

# Introduction to SIREN

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Social Interventions Research & Evaluation Network

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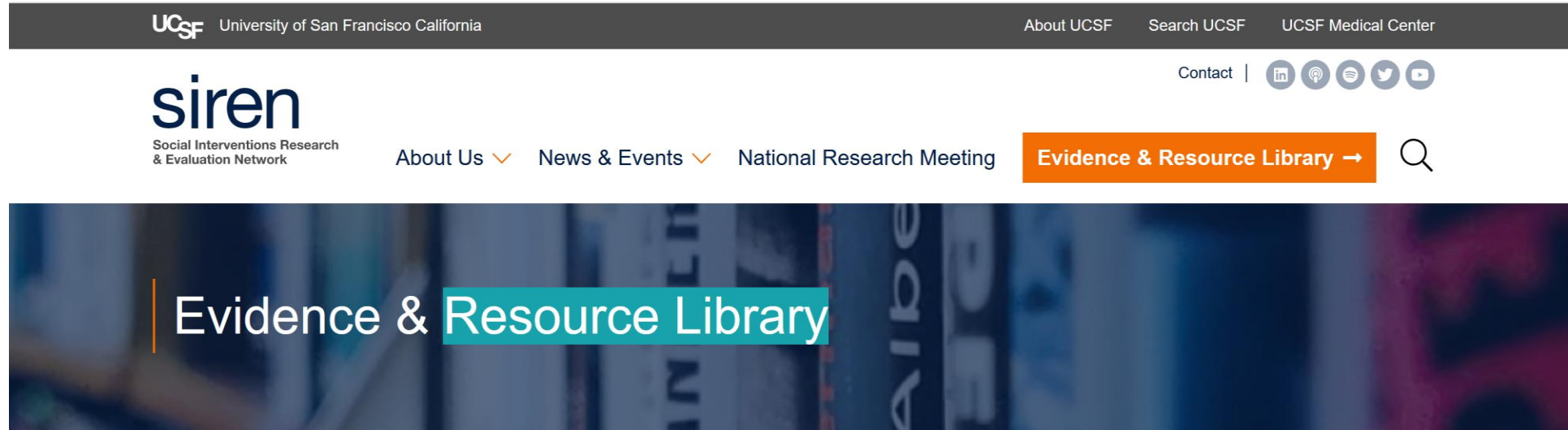
Research and dissemination center at UC San Francisco

Improving **research** on  
social and medical care  
**integration**

- Conduct research
- Support researchers
- Synthesize and disseminate research

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# SIREN Evidence and Resource Library



- Searchable database of research and implementation tools about healthcare-based SDOH interventions.
- Includes 3000+ resources; updated monthly.
- Available at <https://sirennetwork.ucsf.edu/tools/evidence-library>

# SIREN Monthly Newsletter

## siren

Social Interventions Research & Evaluation Network

May 2024 News

### Highlights



**Upcoming SIREN Webinar: Where should healthcare invest in food security interventions? Lessons from recent research**

Evidence is mounting about the impacts of interventions such as medically tailored meals and produce prescriptions on diet-related health conditions, fueling interest in these interventions among healthcare organizations and payers. Join us for a webinar on June 5th at 9am PT/12pm ET to hear experts discuss the latest research in this area. Panelists will include researchers Drs. Kurt Hager, Hilary Seligman, and Ariana Thompson-Lastad in a discussion moderated by Dr. Monica Soni, Chief Medical Officer of Covered California.

[Register here](#)

Below is a list of recently published research related to integrating social and medical care (and in some cases we have provided summaries of the results). See more articles like these in the searchable [SIREN Evidence Library](#). As always, if you are aware of resources you think should be added to the Evidence Library, please send them our way!

#### Peer-Reviewed Articles

##### [Awareness](#)

[Screening Tools to Address Social Determinants of Health in the United States: A Systematic Review](#) Neshan M, Padmanaban V, Tsilimigras DI, Obeng-Gyasi S, Fareed N, Pawlik TM | *Journal of Clinical and Translational Science*

[A Family-Centered Approach to Social Needs Awareness in the Pediatric Emergency Department](#) Assaf RR, Padlipsky PS, Young KDA | *PEC Innovation*

[Unpacking Patient Perspectives on Social Needs Screening: A Mixed Methods Study in Western Colorado Primary Care Practices](#) Broaddus-Shea ET, Jimenez-Zambrano A, Holliman BD, Connelly L, Huebschmann AG, Nederveld A | *Patient Education and Counseling*

[Incorporating Social Determinants of Health into Patient Care Workflows Within a Health System Specialty Pharmacy](#) Han J, Tilkens M, Marciniak MW, Rhodes LA | *Journal of the American Pharmacists Association*

[Screening for Social Determinants of Health Among Populations at Risk for MASLD: a Scoping Review](#) Kim RG, Ballantyne A, Conroy MB, Price JC, Inadomi JM | *Frontiers in Public Health*

[Evaluating Screening to Assess Endorsement of Food Insecurity in the Inpatient Setting](#) Tepe KA, Auger KA, Rodas Marquez S, Atarama D, Sauers-Ford HS | *Hospital Pediatrics*

[Understanding Social Needs Screening and Demographic Data Collection in Primary Care Practices Serving Maryland Medicare Patients](#) Starling CM, Smith M, Kazi S, et al. | *BMC Health Services Research*

