacting decisions?



Not knowing how social factors impact health outcomes

Personal values, belief, attitude

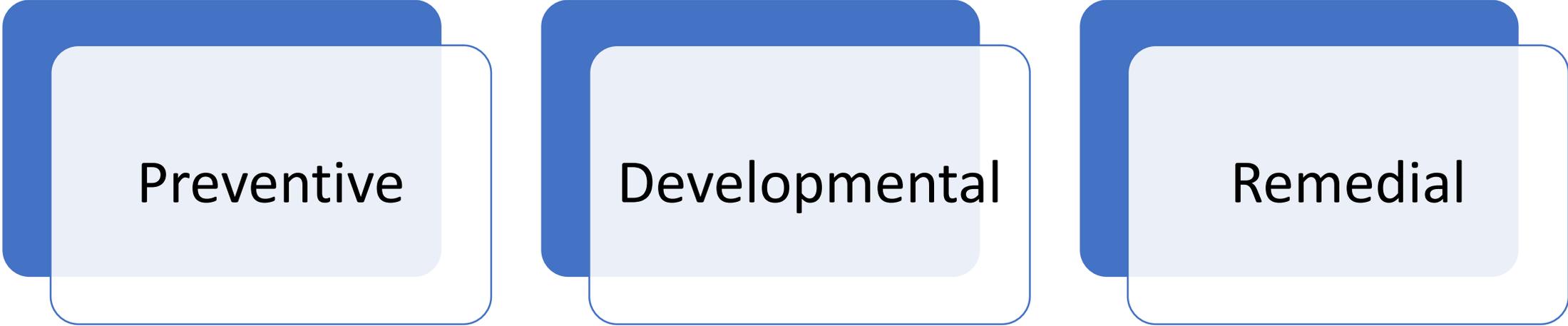
Trust and relationship issues with external stakeholders

Lack bandwidth to navigate system



How can we include findings on social determinants of health in service planning and delivery for better health outcomes?

Considerations for service planning and service delivery to bring good outcomes



Preventive

Minimise and eliminate social, health and other conditions that are known to cause problems.

Developmental

Focus on predictable changes that occur throughout the human life cycle

Remedial

Bring about change within individuals who experience problems and help them to be more effective in social functioning.

Considerations for service planning and service delivery to bring good outcomes

- Understand the **interconnectedness of issues relating to health, social and financial domains** and adopt an interdisciplinary approach to service planning & delivery
 - Increase knowledge domain beyond our disciplines
 - Build working relationship and trust
 - Working together to formulate an integrated social –health plan.
 - Working together to monitor, evaluate, revise and carry through the plan
 - Collective leadership

Considerations for service planning and service delivery to bring good outcomes

Adopt a “**person-centric and family focussed**” perspective

- Building rapport and trust with individuals and family is key
- Seek to understand from clients’ perspective
 - Listen to understand, NOT to reply
- Identify and mobilise clients’ strengths in problem solving.
- What are ways to tackle the issues ? Ask the clients.
- Mobilising family members as agents to support change. Build support network.

Considerations for service planning and service delivery to bring good outcomes

Applying research to practice

Social and psychological circumstances can cause long-term stress leading to poor mental health

- Tackle stressors in life, build resilience and enhance coping abilities

Foundations of adult life are laid in prenatal and early childhood.

- Focus on child development. Break the cycle of disadvantaged. Bring good health outcomes

Financial instability are linked to both its psychological and health consequences and financial problems, especially debt.

- Give hope . Promote financial capability and asset building

Build social network of support

- Counter social isolation, enable collective action, empower reciprocity, achieve good health outcomes



Concluding remarks

- Social determinants of health an important influence on health inequities.
 - *Fundamental for improving health and reducing longstanding inequities in health*
 - *Requires action by all sectors and civil society.*
 - *Need to apply research in work with vulnerable families and children*
- Embrace perspectives of person-centric and family focussed in service planning and delivery
- Apply knowledge in health, social and financial domains and move towards an integrated approach in service planning and delivery
- Fundamental to build rapport, trust and understanding issues from clients' perspective.
- Use strengths and empowerment approaches towards positive and sustainable change



Thank you for your attention

*Don't judge each day by the harvest you reap but by
the seeds that you plant* - Robert Louis Stevenson