Physiotherapy in Primary Care

Module 4

Addressing Social Determinants of Health (SDH) in Team-Based Primary Care

Please note: This course was designed to be interacted and engaged with using the online modules. This **Module Companion Guide** is a resource created to complement the online slides. If there is a discrepancy between this guide and the online module, please refer to the module.

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MODULE INTRODUCTION

Please see the online learning module for the full experience of interactions within this document.

Understanding the concept of social determinants of health (SDH) is foundational to the roles of physiotherapists in team-based primary care.

Module Learning Outcomes

By the end of this module, learners will be able to:

1. Describe the social determinants of health (SDH) and how they influence health outcomes.
2. Explain the role of physiotherapists in identifying and addressing social determinants of health in primary care.
3. Identify services and resources in the community which would help to address social determinants of health.
4. Identify personal learning needs related to addressing social determinants of health in team-based primary care and create a plan to address those learning needs.

Note: A full reference list for topics discussed in this module can be found in the Conclusion section.

Although identifying and addressing the SDH permeates multiple domains of the **Competency Profile for Physiotherapists in Team-based Primary Care in Canada**, this module will most directly support you to identify and address learning needs to enhance competencies 1.4, 1.5, 1.6, 1.11, 1.12, 3.3, and 5.1.

Continue to access the competencies that are relevant to this module.

Module Competencies

1.4   Conduct a comprehensive physiotherapy assessment that addresses complex personal, social, cultural, and environmental factors affecting the functioning and health of individuals and communities.

1.5   Apply advanced clinical reasoning to establish a physiotherapy diagnosis, prognosis, and management plan that considers the complex personal, social, cultural, and environmental factors that contribute to a person's functioning and health.

1.6   Collaborate with persons seeking care, their families, and support networks, and interprofessional primary care team members to develop, implement, and evaluate treatment or management plans that address complex personal, social, cultural, and environmental factors affecting a person's functioning and health.

1.11   Identify and assess the unique and evolving health service needs, health inequities, and social determinants of health affecting the communities or populations served.

1.12   Develop, implement, and evaluate services to actively address social determinants of health to address the needs of the communities or populations served.

3.3 Support persons seeking care, along with their families and support networks, to navigate health services, social services, and other community resources.

5.1 Advocate for services to address the health and social needs of persons seeking care, along with their families and support networks.

Continue to Section 01

SECTION 01: SOCIAL DETERMINANTS OF HEALTH (SDH)

In this section, you will be introduced to the social determinants of health (SDH) and other related concepts that are key for understanding and implementing physiotherapists' roles in primary care.

Health and Population Health

In 1948, the World Health Organization (WHO) defined **health** as "a state of complete physical, social and mental well-being, and not merely the absence of disease or infirmity."[1]

This definition continues to be used to this day.

More recently, in the Ottawa Charter for Health Promotion (1986), **health** is viewed as a human right and "a resource for everyday life, not the objective of living."[2]

In recent years, physiotherapists across Canada and abroad have been called upon to embrace a population health approach, including in primary care contexts.[4] While physiotherapy services have traditionally been provided as one-to-one services in clinical environments, the Canadian Physiotherapy Association (CPA) posits that a population health approach is required to "have the greatest impact on clients' and communities' health status and health outcomes."[4]

A **population health** approach aims to improve the health of communities or populations, instead of that of individuals.[5] It requires the consideration of numerous factors that interact to influence health.[5] These factors are identified as the **determinants of health.**

A population health approach also aims to reduce inequalities or inequities in health status between subgroups of populations.5

Answer the question using your current understanding of inequality and inequity.

Question: How would you differentiate health inequality from health inequity?