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# THE MILBANK QUARTERLY

A MULTIDISCIPLINARY JOURNAL OF POPULATION HEALTH AND HEALTH POLICY

Perspective |  **Open Access** |   

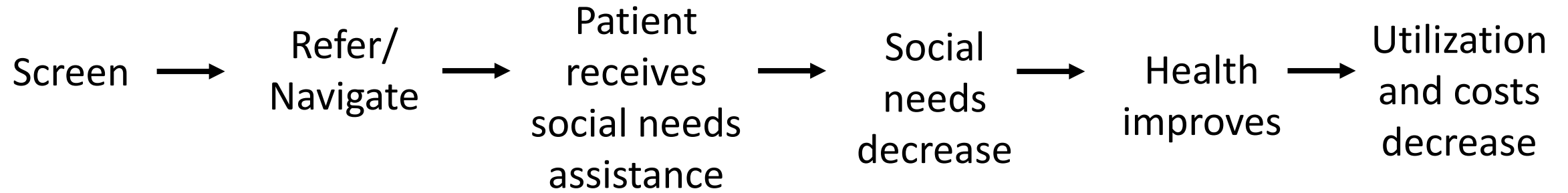
## Revising the Logic Model Behind Health Care's Social Care Investments

LAURA M. GOTTLIEB , DANIELLE HESSLER, HOLLY WING, ALEJANDRA GONZALEZ-ROCHA, YURI CARTIER, CAROLINE FICHTENBERG

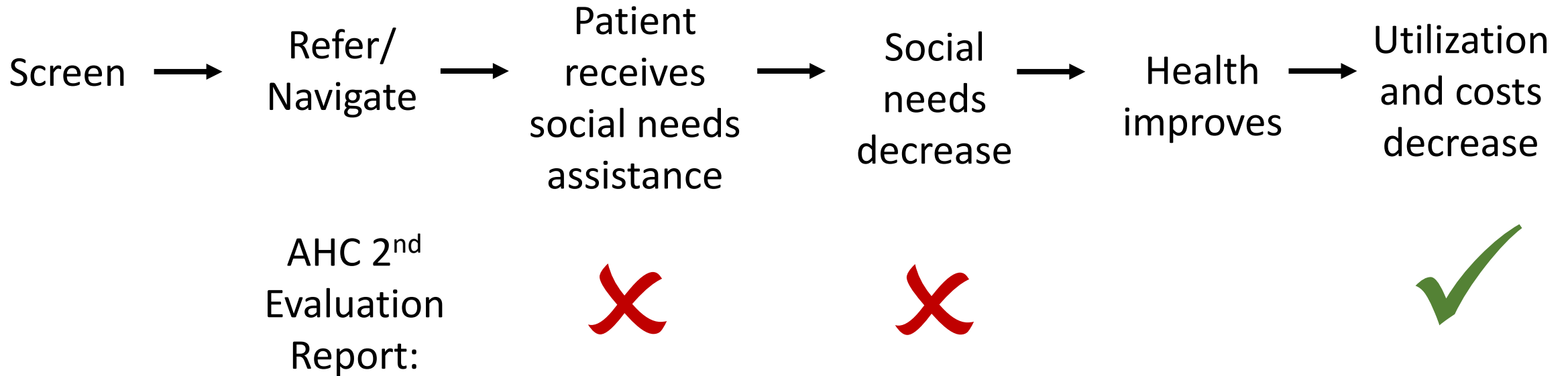
First published: 25 January 2024 | <https://doi.org/10.1111/1468-0009.12690>

<https://onlinelibrary.wiley.com/doi/10.1111/1468-0009.12690>

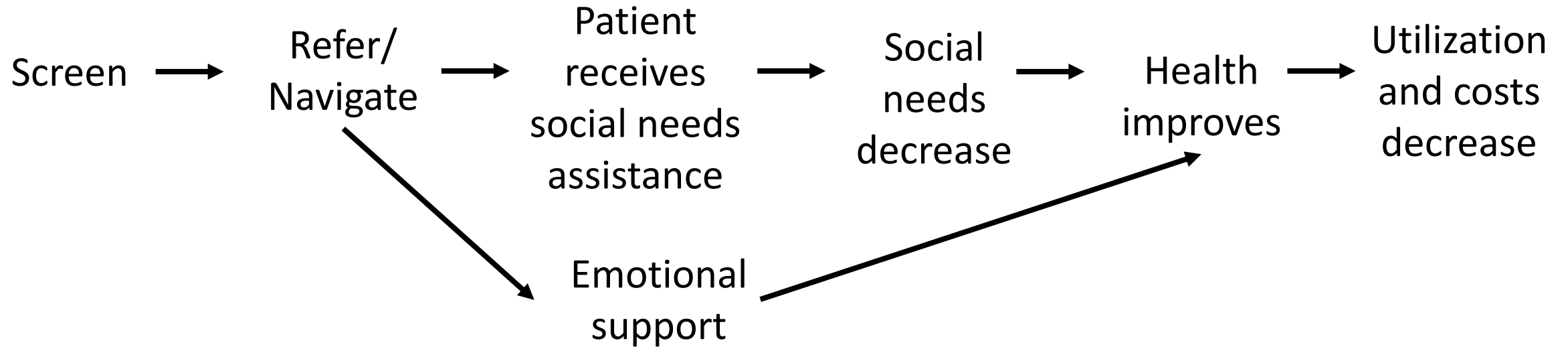
# Why screen?



