Social Determinants of Health in South Carolina

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Social Determinants of Health

“Social determinants of health (SDOH) are the nonmedical factors that influence health outcomes. They are 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.”

The conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.

1. https://www.cdc.gov/about/sdoh/index.html#:~:text=Social%20determinants%20of%20health%20(SDOH),the%20conditions%20of%20daily%20life.
Economic Stability

**Goal:** Help people earn steady incomes that allow them to meet their health needs.

**Focus:**
- Employment
- Food Security
- Housing Instability
- Poverty
Economic Stability

Median Household Income, by Race and Ethnicity

**Dollars**


Note: 5 year estimates. Median income is for past month. *Estimated with high margin of error.

- Non-Hispanic White: $63,490
- Non-Hispanic Black: $36,271
- Non-Hispanic Other*: $41,369
- Hispanic: $45,778
- Non-Hispanic Asian*: $74,108

South Carolina: $54,864
Economic Stability

Adults with Diabetes, by Income

- $100K+: 9.8%
- $50K-$99K: 11.5%
- $35K-$50K: 13.3%
- $25K-$35K: 14.8%
- $15K-$25K: 21.0%
- <$15K: 23.6%

Sources: SC DHEC BRFSS, 2021. Notes: Age-adjusted
Education Access and Quality

**Goal:** Increase educational opportunities and help children and adolescents do well in school.

**Focus:**
- Early Childhood Development and Education
- Enrollment in Higher Education
- Housing Instability
- Poverty
Education Access and Quality

Students Demonstrating Readiness, Overall and by Selected Characteristics

Percent

- South Carolina
- Female
- Male
- Special Education

Source: SC Department of Education, Kindergarten Readiness Assessment (KRA).

Special education means specially designed instruction to meet the unique needs of a child with a disability.
Education Access and Quality

Adults Who Did Not Eat Vegetables at Least Once a Day, by Education Percent

- College graduate: 12.7%
- Some college: 17.8%
- HS/GED: 25.8%
- < HS: 33.4%

Note: Adults 18+.
Health Care Access and Quality

**Goal**: Increase access to comprehensive, high-quality health care services.

**Focus**:
- Access to Health Services
- Access to Primary Care
- Health Literacy
Health Care Access and Quality

Primary Care Physicians, by County
Rate per 10,000 population

Pregnancy-Related Mortality Rate

Children Living in Supportive Neighborhoods

Rate per 100,000 live births; 2018-2020; Source: SC MMMRC
Neighborhood and Build Environment

**Goal:** Create neighborhoods and environments that promote health and safety.

**Focus:**
- Crime and Violence
- Environmental Conditions
- Quality of Housing
- Access to Foods that Support Healthy Dietary Patterns
Neighborhood and Build Environment

Crime in South Carolina
Rate per 10,000 population

- Property Crime:
  - 2012: 392.6
  - 2021: 258.3

- Violent Crime:
  - 2012: 57.8
  - 2021: 52.6


Note: Property crime includes breaking and entering, motor vehicle theft, larceny, and arson. Violent crime includes murder, sexual battery, robbery, and aggravated assault.
Neighborhood and Build Environment

Homicide in Children Aged 1-17
Rate per 100,000 population

Source: SC DHEC Vital Statistics.; US data from CDC NCHS.
Note: Population for year 2021 based on single-race estimates and for years prior based on bridge-race estimates.
Social and Community Context

**Goal:** Increase social and community support.

**Focus:**
- Civic Participation
- Discrimination
- Incarceration
- Social Cohesion
Social and Community Context

Children Living in Supportive Neighborhoods

Source: National Survey of Children's Health; 2018-2022 using 2-year estimates
Summary

• SDOH can account for between 30-55% of health outcomes.
• SDOH contribute to health disparities.
• Focus on Upstream Factors and partnerships
Data Walks
What is a data walk?

Interative Data Sharing Experience between Community Leaders, or in this case students, and data experts.

Experience provides tools to empower audience to make data-driven decisions for the betterment of the public’s health.

The data walk divides the audience into small groups where they rotate around data stations, spending time with the data expert.

After a facilitated discussion, the audience votes on what should be the leading health priority areas for the next 3-5 years.
Who Attends a Data Walk?

- Education Sector
- Government Officials
- Business Leaders
- Law Enforcement
- Healthcare Workers
- Nonprofit Employees
- Faith-based Leaders
- Housing Authority
- Students!
Data Walk Structure

- Demographics
- Cross-Cutting
- Access to Care
- Chronic Diseases
- Maternal & Infant Health
- Infectious Diseases
- Behavioral Health
- Injury