Feedback:

Thank you for your response. Health inequalities are the differences in the health status of individuals and groups. Health inequities are defined as health inequalities that are unfair and modifiable.6

The Social Determinants of Health (SDH)

It is now well recognized that most factors or determinants that influence health actually fall outside the healthcare system. They are social by nature and have been identified as the **social determinants of health (SDH)**. The WHO defines the SDH as the "conditions in which people are born, grow, work, live and age, and the wider set of forces and systems shaping the conditions of daily life."[7] These social determinants are unequally distributed within populations, and they often reflect the positions people occupy within social hierarchies.[8]

While numerous categorizations of the SDH have been proposed, these categorizations often include numerous factors such as: [9]

- Housing

- Employment and work
- Social support
- Access to health services
- Culture, race, and ethnicity
- Education and literacy
- Food security
- Gender identity and expression
- Disability
- Indigenous status

However, the social determinants affecting health need to be distinguished from the factors determining the distribution of these determinants among people who experience privilege or disadvantage (oppression).[10]

1. The socioeconomic and political context that creates and maintains social hierarchies within populations (e.g., economic and social policies, systems of governance, and cultural and societal biases and values).
2. The socioeconomic positions that result from these hierarchies (i.e., where individuals occupy a position based on factors such as income, education, occupation, gender, or ethnicity).

These social determinants of health inequities are viewed as the root causes of health inequities that shape the distribution of more downstream factors, the SDH.[8, 10] The idea of a social "ladder" to illness (or health) is often used, where one's position on this ladder translates into corresponding better or worse health outcomes.[11]

You may also recall that in **Module 03: Creating Safer and Braver Spaces for Clients, Support Networks, and Team Members**, you were introduced to systems of inequality through the Coin Model of Privilege and Critical Allyship. According to this model, social structures or systems of inequality (coins or "isms") produce unearned and unfair advantages or disadvantages based on one's position in a system of inequality.[12] This model also shows how these systems of inequality (e.g., ableism, cisgenderism, settler colonialism) negatively impact health. Hence, you may want to consider how the coin model offers a complementary lens to understanding and addressing the SDH and social determinants of health inequities, by highlighting that unfair social structures oppress certain groups while others are privileged by them.

Considering Wider Determinants of Health

There have been calls in recent years for the need to implement equity-focused or equity-oriented health care to specifically address the SDH and social determinants of health inequities in primary care.[13]

Answer the question based on what you have learned so far in this section.

Question: As a physiotherapist, why do you believe you should consider and address the SDH and social determinants of health inequities in your practice?

Feedback:

Thank you for your response. The SDH dramatically influence lifespan and quality of life,[14] and as stated in a report by the Health Foundation in the United Kingdom, it is "a matter of life and death."[15] Further, the WHO states that these determinants can have a greater impact on health than healthcare services and lifestyle choices.[7]

As mentioned by Raphael et al., "the **most effective way to improve health is by improving the living and working conditions people experience**, thereby reducing the material and social deprivation and physiological and psychological stress that leads to illness."[13] The SDH and social determinants of health inequities provide a lens through which you can evaluate and adapt your practice, along with other models such as the previously discussed coin model.

In this section, you were introduced to the concepts of health, population health, social determinants of health (SDH), and social determinants of health inequities.

In the next section, you will explore how physiotherapists can identify and act upon the SDH in primary care.

Continue to Section 02

SECTION 02: THE ROLES OF PHYSIOTHERAPISTS IN ADDRESSING THE SDH

It is crucial that all members of primary care teams not only understand SDH, but also how to assess their impact and take them into consideration to improve the health of the individuals and communities they serve. In this section, you will learn how to apply your knowledge of the SDH to your role as a physiotherapist in primary care.

Assessing the SDH

For every person seeking primary care, it is important to understand the many social factors that may be influencing their health. The person may be presenting to physiotherapy for a specific issue, however the impact of social factors on their overall health needs to be considered in order to provide comprehensive care. Knowledge of a person's SDH will allow you to work with them to develop an intervention plan that is responsive to their current life situation.

Many primary care teams collect sociodemographic data as standard procedure when a person is registered with the team. You can use this information as a starting point, and collect additional information as needed.

It is important to explain why you are collecting information about social factors that influence health. You can explain how social factors affect our health and that this information may help improve their overall care. You can also describe how this information will help you connect them to services that may help them achieve better overall health. It is important to approach these discussions with an empathetic and welcoming mindset, which is consistent with a trauma-informed approach, recognizing that these may be sensitive topics for individuals.[16] Several assessment tools have been developed to help you navigate these types of conversations.

Assessment Tools: Social Factors and History

Three examples of tools that can help you to assess the social factors and history of people seeking primary care are the **IF-IT-HELPS** mnemonic, the **SPARK** tool, and the "**Your Current Life Situation**" assessment.