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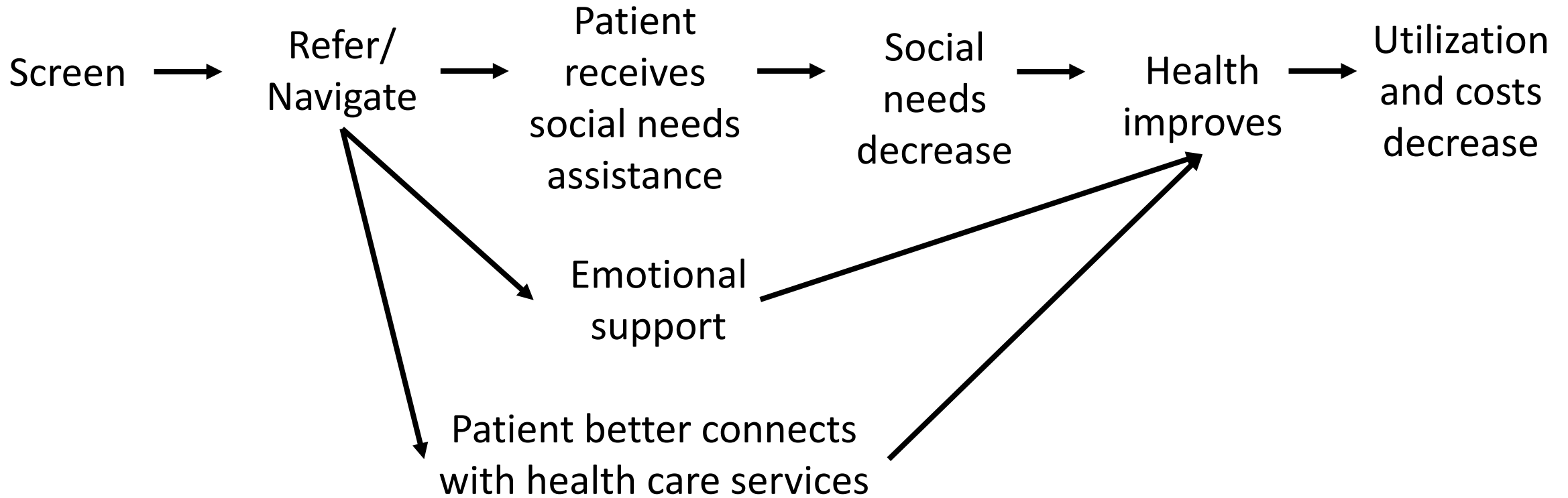


# Stress reduction pathway

*“When [the navigator] called and she just asked, ‘How are you doing?’ Just knowing that somebody cares. Even if I didn’t need anything at the time, just her calling to check up on me was really nice...That’s nice to have people in the community reach out and just see how you’re doing, if you need anything, food or are you having issues with this or that? You need that as a parent. Sometimes you feel alone, you know?”*

Aronstam A, et al. Families’ Perspectives on Social Services Navigation in Pediatric Urgent Care. *JABFM*. 2024.

# Why screen?



# Healthcare services connections pathway

RCT of CHW intervention IMPaCT Community Health Workers Program:

- Almost 25% reported that the most helpful component of the CHW intervention was support for establishing primary care.

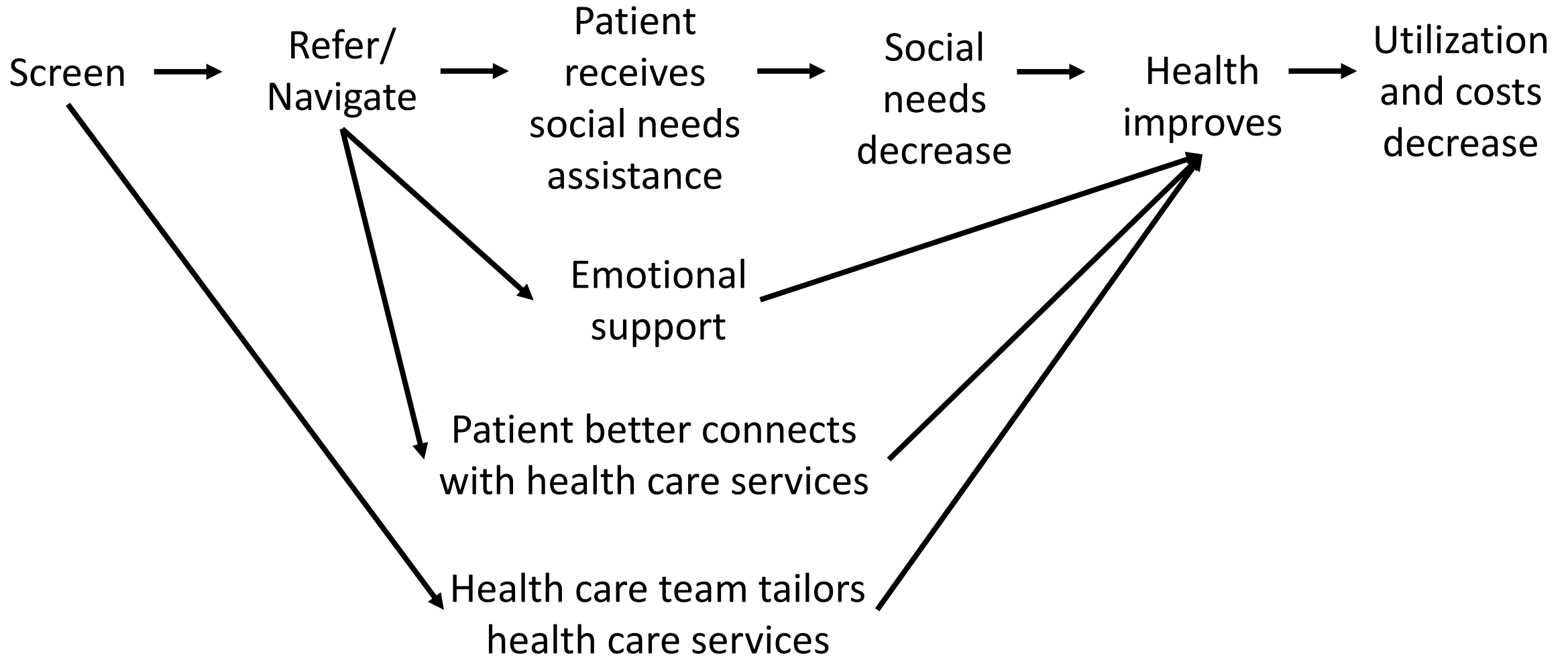
Kangovi S, et al. Patient-centered community health worker intervention to improve posthospital outcomes: A randomized clinical trial. *JAMA Internal Medicine*. 2014.

