Social Determinants and Policy:
Why Shifting the Care Paradigm is Good for Population Health and Health Care

Lauren A. Taylor, MDiv, MPH
@LaurenTaylorMPH, ltaylor@hbs.edu

Health Expenditures as a % of GDP, 2009*

*Turkey is missing data for 2009
Total Expenditures as a % GDP, 2009*

Ratio of Social to Health Expenditures, 2009*

*Switzerland and Turkey are missing data for 2009
METHOD: Multivariable regression using OECD pooled data from 1995-2007 on 29 countries and 5 health outcomes.

FINDING: The ratio of social to health spending was significantly associated with better health outcomes: less infant mortality, less premature death, longer life expectancy and fewer low birth weight babies.

NOTE: This remained true even when the US was excluded from the analysis.
METHOD: Multivariable regression using state-level repeated measures data from 2000-2009 with regional and time fixed effects.

FINDING: The lagged ratio of social to health spending was significantly associated with better health outcomes: adults who were obese; had asthma; reported fourteen or more mentally unhealthy days or fourteen or more days of activity limitations in the past thirty days; and had lower mortality rates for lung cancer, acute myocardial infarction, and type 2 diabetes.

Which social services produce better health and save dollars?
Evidence Exists for Various Integration Models

Traditional Health Care Sector

- Community Benefit Grants
- Programmatic Partnership
- Offering Individual Social Services
- Strategic Investments
- Pooled Health and Social Services Budgets

Historical & Current Fee-For-Service

Value-Based Payment & Population Health Management

Is this all "good for health care"?
Is it all worth it?

“It really was a coordinated intervention. And that was satisfying. I think it was an experience where I really got to be a physician. I think a lot of times here we are sort of playing social worker, playing psychiatrist when we’re not necessarily trained to do that. We do medical care, you know? And so it was very refreshing. The patient needed an internist and she got an internist.”

- Physician Interviewee

The American Health Care Paradox

Looking forward to learning from you. Questions?

ltaylor@hbs.edu
@LaurenTaylorMPH