IF-IT-HELPS

This tool is designed to be used as a guide for both assessment and intervention. IF-IT-HELPS is a mnemonic for:

- Identity
- Family and Friends
- Income
- Trauma
- Housing
- Employment and Education
- Legal
- Personal Safety
- Substances and Sexual Health

This tool provides guidance on the approach to assessing social history, including: using a non-judgmental and safe approach, asking open-ended questions, and encouraging the most sensitive issues to emerge naturally in conversation.[16] The tool provides example opening statements or questions, and potential interventions. For example, to gather information on a person's identity you may ask them to tell you about themself, share their pronouns, or describe where they grew up.

Note: Social history can be collected over several visits. The individual may decide to share more sensitive information only once a trusting rapport has been established with the provider. Also, remember that SDH can be very fluid and dynamic, so it is necessary to continually assess their impact over time.16

Navigate to the online module to download the IF-IT-HELPS resource.

SPARK refers to the "**S**creening for **P**overty **A**nd **R**elated Social Determinants to Improve **K**nowledge of and Access to Resources" study. This tool is being developed to identify a set of questions which can be used for collecting sociodemographic and social needs data in primary care in Canada.[17]

The tool will include questions regarding the SDH: [17]

- Language
- Immigration status
- Race
- Disability
- Sex at birth
- Current gender identity
- Sexual orientation
- Social needs (i.e., education, income, housing, social isolation, transportation, utilities, and employment)

[View the SPARK Study](#)

Your Current Life Situation

Kaiser Permanente (an American health care company) developed the "Your Current Life Situation" assessment tool. This tool is a comprehensive self-assessment created to capture a sense of a person's living situation, financial stresses, food security, access to medication, health literacy, social connection, dental care, and health confidence.[18]

[View the 'Your Current Life Situation' assessment tool](#)

Answer the question using your knowledge of the IF-IT-HELPS tool, the SPARK study, and the Your Current Life Situation assessment.

Question: What sociodemographic data is already being collected by your primary care team? Which of these tools might be the most helpful to help further assess a person's social determinants in your practice?

Feedback:

Thank you for your response. There is no correct answer to this question. The IF-IT-HELPS tool, SPARK, and Your Current Life Situation assessment each ask valuable questions to help understand the SDH influencing people seeking care. In choosing which tool to use in your own practice, you may wish to consider which one provides the most added value beyond routinely collected information and which tool you are most comfortable administering and interpreting.

Addressing the SDH as a Physiotherapist in Primary Care

Once you have an understanding of the social factors impacting a person's health, you may wonder how to use that knowledge to help inform the management plan. The provided case study will help you to see how you might use this information in practice.

- **Physical Presentation**

A person seeking primary care is booked into your schedule for a physiotherapy assessment for back pain.

SDH Assessment

During your subjective history taking, you learn that the 65-year-old male is on a seniors' pension and is struggling to pay the rent for his one-bedroom apartment. He is afraid that he may be evicted if he does not pay his rent, but he also struggles to buy enough food. His partner of 40 years passed away last year, and he is feeling very lonely. He sits in a very old soft chair most of the day, watching television.

Reflection

After meeting with the individual, it is important to reflect on what they have told you about their social factors and social history.

- What social determinants may be negatively affecting this person's health?

- What types of resources might be helpful for him?

As a physiotherapist, it is necessary to consider the social determinants of an individual's health when formulating a treatment plan.

Answer the question based on your prior knowledge of treatment planning in conjunction with what you have learned so far in this section.

Question: In the example, how might you consider the SDH in your intervention and/or recommendations, for this individual?

Feedback:

Thank you for your response. Social isolation, food security, and low income are all determinants to be considered in this case. For example, will the individual have the funds to travel to and from physiotherapy appointments? How is his loneliness possibly affecting his experience of pain, and his motivation to engage in exercise? If he is experiencing food insecurity, will he have the money required to change his furniture to better support his back? These are all important questions to consider.

In addition to using your knowledge of the SDH to help inform your care of the person, you also have the opportunity to support them in accessing helpful resources and services.