# Healthcare services connections pathway

*“[The intervention was like] a wake-up call of, okay, it’s time for you to take care of yourself... [T]ake a day out of your week to call somebody, or schedule an appointment, or even go to your appointment.”*

Aronstam A, et al. Families’ perspectives on social services navigation in pediatric urgent care. *JABFM*. 2024.

# Why screen?



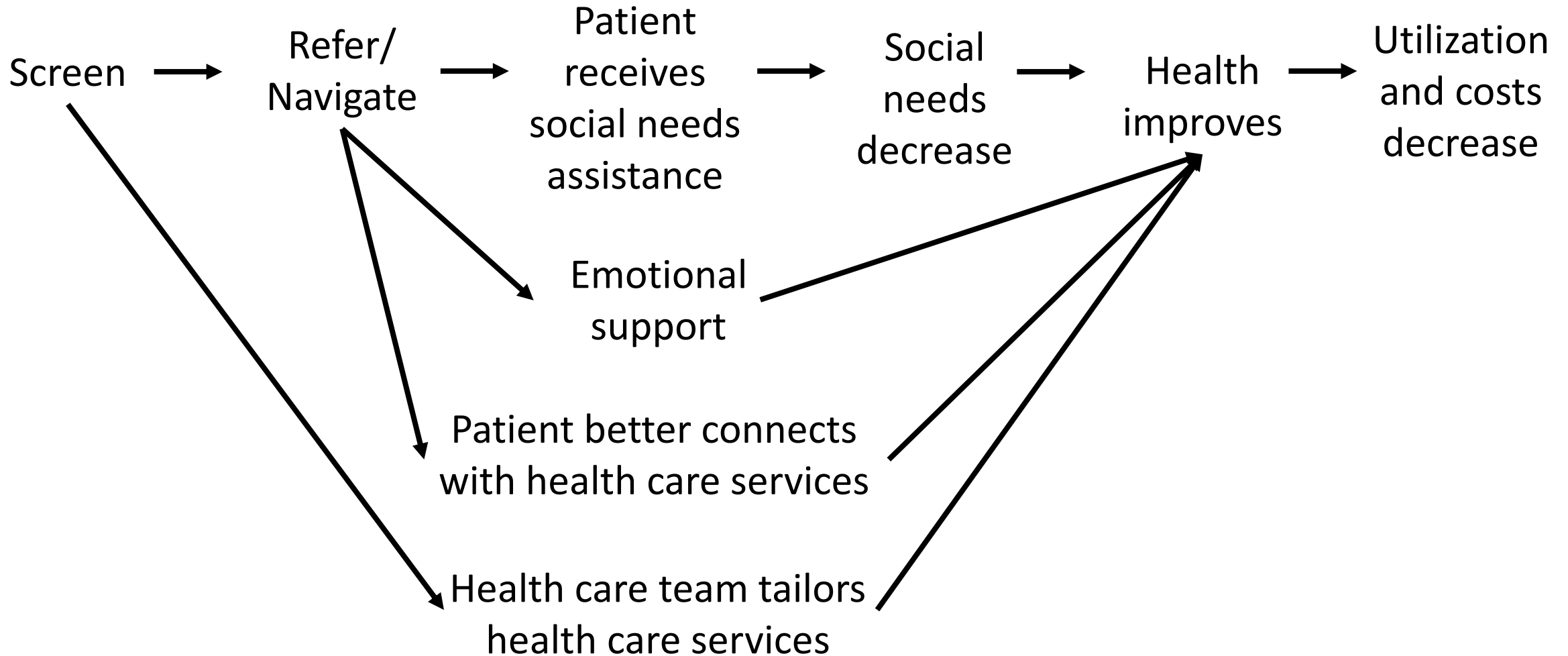
# Tailored Care: Diabetes case

Clinical decisions influenced by social risk	Examples
Target level of blood sugar control	Increase goal HgA1c to avoid hypoglycemia risk in patient w/ limited food or fridge access.
Medication management	Change type of insulin to reduce medication cost; change to higher dose medication with pill splitter.
Behavioral recommendations	Change physical activity recommendations because of neighborhood safety.
Referrals	Schedule same day appointments or telehealth visits to decrease impact of poor transportation access.

