

Development of a Social Determinants of Health Curriculum for Emergency Medicine Residents

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BACKGROUND

Social determinants of health (SDH) encompass factors such as race, gender, living situation, economic status, access to food, and access to healthcare.

The impact of SDH has been shown to play a larger role in people's overall well-being and health than the medical care that physicians provide.

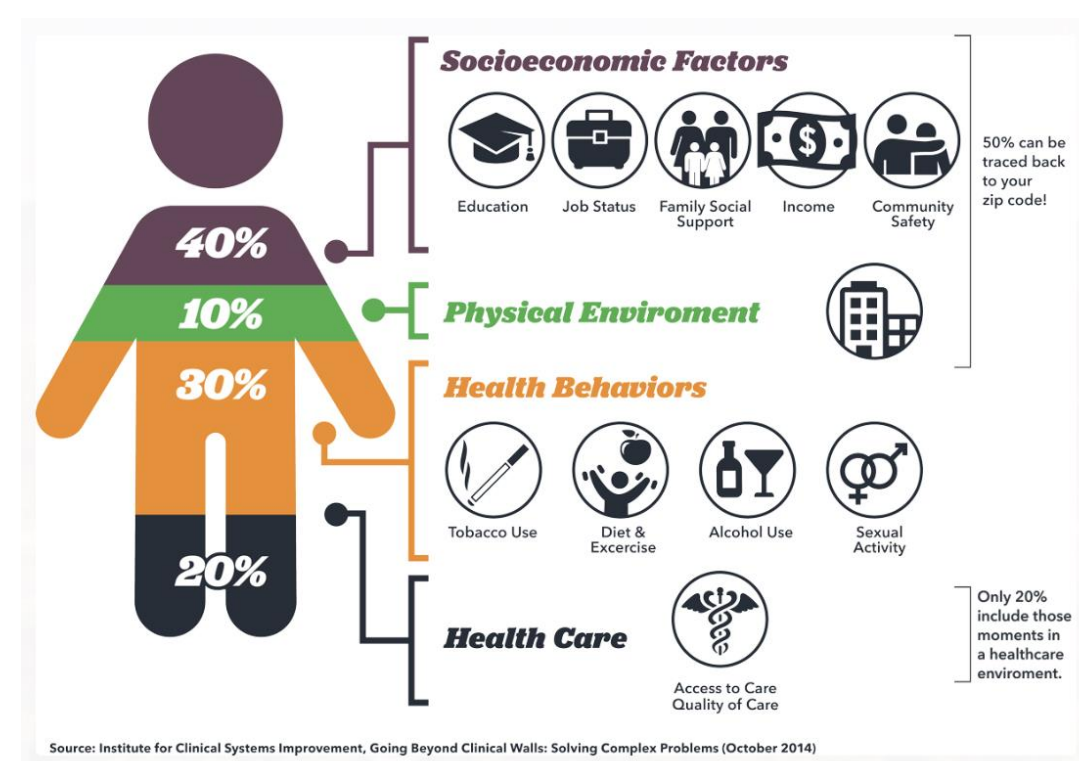
Recurrent visits to the Emergency Department by the same patients are often due to factors pertaining to SDH, such as health literacy, transportation, cost of medication, access to medical insurance, or lack of primary care options.

Understanding the impact that SDH has on patients would allow Emergency Medicine (EM) physicians to provide more comprehensive and patient-centered care.

The Accreditation Council for Graduate Medical Education (ACGME) requires that residents receive training in SDH, but the method and manner of how trainees receive this education is highly variable and not standardized.

This leads to SDH frequently being considered a "hidden curriculum" by many trainees, with crucial concepts often given less attention and emphasis compared to other aspects of medical education and training.

Figure 1: Impact of Social Determinants of Health on Overall Well-being



RESULTS

Survey results support that the curriculum improved residents' personal understanding of key concepts, comfort level addressing these concepts with patients, and confidence integrating concerns about SDH into treatment plans for all lecture topics.

