THE SOCIAL DETERMINANTS OF MENTAL HEALTH

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LEARNING OBJECTIVES

1 | Define key concepts associated with the social determinants of mental health

2 | Evaluate the evidence on how social determinants of mental health lead to poor mental health outcomes and mental health inequities

3 | Identify solutions to address the social determinants of mental health

THE SOCIAL DETERMINANTS OF MENTAL HEALTH

The **societal, environmental, and economic conditions** that impact and affect mental health outcomes across various populations

These conditions are **shaped by the distribution of money, power, and resources** at global, national, and local levels, which are themselves influenced by policy choices

The social determinants of health are **prominently responsible for health disparities and inequities** seen within and among populations

World Health Organization: Closing the Gap in a Generation: Health Equity through Action on the Social Determinants of Health: Commission on the Social Determinants of Health, 2008.

HEALTH DISPARITIES:

DIFFERENCES IN HEALTH STATUS AMONG DISTINCT SEGMENTS OF THE POPULATION INCLUDING DIFFERENCES THAT OCCUR BY GENDER, RACE OR ETHNICITY, EDUCATION OR INCOME, DISABILITY, OR LIVING IN VARIOUS GEOGRAPHIC LOCALITIES
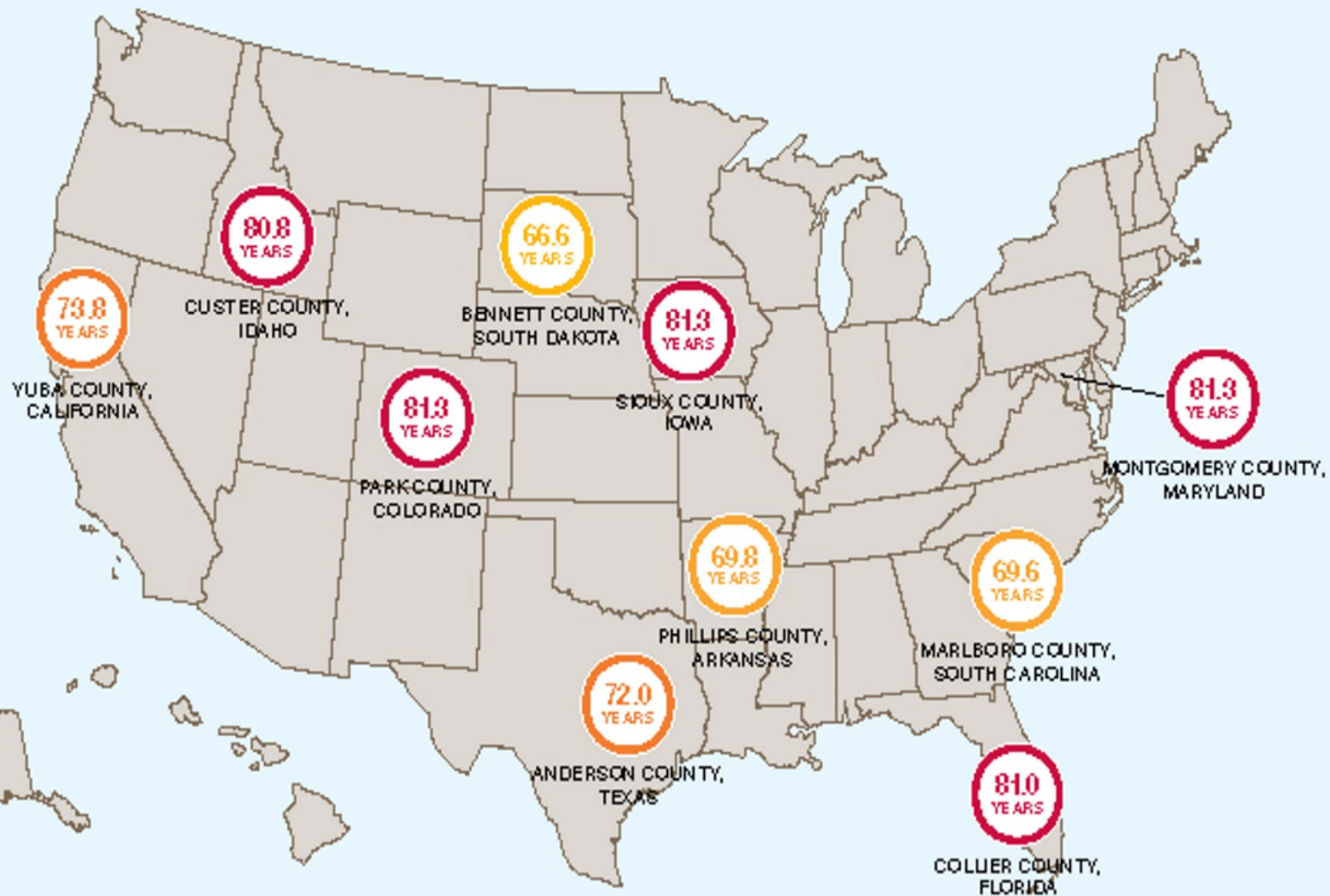
HEALTH INEQUITIES:

DISPARITIES IN HEALTH THAT ARE A RESULT OF SYSTEMIC, AVOIDABLE, AND UNJUST SOCIAL AND ECONOMIC POLICIES AND PRACTICES THAT CREATE BARRIERS TO OPPORTUNITY
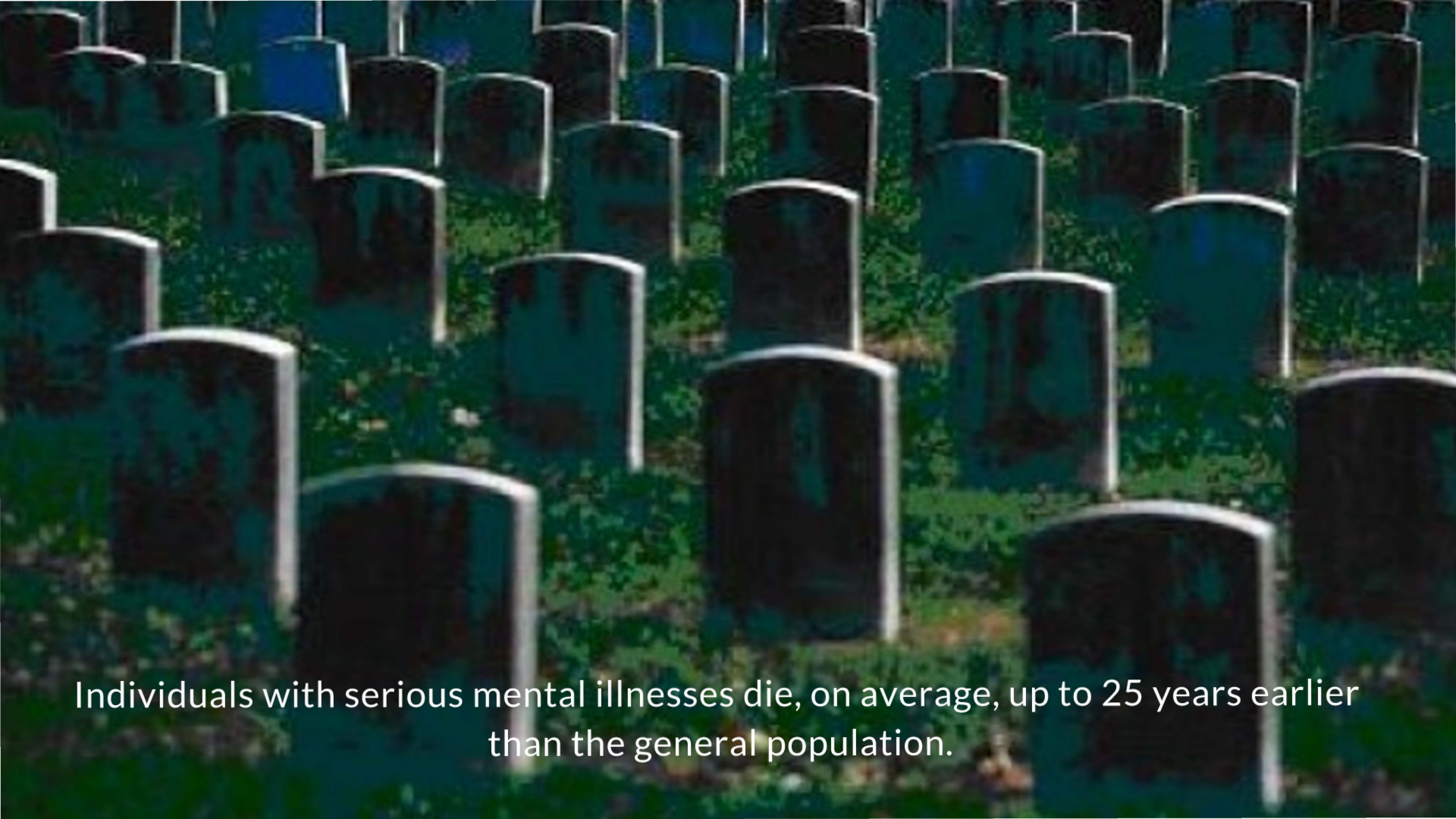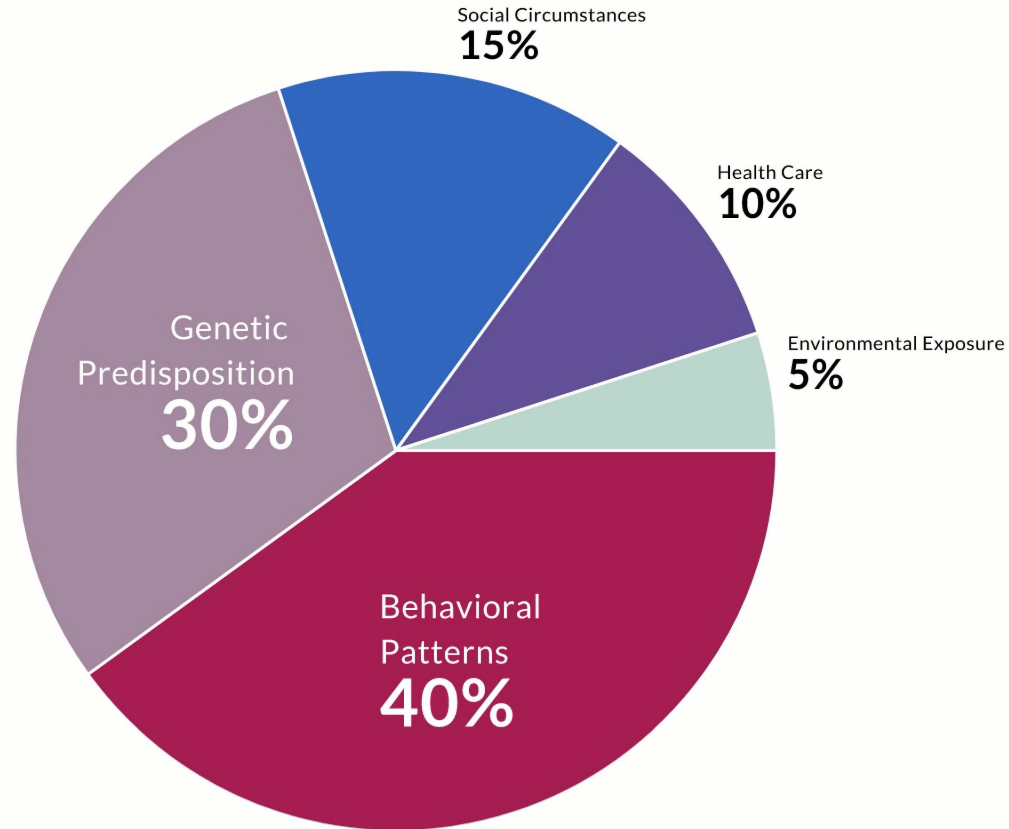
Average Life Expectancy