\*Table adapted from Senteio, et al. JAMIA 2019



# Why screen?



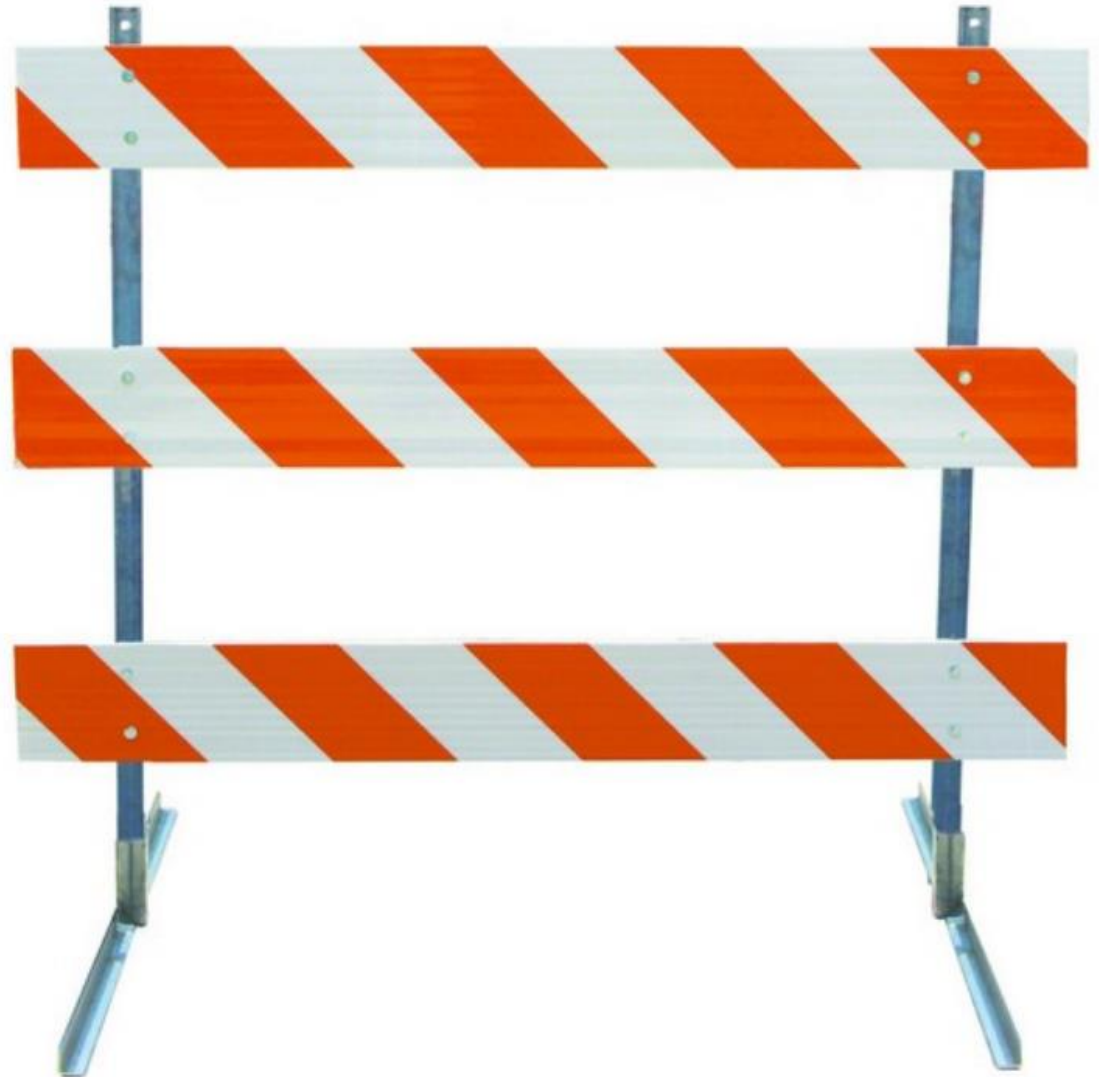
# Screening barriers

- Provider/care team discomfort
- Concerns about patient discomfort
- Patient lack of interest