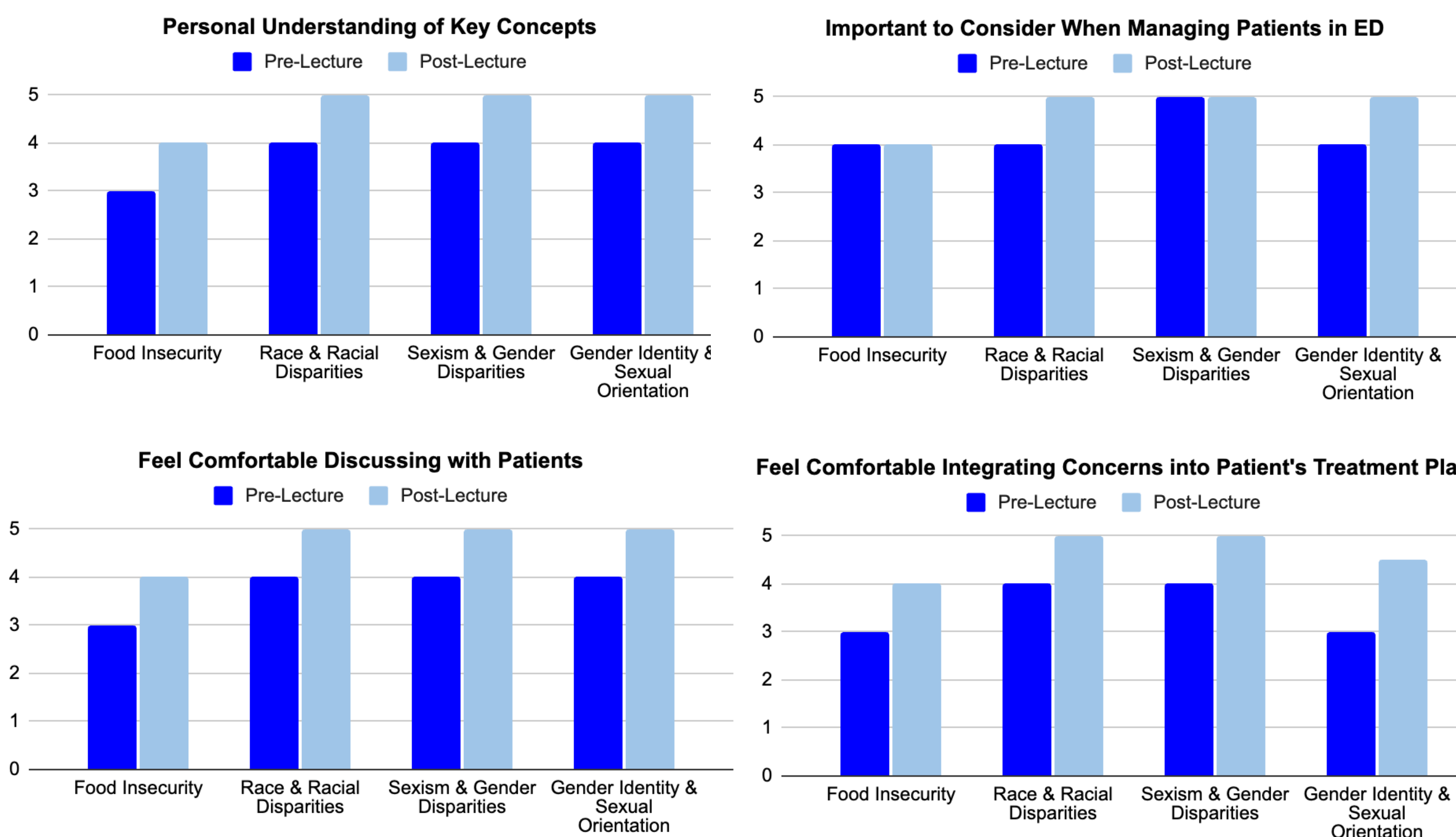
Food insecurity was the only lecture topic that did not achieve a median value of 5 on the post lecture surveys regarding residents' opinion on its importance to consider when managing patients in the ED, residents' personal understanding of the concept, as well as residents' comfort level discussing the concept with patients.

When rating their comfort level integrating specific concerns into a patient's treatment plan, the topic of gender identity and sexual orientation notably had the largest increase in residents' post lecture survey results compared to pre lecture survey results.

Graphs 1-4: Pre and Post Lecture Survey Results

X axis = Lecture Topics

Y axis = Median Value of Likert Scale Survey Responses



OBJECTIVES

The purpose of this study was to develop a SDH curriculum for the Stony Brook University Hospital (SBUH) EM intern class.

The goals of the curriculum were to:

- Make residents more informed and comfortable with terminology and concepts relating to SDH
- Emphasize the need to address SDH while caring for patients in the Emergency Department

METHODS

The curriculum consisted of 4 one-hour lectures given during the orientation month for SBUH EM interns.

Lectures included PowerPoints, videos, and data from peer-reviewed literature.

Topics covered included: food insecurity, racial disparities, sexism and gender disparities, gender identity and sexual orientation.

Anonymous pre and post lecture surveys were obtained to assess the residents' changes in perceptions and knowledge base.

Surveys asked subjects to rate their comfort levels, knowledge levels, and other factors on a Likert scale from 1 to 5 with 1 being the lowest score and 5 being the highest.

CONCLUSIONS

This project demonstrates that the development of a formal SDH curriculum can not only increase residents' basic knowledge of SDH related concepts, but also gives them the confidence to integrate this knowledge into their clinical practice.

Though additional topics would need to be covered as the curriculum evolves, this current curriculum can serve as an initial template for other residency programs in the development of their own SDH curriculum.

