

Los Angeles County’s Efforts to Address Social Determinants of Health

Social determinants of health (SDOH) are conditions in the places where people live, learn, work, and play that affect a wide range of health and quality-of-life outcomes. Under their framework *Healthy People 2030*, the Department of Health and Human Services (HHS) is setting data-driven national objectives to improve health and well-being over the next decade, including addressing social determinants of health. HHS uses a place-based framework which outlines five key areas of SDOH: healthcare access and quality, education access and quality, social and community context, economic stability, and neighborhood and built environment.

Healthcare access and quality refers to timely access to high quality, culturally aligned, and affordable healthcare, as well as primary care, health insurance coverage, and to investments in health literacy that ensure individuals have information about their own health and available health-affirming resources. Education access and quality connects education and wellbeing, identifying the impact of high school graduation, enrollment in higher education, language and literacy, and early childhood education

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and development on health outcomes. Social and community context describes the connection between where people live, learn, and work and their health and wellbeing, noting the influence of community cohesion, civic participation, discrimination, and incarceration on individual and community health. Economic stability references the link between financial resources and health, and includes the influence of poverty, employment, food security, and housing stability on health outcomes. And neighborhood and built environment acknowledges the many environmental factors that influence health, including quality of housing, access to transportation, air, soil, and water quality, availability of green spaces and healthy and affordable foods, density and overcrowding, and neighborhood crime and violence. Studies have shown that as much as 40% of a population's health is attributable to social and economic conditions, 10% may be attributed to the physical environment, 30% is affected by health behaviors, and 20% is influenced by access to healthcare and the quality of that care. Importantly, the ability to engage in healthy behaviors, to access quality health care, or to limit exposures to environmental hazards is determined by the distribution of health-affirming resources and opportunities. Often the allocation of these resources is affected by policies and practices that perpetuate racism and marginalization.

Los Angeles County is fortunate to have an extensive network of over 35 Departments to address the multiple social determinants of health for over 88 cities and 120 unincorporated areas. The Department of Public Health contains numerous offices with programs to improve overall community and population health, including addressing chronic diseases, environmental justice, violence prevention, early childhood education and childcare, and climate change. The Department of Health

Services (DHS) is not only the safety net provider for the County, providing quality care for the most vulnerable residents, but they also implement programs that serve our most at-risk residents, including justice-involved populations and persons experiencing homelessness. The Department of Public Social Services (DPSS) offers assistance with health insurance, food insecurity, domestic violence, cash assistance, and many other programs. Workforce Development, Aging, and Community Services (WDACS) provides services empowering communities and businesses to grow and thrive. The Los Angeles County Office of Education (LACOE) coordinates with the 80 school districts in the County to support and protect the education and well-being of nearly two million children. And at the direction of the Board of Supervisors, the Chief Executive Office (CEO) is implementing an anti-racist policy agenda under the Anti-Racism, Diversity, and Inclusion (ARDI) Initiative to address systemic issues that influence social determinants of health. The missions of these departments and countless others in the County are pivotal in improving overall health outcomes by ensuring that all residents have the resources and opportunities needed for optimal health and well-being.

The work being done to address social determinants of health is essential to achieving health equity. Given the many departments serving 10 million residents, collaboration and coordination is critical. To best ensure progress in improving community health and narrowing gaps in health outcomes, the County should consider future measures to coordinate efforts across both County departments and our community partners.

I THEREFORE MOVE that the Board of Supervisors direct the Department of Public Health and the Chief Executive Office's Anti-Racism, Diversity, and Inclusion

Initiative, in collaboration with the Office of Prevention Services Task Force, the Department of Health Services, the Department of Mental Health, the Alliance for Health Integration, the Department of Public and Social Services, Workforce Development, Aging, and Community Services, the Los Angeles Office of Education, and other relevant departments to assess existing efforts and opportunities to address the five key areas of social determinants of health and report back in writing within 180 days. The report should at minimum contain the following:

1. Conduct a landscape analysis and provide a summary of existing programs, policies, and initiatives led by County departments that address one or more of the key areas of the multiple social determinants of health;
2. Provide an analysis of existing funding streams or opportunities to leverage federal, state, and philanthropic funding to support future efforts;
3. In collaboration with community stakeholders, produce a gap analysis that identifies key opportunities to coordinate and integrate the delivery of services needed to optimize the health of County residents, including but not limited to policies, systems, practices, and programming changes; and
4. In collaboration with community stakeholders, develop a set of recommendations including, but not limited to, policy changes, funding strategies, and metrics to better coordinate efforts identified in the landscape analysis and in order to address the needs identified in the gap analysis in order to reduce health inequities and track progress.

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