High

Low

80.8 YEARS — CUSTER COUNTY, IDAHO

66.6 YEARS — BENNETT COUNTY, SOUTH DAKOTA

73.8 YEARS — YUBA COUNTY, CALIFORNIA

81.3 YEARS — SIOUX COUNTY, IOWA

81.3 YEARS — PARK COUNTY, COLORADO

81.3 YEARS — MONTGOMERY COUNTY, MARYLAND

69.8 YEARS — PHILLIPS COUNTY, ARKANSAS

69.6 YEARS — MARLBORO COUNTY, SOUTH CAROLINA

72.0 YEARS — ANDERSON COUNTY, TEXAS

81.0 YEARS — COLLIER COUNTY, FLORIDA

RWJF Commission
to Build a Healthier America

Robert Wood Johnson Foundation

N

99

STANISLAUS
COUNTY

87 YEARS*

ATWATER

EXIT 189

EXIT 187

78 YEARS*

MERCED

MADERA
COUNTY

MERCED
COUNTY

FRESNO
COUNTY

84 YEARS*

EXIT 140

FRESNO

EXIT 132

SAN JOAQUIN VALLEY,
CALIFORNIA

5

75 YEARS*

81 YEARS*

EXIT 111

79 YEARS*

EXIT 98

EXIT 94

80 YEARS*

KINGS
COUNTY

99

TULARE
COUNTY

Individuals with serious mental illnesses die, on average, up to 25 years earlier than the general population.

DETERMINANTS OF HEALTH AND THEIR CONTRIBUTION TO PREMATURE DEATH

Social Circumstances
15%

Health Care
10%

Environmental Exposure
5%

Genetic Predisposition
30%

Behavioral Patterns
40%

McGinnis, J. M., Williams-Russo, P., & Knickman, J. R. (2002). The case for more active policy attention to health promotion. Health Affairs, 21(2), 78-93

"The Fundamental Causes of Disease"

If risk factors are the precursors of disease, then the environmental and contextual factors that precede or shape these risk factors are **the causes of the causes**

Link, B. G., & Phelan, J. (1995). Social Conditions As Fundamental Causes of Disease Social Conditions as Fundamental Causes of Disease, 35, 80–94. / Rose, G. (1992). The strategy of preventive medicine.

THE CAUSAL CHAIN

Why is Jason in the hospital?

Because he has a bad infection in his leg.

But why does he have an infection?

He has a cut on his leg and it got infected.

But why does he have a cut on his leg?

He was playing in a junk yard next to his apartment building and fell on some sharp, jagged steel there.

But why was he playing in a junk yard?

His neighborhood is run down. Kids play there and there is no one to supervise them.

THE CAUSAL CHAIN, CONTINUED

But why does he live in that neighborhood?

His parents can't afford a nicer place to live.

But why can't his parents afford a nicer place to live?

His dad is unemployed and his mom is sick.

But why is his dad unemployed?

