Community Pediatrics:
Navigating the Intersection of Medicine, Public Health and Social Determinants of Children’s Health

Presented by:
Peter A. Gorski, M.D., M.P.A.
The practice of promoting the salutary and integrating the salutary and threatening social, cultural and environmental influences on children’s health and development within a community.
Community Pediatrics Includes:

- Expanded focus beyond each child to all children
- Health and development affected by family, educational, social, cultural, spiritual, economic, environmental and political forces
- Synthesis of clinical practice and public health principles – children’s health in context of family, school and community
- Collaboration with community partners to provide services and conditions equitably
Exemplars

• Infant mortality
• Preventable infectious diseases
• Dental caries
• Sedentary lifestyles
• Chronic conditions
• Obesity/Metabolic syndrome
• Other historically adult-onset diseases
• Injuries – intentional and unintentional
• Violence
• Exposure to environmental toxicants
• Substance abuse and mental health conditions
• Poverty
Social Determinants of Health

- Life Course Perspective and Early Programming
- Epigenetics
- Childhood obesity and adult cardiovascular disease
- Inadequate calcium and Vitamin D intake in childhood and adult osteoporosis
- Childhood maltreatment and adult mental and physical health problems – e.g. depression, high C-reactive protein, inflammation and heart disease
- Health care but one of several key influences on children’s health and well-being as children move through other primary systems, services and environments.
Inequities in Health Status

• England has abolished inequalities in access to healthcare.

• Still they have gross inequalities in health

• Reason: most arise from social inequalities, how they live.

• What good does it do to treat people’s illnesses and send them back to conditions that made them sick?!
Unequal Life Expectancy

- 7 year difference between 5th% and 95% on social gradient
- 17 year difference in London borough of Westminster
- 32 year difference in Chicago
Essential Foundations for Healthy Development

- Fostering healthy relationships in the lives of children (raising social capital)
- Promoting high quality learning environments and health literacy (raising educational capital)
- Promoting shared prosperity and financial stability for all members of the community (raising economic capital)
- Promoting healthy environments and supportive infrastructure (raising environmental capital)
Environments

• Toxic exposures:
  – e.g. mold, heavy metals, fluorocarbons

• Unsafe housing

• Limited play and green spaces

• Limited convenient and affordable public transportation

• Access for children with special needs
All Needs are Equally Important

- Physical needs will not be met without education, play, respect and freedom from discrimination

- Children’s needs are interdependent
Income Inequality

• Proxy for more profound inequalities that create unequal sense of worth, efficacy

• Income matters more when other primary supports are not equitably provided
  • Healthcare, education, childcare, transportation, workplace environment and security, collective efficacy and social cohesion (epidemiology of depression and smoking)
Post-neonatal Infant Mortality
(per 100,000 live births, 1986)

I'm sure glad the hole isn't in our end...
Psychophysiologic Mechanism

- Low self-control, self-efficacy and self-esteem together cause a cascade of toxic stress that destroys brain receptors, ability to fight infection, inflammation and increase all-cause mortality.

- Mental health is root of physical health

- Social justice affects mental health
I matter
I belong
I can
Life Course Problems Related to Early Life Experiences

- 2nd Decade
  - School Failure
  - Teen Pregnancy
  - Criminality
  - Depression

- 3rd/4th Decade
  - Obesity
  - Elevated Blood Pressure

- 5th/6th Decade
  - Coronary Heart Disease
  - Diabetes

- Old Age
  - Premature Aging
  - Memory Loss
Investment of the State of Florida during difficult stages of childhood

The Children’s Trust

- Preschool: 2300
- School: 7000
- Incarcerated children: 51000
- High school: 10000

$/child/year
Partnering with Public Health

• Have always served as beacons for public health dangers
  – Reporting illness patterns, hazards and risky trends
• Reciprocally, pediatricians benefit from population-based information on programs, especially preventive services:
  – Injury prevention
  – Child maltreatment prevention
  – Lead poisoning
  – Tobacco control
  – Breastfeeding promotion
  – Obesity prevention
  – Asthma
  – Trauma
  – Disaster preparedness
Advocacy

• Pediatricians advocated strongly for passage of ACA and for the needs of children (who do not participate in government)
• Legislative advocacy training in Pediatric Residency programs
• Need for financing models for accountable care organizations and other practices to bill for attention to social determinants
Why Target Whole Communities?

• Health and well-being of each person depends on condition of all

• Cannot predict individual course based on group risk factors without considering the social context

• Cost burden of case-finding and treatment too high

• Moral weakness of accepting unequal outcomes
Recommendations

• Increase use of community data about social determinants (EDI and ECRI)
• Partner with public health departments and school districts, child welfare agencies to decrease barriers to health and health care in communities
• Disseminate information about effective community programs and resources for children’s health and well-being
• Promote preventive health strategies at individual and population levels
• Engage with primary settings and resources for children’s health and development
Recommendations continued…

• Advocate for universal access to medical homes
• Advocate for universal access and quality of the social, economic, educational and environmental capital resources for children’s health
• Speak out – use the media
• Pediatric medical education and continuing medical education should include curricula on community and public health, social determinants of health, health care systems and financing, child advocacy