Some primary care teams include members whose role is specifically to help people access resources to address SDH. These positions may be filled by Community Health Workers (CHWs) or System Navigators. According to the Community Health Workers Network of Canada, CHWs work to "create 'bridges' between vulnerable populations and mainstream health and social services and promote health and wellbeing."[19] They may be involved in helping people seeking primary care at an individual level or in a group setting.

Whether or not your primary care team has access to CHWs, you, as a physiotherapist, can also help direct people seeking primary care to resources and services available both within the team or within the broader community.

SDH at a Population Health Level

It is important to understand the social determinants affecting the community as a whole, and not just those seeking physiotherapy. The CPA's position statement on population health indicates that physiotherapists should consider the needs of the communities being served when planning treatment or managing caseloads.

"The planning for physiotherapy services and physiotherapy caseload management should consider present and future population health needs in conjunction with the management of illness, injury and disability. Program and service development and planning should be based on the unique and specific needs of the communities/populations being served."

Canadian Physiotherapy Association, 2006[4]

As a physiotherapist working in primary care, you have the opportunity to address the SDH at an individual level, but also at the population health level. To support population health, it is important to understand the demographics and characteristics of those living in your region.

Assessment Tools: SDH and Population Health

Public Health Ontario's Social Determinants of Health Snapshot is a helpful tool where you can find information on the SDH according to the region in Ontario.[20]

View the SDH Snapshot tool.

Additionally, the College of Family Physicians of Canada has created a guide called "Best Advice: Social Determinants of Health," which identifies how you can help to address the social conditions that "shape and constrain well-being."[11] At the community level, this could include acting as a health advocate, collecting health data, and providing experiential learning opportunities regarding the SDH for physiotherapy students.[11] At the systems level, this could include joining organizations advocating for communities on social conditions.

View the Best Advice Guide: SDH

In this section, you learned strategies to apply your knowledge of the SDH as a primary care physiotherapist. You examined three different tools used for assessing the SDH and were challenged

to consider how an SDH-informed assessment might alter or influence a treatment plan for persons seeking care. Finally, you were encouraged to consider how SDH at the community level might influence service delivery for individuals and the community.

Continue to Section 03

Page links:

https://upstreamlab.org/project/spark/

https://sirenetwork.ucsf.edu/tools-resources/resources/your-current-life-situation-survey

https://www.publichealthontario.ca/en/Data-and-Analysis/Health-Equity/sdoh

https://patientsmedicalhome.ca/resources/best-advice-guides/best-advice-guide-social-determinants-health/

SECTION 03: IDENTIFYING RESOURCES, SERVICES, AND PROGRAMS IN THE COMMUNITY TO ADDRESS THE SDH

There are many resources at the community level to support you in addressing the SDH in your practice. In this section, you will be introduced to several examples that will provide you with a starting point for developing your own collection of community-based resources.

Resources, Services, and Programs to Address the SDH

Recall from Section 01, that while numerous categorizations of the SDH have been proposed, they often include similar elements (e.g., housing, employment, social support, access to health services, culture and ethnicity, etc.).

The curated resources may not be directly applicable to the community you practice in. However, they provide categories and examples for identifying key resources that support SDH within your province/community.

Continue to reveal some example resources that you may find useful in addressing the SDH in your practice. These examples can also be used to help you identify resources available in your region.

Public Health Agencies

Federal, provincial, and territorial public health agencies across Canada work on programs and policies to address the SDH. They provide resources, research, and guidance on public health issues related to these determinants.

Explore the Federal Public Health Agency and the Canadian Public Health Association.

- **Public Health Agency of Canada**

- **Canadian Public Health Association**

Employment and Job Training

Employment and job training programs, such as WorkBC, help individuals acquire skills and access better job opportunities.

Explore the WorkBC resource.

- **WorkBC**

Housing Support and Homelessness Prevention

Housing support and homelessness prevention programs and organizations offer housing assistance, shelter, and resources to prevent homelessness and address the housing crisis.

Explore the resources and programs that BC Housing has to offer.

- **BC Housing Resources and Programs**

Income Support Programs

Government financial support programs such as the Canada Child Benefit (CCB), Employment Insurance (EI), and social assistance address income-related determinants.

Explore the Government of Canada's income support programs.

