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Title

Longitudinal impact of social determinants of health on functional capacity among primary care patients

Priority 1 (Research Category)

Social determinants and vulnerable populations

Presenters

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Abstract

Context: Food, housing, and financial insecurities are social determinants of health that negatively affect health. Little is known about the long-term impact of these insecurities on functional capacity.

Objective: To investigate the longitudinal effect of these SDHs on functional capacity.

Study Design: Retrospective cohort study

Setting or Dataset: Longitudinal surveys from 41 primary care clinics across 13 states (September 2017 to February 2021)

Population Studied: 2,426 adult primary care patients with multiple chronic conditions.

Outcome Measures: The primary outcome was metabolic equivalents (METs) calculated from the Duke Activity Status Index (DASI).

Results: The median time between baseline and follow-up surveys was 636 days. Baseline data were collected pre-COVID-19 and follow-up data were collected during COVID-19. The prevalence of one or more insecurities was 27% at baseline and 23% at follow-up. The median functional capacity was 6.1 at both time points. Compared to no SDH, the presence of one or more SDH at baseline but not follow-up (n=266) was associated with a -0.58 reduction in METs (95% CI: -0.84, -0.33). Any SDH at follow-up but not baseline (n=172) was associated with a -0.67 reduction in METs (95% CI: -0.97, -0.36 and any SDH at both baseline and follow-up (n=369) was associated with a -0.90 reduction in METs (95% CI: -1.14, -0.66).

Conclusions: The presence of these insecurities at baseline, follow-up or both was associated with significantly worse functional capacity compared to never having had these insecurities. This suggests primary prevention of insecurities (food, housing, and financial) are essential. Even participants who had insecurities at baseline and resolved it by follow-up still had poorer functional capacity, suggesting the

devastating long-term impacts. Future studies should investigate Primary Care as a resource to screen for and prevent these insecurities.