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**Title**

*Changes in social support services provided by primary care practices in Virginia in the context of COVID-19*

**Priority 1 (Research Category)**

COVID-19

**Presenters**

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**Abstract**

Context: Social determinants of health, which play an essential role in overall patient outcomes, are routinely addressed in primary care settings. Primary care providers coordinate care, offer behavioral and mental health services, and connect patients with community resources. The COVID-19 pandemic may have changed the availability and delivery of social support services in primary care settings.

Objective: To assess how mental health, food security, transportation support, and housing support services have changed in Virginia primary care settings between 2018-2021.

Study Design and Analysis: Pre-post study. Proportion tests were used to assess outcomes over time for respondents to the 2019 and/or 2021 surveys. Outcomes were stratified by location and ownership. McNemar tests were used to compare outcomes on matched respondents who participated in both surveys.

Population Studied: All primary care practices in Virginia, including FM, general IM, OB/GYN, pediatrics.

Dataset: Two waves of surveys were mailed (1: 10/2018-3/2019; 2: 7/2021-4/2022). This study included practices who responded to the 2019 and/or the 2021 survey. Surveys consisted of questions about practice characteristics, patient population, ownership, location and social support services provided.

Outcome Measures: Mental health, food security, housing support, and transportation support services provided by primary care practices were categorized as binary variables (yes/no).

Results: 441 practices responded to the first wave, 502 responded to the second wave, and 191 responded to both. Matched respondents showed significantly ( $p < 0.0001$ ) decreased delivery of mental health (56.7% to 23.4%), food (52.% to 18%), transportation (60% to 11%), and housing services (55% to 13%) between waves. Upon stratification, clinician-owned practices experienced a greater decrease in mental health (52 to 25,  $p < 0.001$ ), food (39% to 18%,  $p < 0.001$ ), transportation (39% to 6%,  $p < 0.001$ ) and housing (46% to 10%,  $p < 0.001$ ) services compared to hospital/health system and other practices. Rural and suburban practices also showed significant decline in all outcomes whereas urban practices showed no significant decrease.

Conclusions: In the wake of COVID-19, we found a decrease in delivery of social support services in primary care practices. As the crux of patient care, primary care needs infrastructural and financial investments in order to adequately address social needs and deliver quality care.