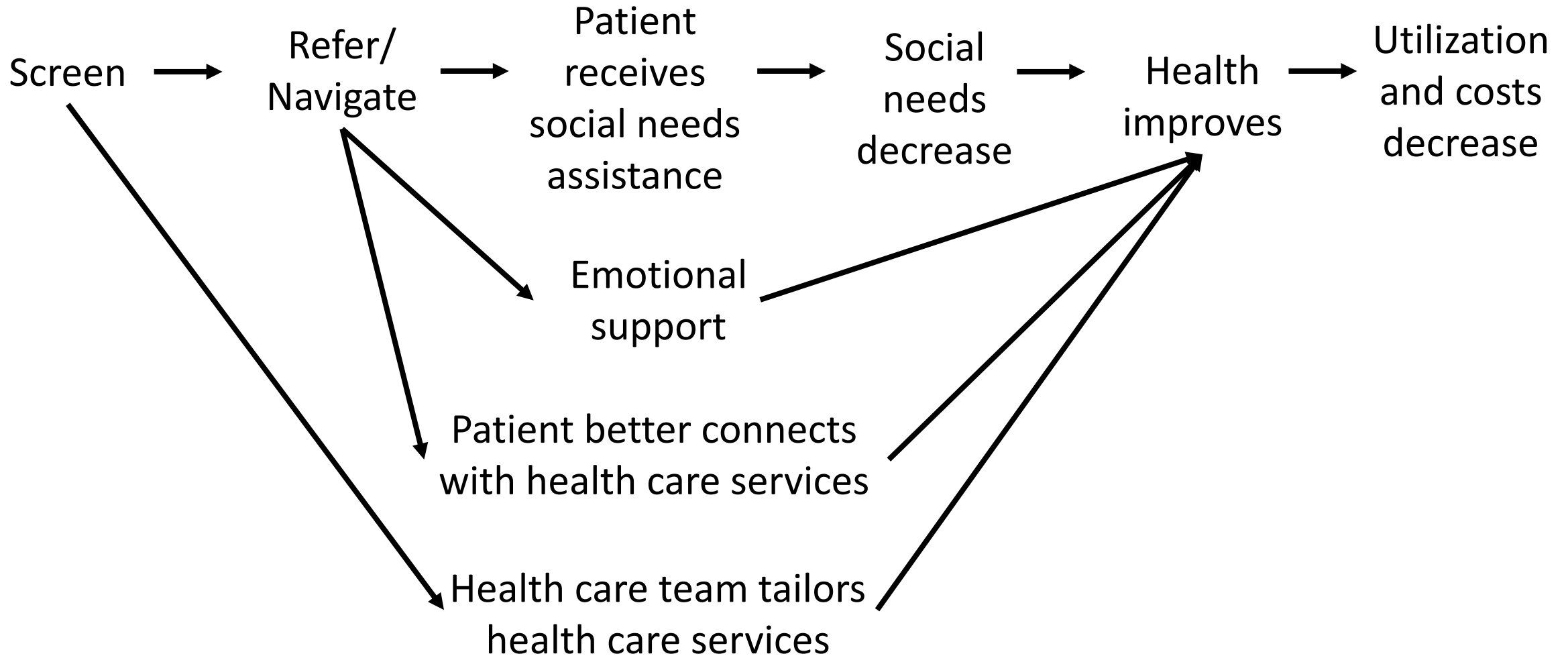


# Screening barriers

- **Provider/care team discomfort:**
  - We can't screen if we don't know how to address the needs



# Why screen?



# Patients think social risk screening improves health care

## Provides a complete picture

“I think it’s important for it to be in the chart because our medical providers then can, you know, take it into consideration and look at the entire person and not just the symptoms that are coming in..”



## Aids in diagnosis

“So that my doctor knows why I have headaches, due to stress because I have no place to live.”

# Patients don't expect care teams to fix their social needs

## Not their responsibility

“But as far as the health care providers, I don't really see it as their responsibility.”

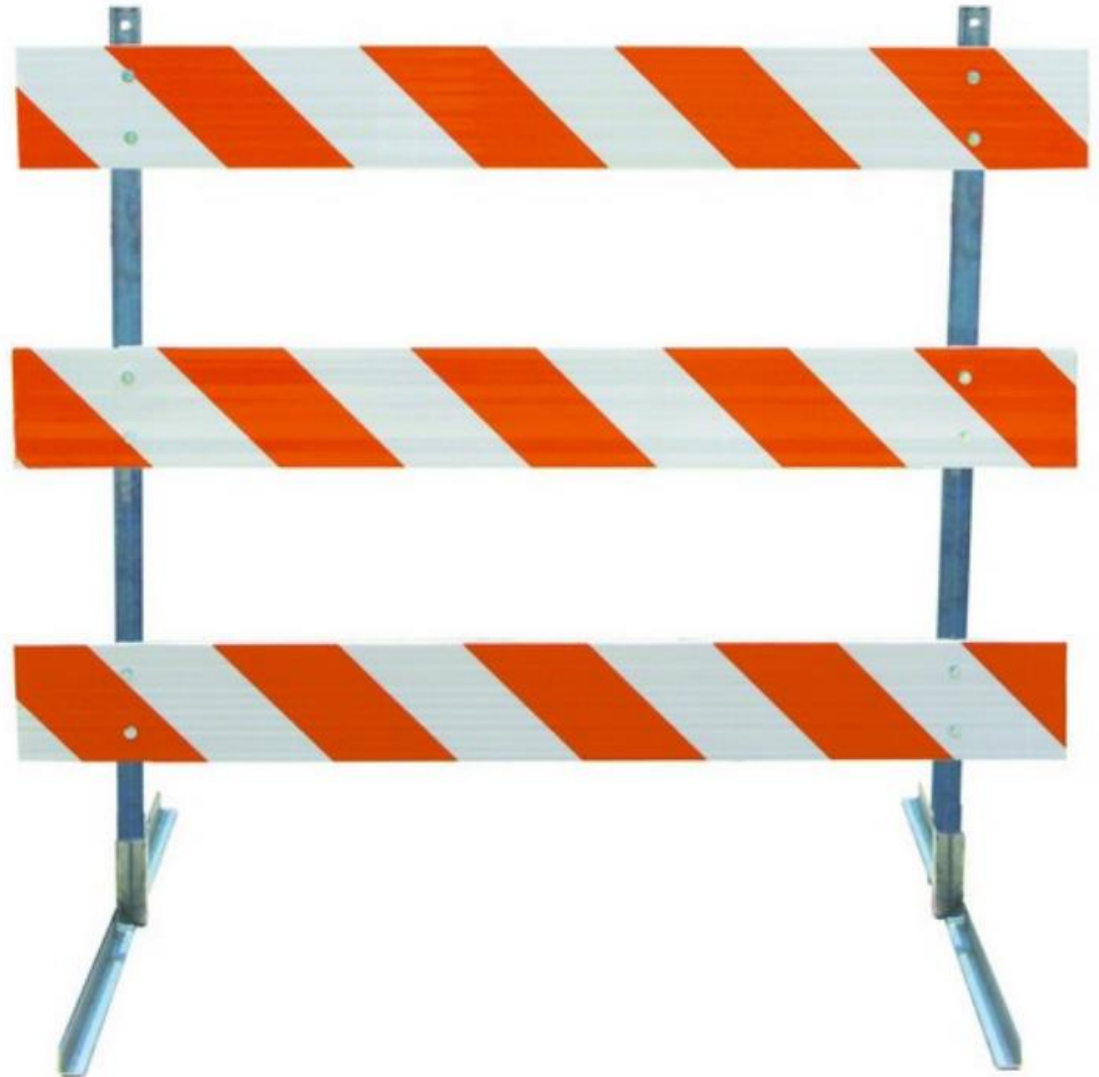
“I think they should ask the questions. I'm not sure that they should be responsible for helping them.”





