

# Addressing the Effects of Psychological Trauma in a Community Using a Social Determinants of Health Approach: A Case Study

## Student Learner Outcomes

Upon completion of the case study, the student will be able to:

1. Recognize the symptoms of psychological trauma.
2. Assess for adverse experiences that may precede psychological trauma.
3. Analyze the relationship among psychological trauma, physical and mental health, and social determinants of health.
4. Examine the prevalence of psychological trauma in a community context.
  - a. Analyze the social and community context of adverse experiences and psychological trauma.
  - b. Analyze access to health and health care for those with adverse experiences and psychological trauma.
  - c. Analyze neighborhood conditions and the built environment in relationship to adverse experiences and psychological trauma.
5. Identify how adverse experiences may contribute to health issues over the life course and adversely impact multiple generations of a family and community.
6. Discuss the institutional relationships in a community that may impact mental health and well-being and points for improvement.
7. Discuss available federal, state, and local resources to improve the physical and mental health of community residents.
8. Develop a strategy to address social determinants of health to improve mental health and well-being in individuals residing in a community with wide-spread psychological trauma.

# Addressing the Effects of Psychological Trauma in a Community Using a Social Determinants of Health Approach: A Case Study

## Introduction

“Social determinants of health are conditions in the environments in which 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” (Healthy People 2020). Social determinants of health (SDOH) impact our health. The Centers for Disease Control and Prevention (CDC) note that a population’s health derives from factors beyond health behaviors, genetics, and clinical care, and that environmental and social factors are very important as well.

This means that health care clinicians and public health practitioners need to think not just about a patient’s individual or community’s aggregate behaviors, but also about the factors that shape social, economic, and environmental conditions. We need to understand the importance of SDOH on people’s health both at an individual and population level. We need to design interventions that address health inequities and advocate for improvements to the environments in which our patients and communities live, work, and play. If we think of improvements made to the social, economic, and environmental arena as available to everyone, we have an opportunity to shape and improve the health of everyone. This overall improvement may seem small at the individual level, but in the aggregate, such shifts can promote significant change at the population level.

The key social determinants of health include economic stability, education, health and health care, neighborhood and the built environment, and social and community context. The underlying factors that influence economic stability include unemployment, housing insecurity, food insecurity, and poverty. Those underlying factors that influence education include early childhood education and development, high school graduation, language and literacy, and higher education enrollment. For health and health care, the core underlying factors are access to health care, access to primary care, and health literacy. Underlying factors that influence neighborhood and the built environment include access to healthy foods, quality of housing, crime and violence, and environmental conditions. For social and community context, key

underlying factors include social cohesion, civic participation, discrimination, and incarceration.

[\(See Glossary\)](#)

## Social Determinants of Health

(Healthy People 2020)

Social determinant	Underlying factors of influence
<b>Economic stability</b>	Unemployment, housing insecurity, food insecurity, and poverty
<b>Education</b>	Early childhood education and development, high school graduation, language and literacy, and higher education enrollment.
<b>Health and Healthcare</b>	Access to health care, access to primary care, and health literacy
<b>Neighborhood and built environment</b>	Access to healthy foods, quality of housing, crime and violence, and environmental conditions
<b>Social and community context</b>	Social cohesion, civic participation, discrimination, and incarceration

All the SDOH are strongly interrelated. For example, discrimination may limit housing and education opportunities. Language and literacy inequities may influence health literacy, civic participation, employment, and higher education enrollment. Incarceration may influence poverty, unemployment, and civic participation.

Using Newark, New Jersey as our case study exemplar, we will first think about a community from a social determinants of health framework, then move from a wider perspective to a more personal focus to see how social determinants affect the physical and mental health of individuals and families. You are encouraged to think about the range of community-level social determinant of health-based interventions that are available to support the mental health and well-being of those living within the SDOH context.

## Population based interventions to improve mental health and well-being and reduce psychological trauma

Key Social Determinant of Health Addressed	“Intervention”	Health Outcomes	Reference
<b>Social and community context</b> <b>Neighborhood and built environment</b>	Green space park walking and physical activity	Personal psychological restoration Children’s health promotion Stress reduction strategy Companionship and social support	Munet-Vilaro F, Echeverría SE, Chase S. (2017). <a href="#">Parks as social and cultural spaces among U.S.-born and foreign-born Latinas.</a> West J Nurs Res

<b>Health and health care</b>	Single-session psychoeducation	Increase in mental health service utilization	Ghafoori, B., Fisher, D., Korosteleva, O, & Hong, M. (2016). A randomized, controlled pilot study of a single-session psychoeducation treatment for urban, culturally diverse, trauma-exposed adults. <i>J Nerv Ment Dis</i> 204, 421-30.
<b>Neighborhood and built environment</b> <b>Health and health care</b>	Neighborhood Walkability	Protective depression association in older men	Berke, EM, Gottlieb, LM, Moudon, AV, & Larson, EB. (2007). Protective association between neighborhood walkability and depression in older men. <i>Journal of American Geriatric Society</i> , 55, 526-533.
<b>Neighborhood and built environment</b>	Green space especially around schools	Boost cognitive outcomes in children. Working memories and attention spans.	(2015). Proceedings of the National Academy of Sciences.
<b>Neighborhood and built environment</b> <b>Health and health care</b>	Swimming pool and leisure provision	Stress relief Social contact and isolation relief Improved mental health	Thomas, H., Kearns, A., & Petticrew. (2003). Assessing the health impact of local amenities: A qualitative study of contrasting experiences of local swimming pool and leisure provision in two areas of Glasgow. <i>Journal Epidemiol Community Health</i> ; 57: 663-667.
<b>Neighborhood and built environment</b>	Nature-based therapy (forest therapy garden)	Decrease in PTSD symptoms Symptoms less burdensome Easier social interaction with family and friends	Varning Poulsen, D. (2015). How war veterans with post-traumatic stress disorder experience nature-based therapy in a forest therapy garden. University of Copenhagen. (Dissertation).

<b>Neighborhood and built environment</b>	Nature-based therapy (surfing/'blue gym')	Sense of respite from PTSD	Caddick, N., Smith, B., & Phoenix, C. (2015). The effects of surfing and the natural environment on the well-being of combat veterans. <i>Qualitative Health Research</i> 25, 76-86.
<b>Social and community context</b>	Racial and Ethnic Approaches to Community Health (REACH) coalition multiprogram intervention	Better self-rated mental health	Carty, DC, Kruger, DJ, Turner, TM, Campbell, B., DeLoney, EH, & Lewis, EY. (2011). Racism, health status, and birth outcomes: Results of a participatory community-based intervention and health survey. <i>Journal of Urban Health</i> 88, 84-97.
<b>Social and community context</b>	Volunteering	Well-being in older men	Goth, U.S. & Smaland, E. (2014). The role of civic engagement for men's health and well-being in Norway—A contribution to public health. <i>Int J Res Public Health</i> 6, 6375-6387.

**For more intervention information and resources:**

<https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources>)