Because he doesn't have much education and he can't find a job.
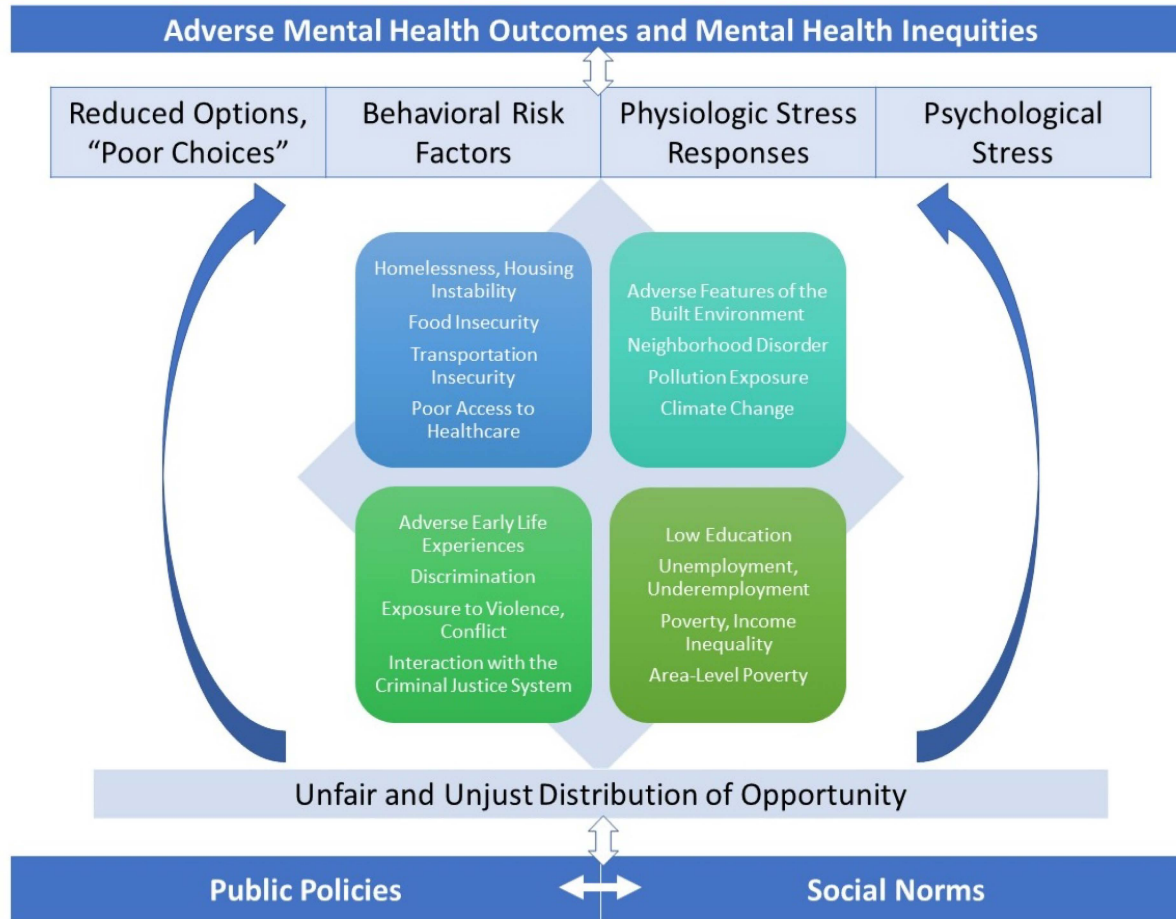
But why?

The Social Determinants of Mental Health

Edited by
Michael T. Compton, M.D., M.P.H.
Ruth S. Shim, M.D., M.P.H.

SOCIAL (IN)JUSTICE
AND
MENTAL HEALTH

Edited by

Ruth S. Shim, M.D., M.P.H.
Sarah Y. Vinson, M.D.

Shim RS, Compton MT. The social determinants of mental health: psychiatrists' roles in addressing discrimination and food insecurity. Focus. 2020 Jan;18(1):25-30.

STRUCTURAL RACISM

A SYSTEM IN WHICH PUBLIC POLICIES, INSTITUTIONAL PRACTICES, CULTURAL REPRESENTATIONS, AND OTHER NORMS WORK IN VARIOUS, OFTEN REINFORCING WAYS TO PERPETUATE RACIAL GROUP INEQUITY.