- **The Government of Canada's Income Assistance Programs, Benefits, and Resources**

Education and Training Support

Literacy initiatives and scholarships aim to improve access to education, which is an essential SDH. These resources can be used to support people seeking primary care who may require additional education or vocational training.

Explore the City of Toronto's educational training programs.

- **The City of Toronto's Ontario Works Training Programs**

Community Health Centres

Community health centres provide comprehensive healthcare services, health education, and support programs to address community health determinants.

Explore community health centres across the country.

- **British Columbia Association of Community Health Centres**

- **The Government of Ontario's Community Health Centres**

- **Alberta Health Services Community Health Centres**

Food Security Programs

Food security is an essential SDH that is tackled by food banks, community gardens, and nutrition programs.

Explore five national food security programs.

- **Food Banks Canada**

- **Second Harvest**

- **Community Food Centres Canada**

- **Breakfast Club of Canada**

- **The Salvation Army**

Mental Health Services

Accessible mental health services and crisis hotlines are crucial for addressing mental health as a social determinant.

Explore the Government of Canada's mental health services and resources.

- **[The Government of Canada's Mental Health Support Resources and Information](#)**

Indigenous Health and Cultural Initiatives

Programs tailored to Indigenous communities consider cultural and historical aspects of health to promote well-being.

Explore two Indigenous health resources.

- **[Northern Health Indigenous Health Resources for Cultural Safety](#)**

- **[The Government of Canada's Indigenous Health Initiatives](#)**

Social Support and Community Development

Nonprofit organizations, youth programs, and community development initiatives aim to strengthen social support networks and address the SDH.

Explore two social support resources.

- **[HeretoHelp's Module on Social Support](#)**

- **[The Government of Canada's Social Programs](#)**

Identifying Social Services in Your Community

The curated resources may not be directly applicable to the community you practice in. However, they provide a scaffold for **identifying** key resources that support SDH within your province/community.

Continue for strategies to assemble a personal collection of useful resources in your province/community to help you learn more about the SDH.

TASK ONE

Identify local resources in your communities using the same categorization as the resources provided in this section (i.e., Mental Health Services, Food Security Programs, and Public Health Agencies).

Tip: It may be useful to create an Excel workbook with three columns: Program or Service(s), Location, and Contact Information.

TASK TWO

Contact the resources, programs, or initiatives you identified to get more information about the services they provide and who qualifies for them.

Additional Resources to Help Address the SDH

In contrast to the previously provided resources that focus on specific SDH, the following links represent some examples of the available resources that address social determinants of health and/or health inequities as a whole.

For your interest, explore more resources on the SDH.

The World Health Organization's Social Determinants of Health Resource

The National Collaborating Centre for Determinants of Health

The Canadian Public Health Association's Social Determinants of Health Resources

The Government of Canada's Social Determinants of Health and Health Inequalities Resources Page

The Canadian Facts: Social Determinants of Health Publication

La santé des peuples autochtones : déterminants sociaux de la santé et mobilisation communautaire (Promosanté)

Trousse pédagogique sur les déterminants de la santé (Promosanté)

Hastings Prince Edward Public Health's Social Determinants of Health Report

In this section, you were introduced to many example resources that can be used to help address the SDH for people seeking primary care. You are encouraged to look into resources and programs in your local community to help address SDH as part of your primary care practice.

Continue to Section 04

Page links:

https://www.canada.ca/en/public-health.html

https://www.cpha.ca/what-are-social-determinants-health

https://www.workbc.ca/

https://www.bchousing.org/housing-assistance/housing-with-support

https://www.canada.ca/en/services/benefits.html

https://www.toronto.ca/community-people/employment-social-support/employment-support/training-courses/ontario-works-training-programs-in-toronto/

https://bcachc.org/about-chcs/

https://www.health.gov.on.ca/en/common/system/services/chc/locations.aspx

https://www.albertahealthservices.ca/findhealth/service.aspx?id=1000870

https://foodbankscanada.ca/

https://secondharvest.ca/

https://cfccanada.ca/en/Home

https://www.breakfastclubcanada.org/covid-impacts/

https://salvationarmy.ca/

https://www.canada.ca/en/public-health/services/mental-health-services/mental-health-get-help.html