# Screening barriers

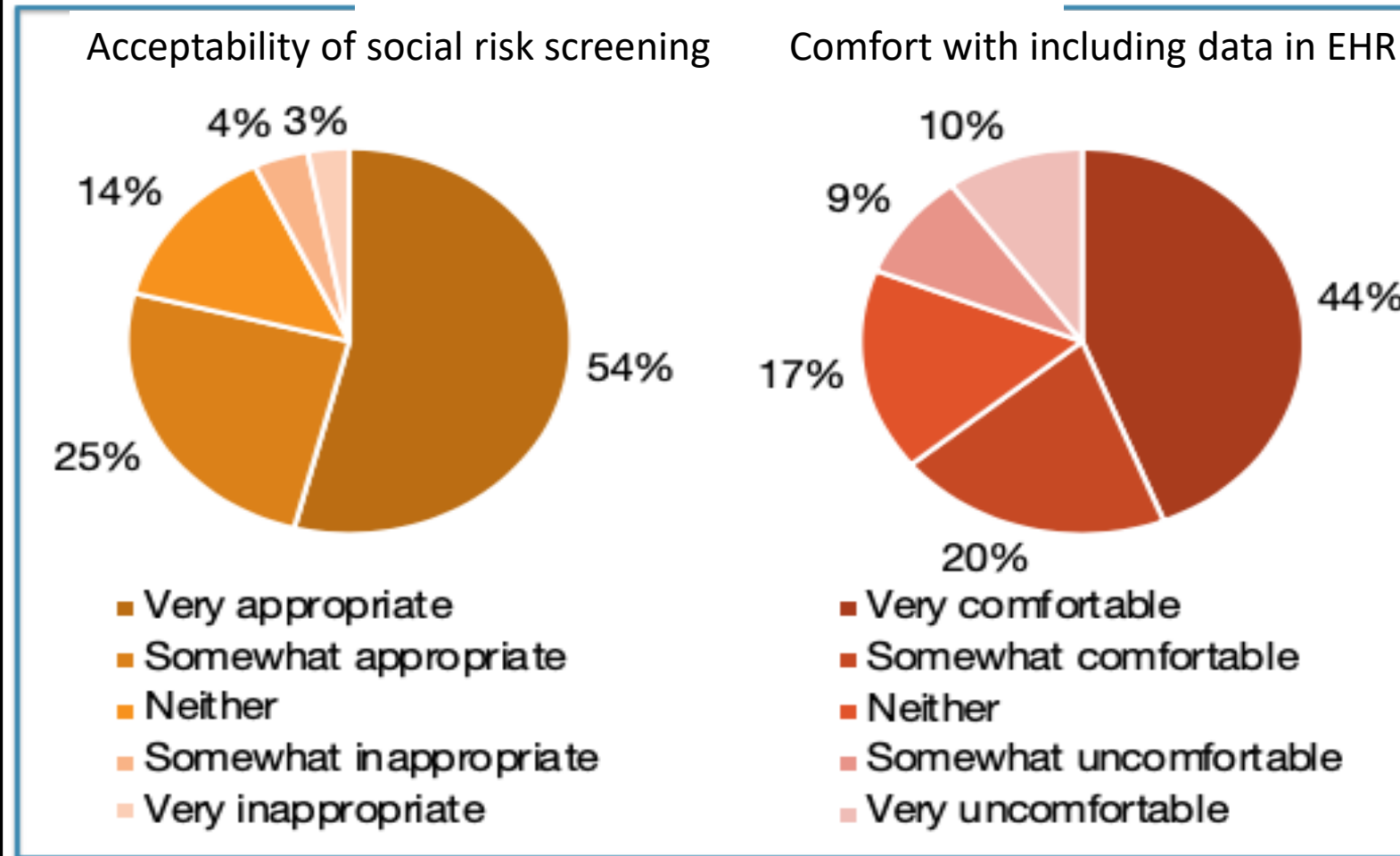
- Provider/care team discomfort
- **Concerns about patient discomfort**
- Patient lack of interest