THIS SYSTEM IDENTIFIES DIMENSIONS OF OUR HISTORY AND CULTURE THAT HAVE ALLOWED PRIVILEGES ASSOCIATED WITH *WHITENESS* AND DISADVANTAGES ASSOCIATED WITH *COLOR* TO ENDURE AND ADAPT OVER TIME
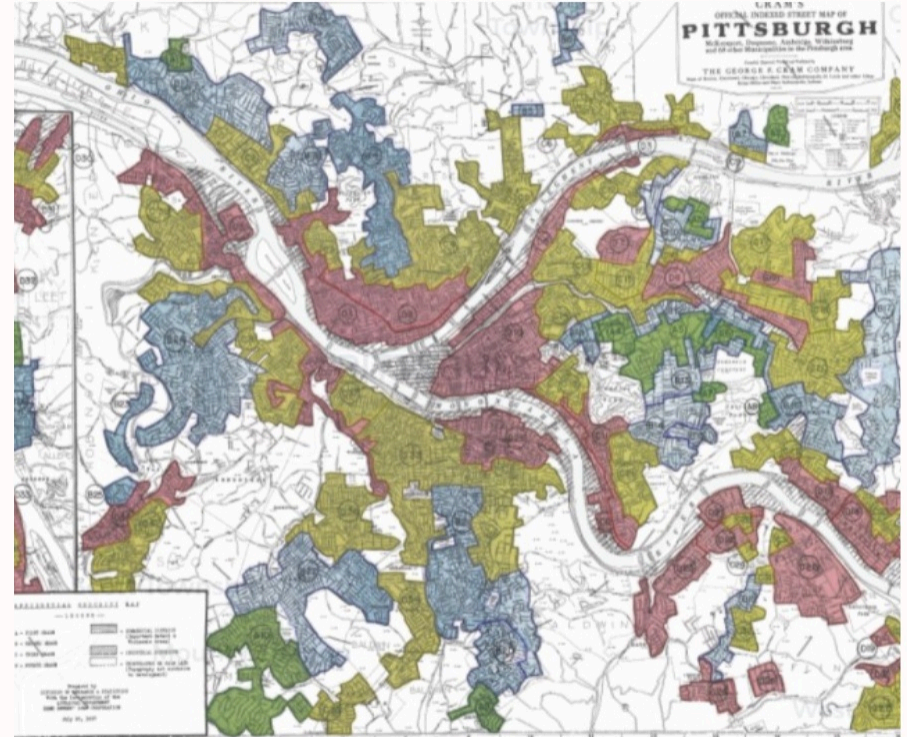
STRUCTURAL RACISM IS NOT SOMETHING THAT A FEW PEOPLE OR INSTITUTIONS CHOOSE TO PRACTICE. INSTEAD, IT HAS BEEN A FEATURE OF THE SOCIAL, ECONOMIC, AND POLITICAL SYSTEMS IN WHICH WE ALL EXIST

STRUCTURAL MECHANISMS DO NOT REQUIRE THE ACTIONS OR INTENTIONS OF OTHERS

EVEN IF INTERPERSONAL DISCRIMINATION WAS ELIMINATED TODAY,
RACIAL AND ETHNIC INEQUITIES WOULD REMAIN
DUE TO PERSISTENCE OF STRUCTURAL RACISM

HOW STRUCTURAL RACISM IMPACTS HEALTH

"The War on Drugs"

Residential Segregation

Immigration Policy
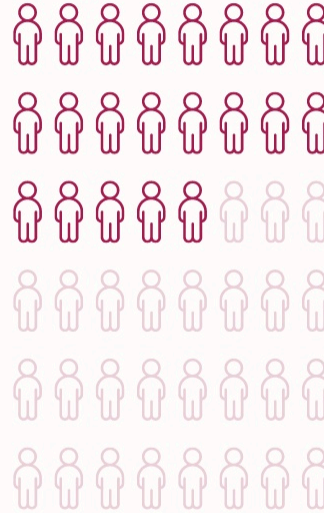
Social Security Act of 1935

Mental Healthcare

Gee, G., & Ford, C. (2011). Structural Racism and Health Inequities: Old Issues, New Directions. Du Bois Review: Social Science Research on Race, 8(1), 115-132.

IN 2018:

69%

of Black adults with any mental illness received no treatment

67%

of Latinx adults with any mental illness received no treatment

42%

of Black adults with Serious mental illness received no treatment

44%
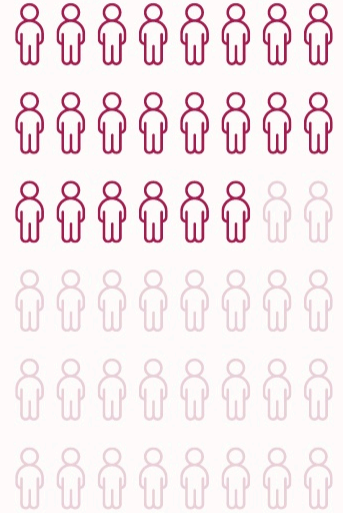
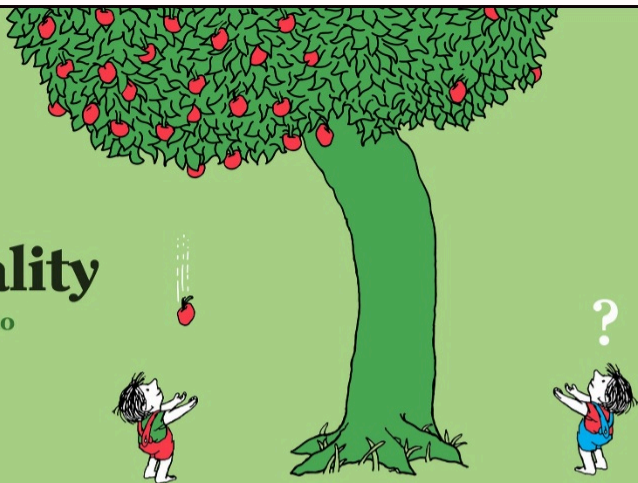of Latinx adults with serious mental illness received no treatment

89%

of Latinx adults with substance use disorders reported receiving no treatment

88%

of Black adults with substance use disorders reported receiving no treatment

COST IS THE MOST COMMONLY CITED
REASON FOR NOT SEEKING CARE

TWICE AS OFTEN AS **MINIMIZATION OF SYMPTOMS**
AND **NEARLY FIVE TIMES** AS OFTEN AS **STIGMA**

Alang SM: Mental health care among blacks in America: Confronting racism and constructing solutions. Health Serv Res 54:346-355, 2019
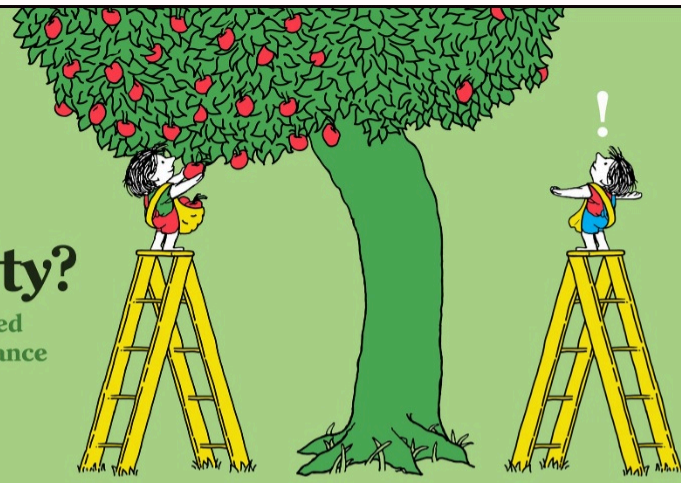
Inequality
Unequal access to opportunities
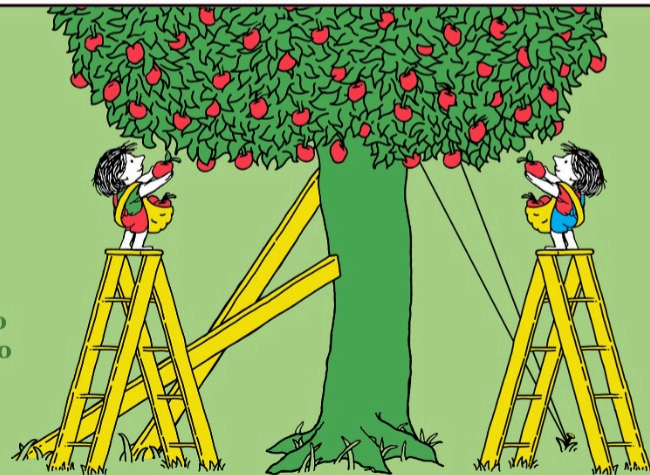
Equality?
Evenly distributed tools and assistance

Equity
Custom tools that identify and address inequality

Justice
Fixing the system to offer equal access to both tools and opportunities

By @lunchbreath
based on Shel Silverstein's Giving Tree
for John Maeda's 2019 Design in Tech Report

THE TRAINED ABILITY TO DISCERN HOW A HOST OF ISSUES **DEFINED AS SYMPTOMS, CLINICAL PROBLEMS, ATTITUDES, OR DISEASES** (E.G., DEPRESSION, HYPERTENSION, OBESITY, SMOKING, MEDICATION "NON-COMPLIANCE," TRAUMA, PSYCHOSIS) **ARE INFLUENCED BY UPSTREAM SOCIAL DETERMINANTS OF HEALTH**.

