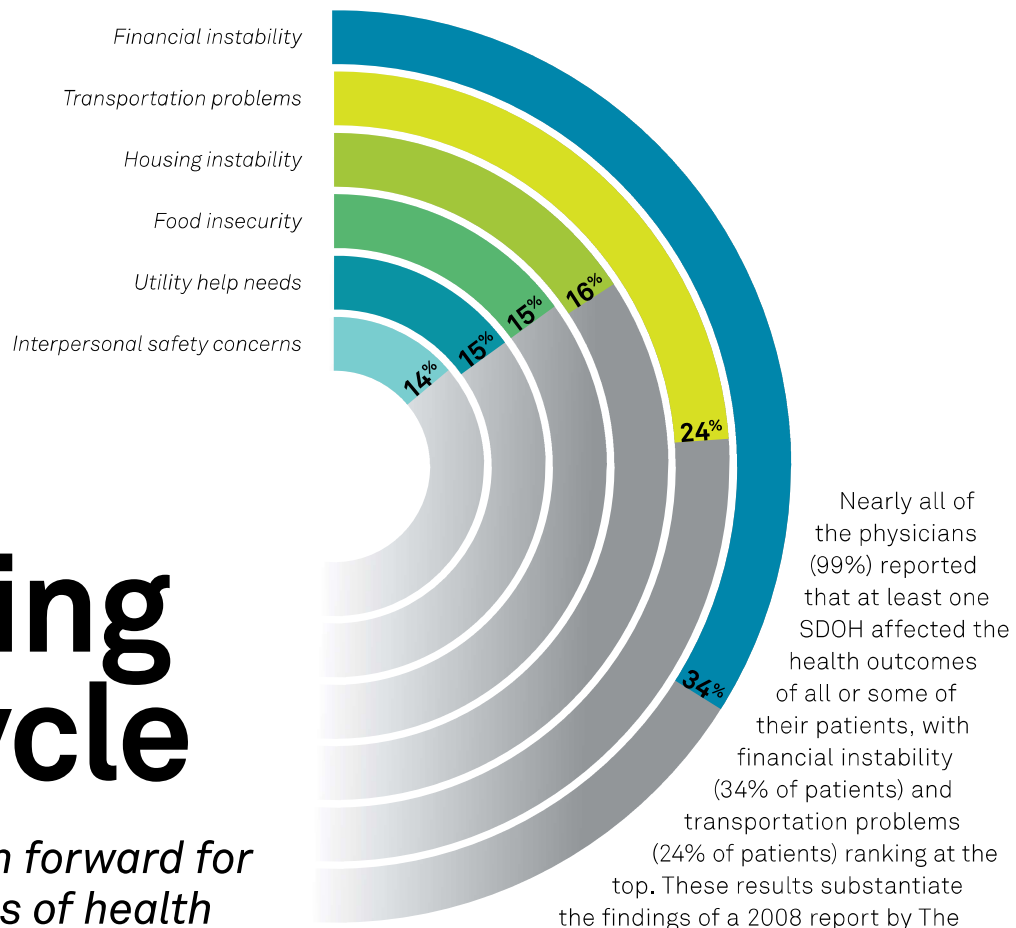




Figure 1

Approximately What Proportion of Your Patient Population Do You Believe Experiences Each of the Following SDOH?



Breaking the Cycle

A constructive path forward for social determinants of health

Where a patient is born, where they grow and live, where they work, and the income they earn have always been major influences on their overall health. Social determinants of health or social drivers of health (SDOH)—such as food insecurity, housing instability, transportation challenges, interpersonal safety, and utilities difficulties—are now being given the attention they deserve as a component of patient care. A recent survey of physicians across the country has highlighted this growing focus on SDOH.¹ Conducted by The Physician Foundation, the survey collected data from more than 1,500 physicians in primary care, family medicine, general practice, internal medicine, and pediatrics, as well as over two dozen other specialties. The findings revealed that a solid majority of physicians (80%) reported that addressing SDOH is essential to improving health outcomes and decreasing healthcare costs.

New England Healthcare Institute and the Boston Foundation² concluding that even before the COVID-19 pandemic, access to healthy food, safe housing, and other SDOH drove 70% of health outcomes. “It’s clear physicians recognize how critical it is for our patients and our country’s healthcare system to address SDOH,” said Gary Price, M.D., president of The Physicians Foundation, in an interview with *HealthLeaders*. “They are very much eager to play a more proactive role in this work.”³

Despite their view that addressing SDOH is critically important, two-thirds of surveyed physicians reported having insufficient time and/or ability to affect the SDOH of their patients. Eighty-seven percent reported wanting more time and the ability to affect the SDOH of their patients. The top three obstacles cited by physicians were having limited time during patient visits (89%), having inadequate staff to connect patients with community resources (84%),

The Physician Foundation's survey found a notable link between physicians working on SDOH and physician burnout.

and simply lacking community resources or the ability to access them (77%).

Another element that is potentially playing a role in physicians' difficulty in addressing the overall effect of SDOH is the burden these activities place on their own well-being. The Physician Foundation's survey found a notable link between physicians working on SDOH and physician burnout,

with 83% admitting that addressing SDOH contributes to the condition. Another 68% of physicians reported that addressing the SDOH for patients has a major effect on their mental health and well-being.

Ultimately, The Physician Foundation's survey concluded that to minimize SDOH's effects on physician burnout and improve patient outcomes, meaningful change is needed. Suggested efforts include investing in community capacity, investing in technological and human capacity to connect patients with resources, screening patients to identify social needs, reducing existing payer requirements, and creating financial incentives for physician-directed efforts. Policy action is also necessary to incentivize payers to invest in SDOH community resources, provide greater flexibility for Medicare Advantage to reimburse addressing SDOH, and integrate SDOH into payment policy.

"As we continue building a broad-based understanding of SDOH and their implications for patients and physicians, it is critical that physician and patient voices remain central to the discourse and decision-making," the authors wrote in their assessment of the survey. "It is through addressing SDOH that we can improve patient outcomes for everyone and ensure that the physician workforce is well-supported and financially recognized for its partnership with patients." 

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