# Patient/Caregiver Acceptability of Screening

Survey of 1,000 patients at 10 sites

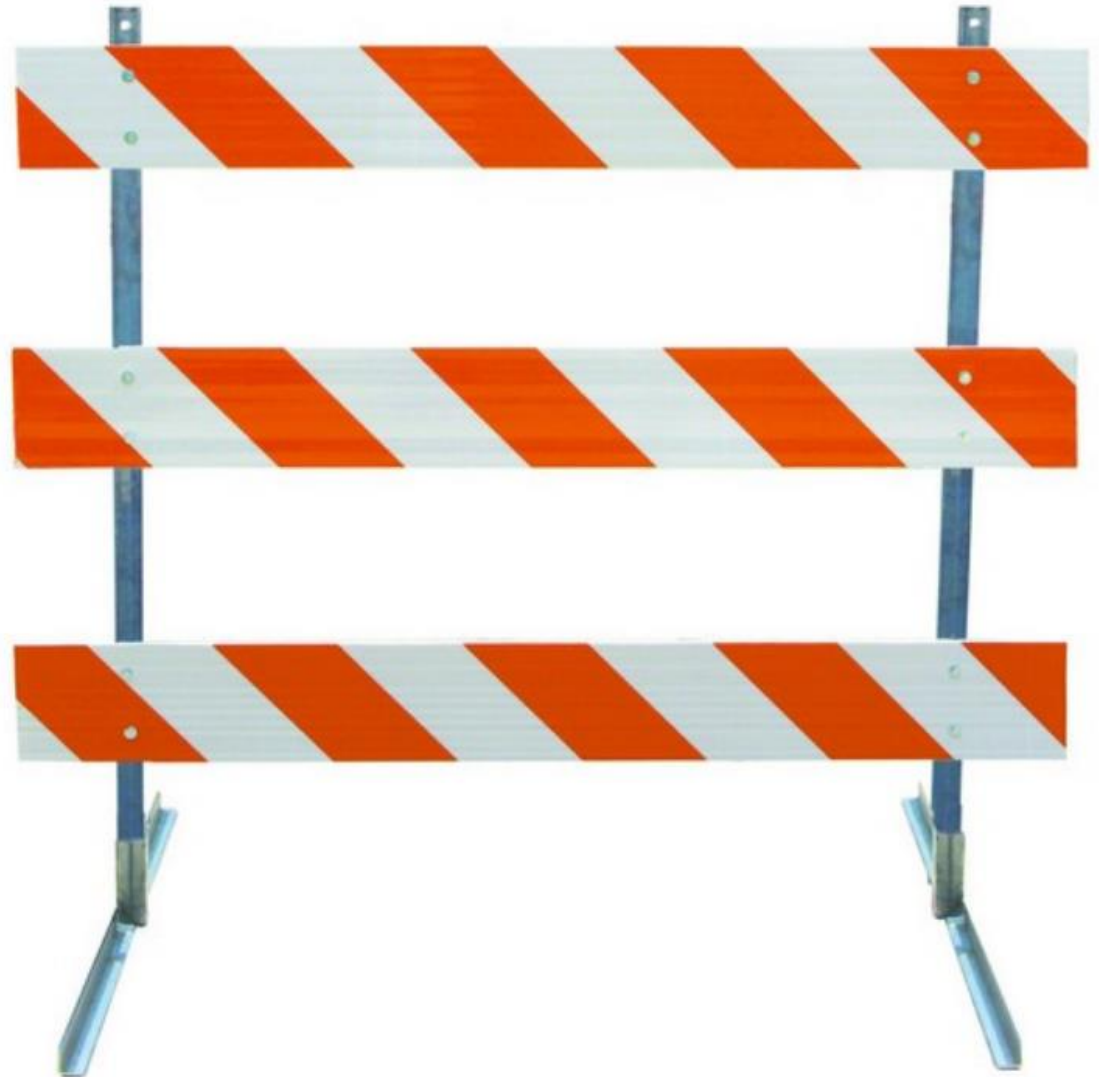
79% very or  
somewhat  
appropriate



64% very or  
somewhat  
comfortable

# Screening barriers

- Provider/care team discomfort
- Concerns about patient discomfort
- **Patient lack of interest**



# Not wanting to take resources away from someone else

“I don’t want to take away resources from somebody that might need them more than me and that might have less resources than me.”



# Skepticism about how health care teams can help



“Maybe [staff] can explain who their partners are. . . . If you’re asking me about housing, explain [your partners] to me. . . . If . . . you are not a housing entity, I don’t understand why you’re asking. I really don’t.”


# Available assistance is insufficient

“So the problem [for] a lot of people. . . [is that] the help that claims to be available is subpar, doesn’t work, or is not there. And that’s a big factor [in patients’ declining assistance].””






# Stigma and shame



“I don’t know why I haven’t called. . . I feel like it’s just more me not wanting to, like, accept help from other people. . . I just feel kind of bad or ashamed that I even need help in the first place.”

# Fear of negative consequences



“Because they [are] scared if they have children and do not want [child protective services] to get involved if they do not have enough food.”

# How screening is done matters

## Compassion

“I don't mind, because if I feel like somebody is concerned - really concerned - about me? I will answer the question. But if I feel like there's somebody just asking me the question, just to be asking me because that's part of [their] job? I might not answer.”



# Recommendations

- Select care team members with sufficient time and empathy to connect with patients about social needs in non-judgmental ways
- Avoid perceptions of targeting based on race/ethnicity, preferred language, or other marginalization factors
- Explain why you are screening and how the information will be used
- Frame in terms of health implications: e.g. “We are asking about these issues because we know they can impact your health”

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## Explore SIREN's Resources

# Reach out!

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