Metzl JM, Hansen H. Structural competency: theorizing a new medical engagement with stigma and inequality. Soc Sci Med. 2014;103:126–133. doi:10.1016/j.socscimed.2013.06.032

PUBLIC POLICIES

SOCIAL NORMS

PROMOTE SOCIAL NORMS OF INCLUSION, EQUITY, AND RESPECT

"WE CAN DISAGREE AND STILL LOVE EACH OTHER, UNLESS YOUR DISAGREEMENT IS ROOTED IN MY OPPRESSION AND DENIAL OF MY HUMANITY AND RIGHT TO EXIST."

-James Baldwin

PROMOTING SOCIAL NORMS OF INCLUSION, EQUITY, AND RESPECT

1 Enforce social norms of inclusion and equity

2 Educate or legislate to change social norms

3 Observe and challenge your implicit biases

4 Evaluate and break down unnecessary hierarchies

ADVOCATE FOR EQUITABLE PUBLIC POLICIES

"Medicine is a social science, and politics is nothing else but medicine on a large scale."
-Rudolph Virchow

"ALL POLICIES ARE HEALTH POLICIES"

1 Take action beyond the walls of traditional office settings

2 Advocate for policies that address social determinants of mental health, prevention, and early interventions

3 Communicate with elected officials and promote equitable representation

4 Form cross-sector collaborations and community coalitions

POLITICAL STANCES AND POLICY INTERVENTIONS ARE REQUIRED.

TO REMAIN APOLITICAL, OR NEUTRAL, *IS* A POLITICAL STANCE.

**IT IS A TACIT ACCEPTANCE OF THE STATUS QUO.**

PROGRESS

Made through the passage of legislation, court rulings and other formal mechanisms that aim to promote racial equality

RETRENCHMENT

Refers to the ways in which progress is very often challenged, neutralized or undermined in key policy arenas

"IF YOU SEE SOMETHING THAT IS NOT RIGHT, NOT FAIR, NOT JUST, YOU HAVE A MORAL OBLIGATION TO DO SOMETHING ABOUT IT."
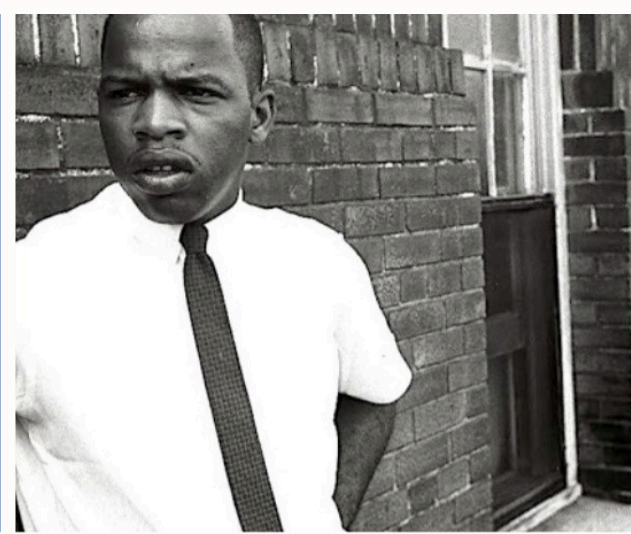
"WHEN WE SPEAK, WE ARE AFRAID OUR WORDS WILL NOT BE HEARD NOR WELCOMED. BUT WHEN WE ARE SILENT, WE ARE STILL AFRAID. SO IT IS BETTER TO SPEAK.