https://www.indigenoushealthnh.ca/cultural-safety

https://www.sac-isc.gc.ca/eng/1581897443592/1581897469233

https://www.heretohelp.bc.ca/wellness-module/wellness-module-3-social-support

https://www.sac-isc.gc.ca/eng/1100100035072/1521125345192

https://www.who.int/health-topics/social-determinants-of-health#tab=tab_1

https://nccdh.ca/

https://www.cpha.ca/social-determinants-health-resources

https://www.canada.ca/en/public-health/services/health-promotion/population-health/what-determines-health.html

https://www.thecanadianfacts.org/The_Canadian_Facts-2nd_ed.pdf

https://promosante.org/ressources/la-sante-des-peuples-autochtones-determinants-sociaux-de-la-sante-et-mobilisation-communautaire/

https://promosante.org/ressources/trousse-pedagogique-sur-les-determinants-de-la-sante/

https://www.hpepublichealth.ca/the-social-determinants-of-health-report/

SECTION 04: INDIVIDUALIZED LEARNING PLAN

This module, **Addressing Social Determinants of Health (SDH)** in **Team-Based Primary Care**, was designed to help you develop new foundational knowledge to help you address SDH within your primary care practice, to identify potential learning needs related to addressing SDH, and identify opportunities to address your learning needs related to addressing SDH.

Continue to review the new foundational knowledge presented in this module, as well as the potential learning needs and opportunities you may have identified.

New Foundational Knowledge from Module 04

- What are the SDH and why are they important to address.
- How to identify the SDH as part of your assessment.
- How to identify resources and services to address the SDH.

Potential Learning Needs and Opportunities

- Understanding how the SDH influence the community and people you serve.
- Mapping the resources available in your community for addressing the SDH and how they can be integrated within team-based care.

Revising your Individualized Learning Plan (ILP)

Now that you have completed this module, you will revise each activity within your ILP.

First, revisit **Activity 1: Competency Self-Assessment.**

- Review the self-assessment ratings, learning needs, and priority levels you identified for the Module 04 competencies when you first completed **Activity 1.**
- Modify your self-assessment ratings, add any new learning needs that you've identified, and adjust your priority ratings, if needed.

Continue to reveal the competencies relevant to this module.

Module Competencies

1.4 Conduct a comprehensive physiotherapy assessment that addresses complex personal, social, cultural, and environmental factors affecting the functioning and health of individuals and communities.

1.5 Apply advanced clinical reasoning to establish a physiotherapy diagnosis, prognosis and management plan that considers the complex personal, social, cultural, and environmental factors that contribute to a person's functioning and health.

1.6 Collaborate with persons seeking care, their families and support networks, and interprofessional primary care team members to develop, implement, and evaluate treatment or management plans that address complex personal, social, cultural and environmental factors affecting a person's functioning and health.

1.11 Identify and assess the unique and evolving health service needs, health inequities, and social determinants of health affecting the communities or populations served.

1.12 Develop, implement, and evaluate services to actively address social determinants of health to address the needs of the communities or populations served.

3.3 Support persons seeking care, along with their families and support networks, to navigate health services, social services, and other community resources.

5.1 Advocate for services to address the health and social needs of persons seeking care, along with their families and support networks.

Next, revisit **Activity 2: Values Self-Assessment.**

- Refine your list of values if the module inspired you to consider any personal values that you did not initially identify.

Then, revisit **Activity 3: Professional Developing and Networking Self-Assessment.**

- Record any professional development or networking goals or opportunities you may have identified by completing this module.

Finally, revisit **Activity 4: Creating your Individualized Learning Plan.**

- Examine the competencies, learning goals, and professional development and networking opportunities you identified for the short-, intermediate-, and long-term. Update your ILP based on the refinements you made to your learning needs and priority ratings **(Activity 1),** values **(Activity 2)**, and professional development and networking opportunities **(Activity 3)**.

Continue to Conclusion

MODULE CONCLUSION

In this module, we provided foundational knowledge for **addressing SDH in team-based primary care**. The SDH influence an individual's health status more profoundly than both lifestyle choices and health services. It is therefore crucial that physiotherapists are able to identify and address the SDH within primary care settings.

In this module, you were provided with relevant resources, programs, and services for addressing the SDH, and for fostering a collaborative approach to the well-being of people seeking primary care, their families, and their communities.

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