

Social determinants of health (including poverty) and their impact on self-management support module

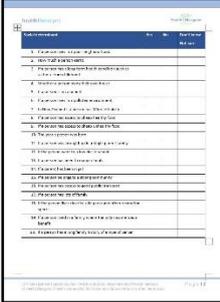
Learning objectives for this training workshop

By the end of this session participants will be able to:

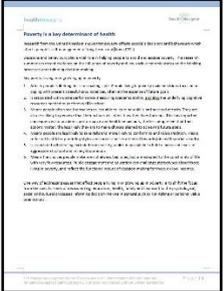
- identify social determinants of health
- provide examples of how one social determinant of health, poverty, can affect people with long-term conditions (LTCs)
- describe different strategies participants can use with people living in poverty
- recognise that people with LTCs living in poverty can also be provided with SMS that is relevant to their circumstances.

Trainer's Notes

1. Please read this document and Handout and decide whether this module relates to people with LTCs in your practice. This module should be delivered after most of the other modules (especially the What is SMS and More SMS strategies modules) as a number of the activities in this module draw on SMS strategies that participants will have gone over in the previous modules.
2. Think of some examples from your practice where providing self-management support (SMS) for people with LTCs living in poverty has been difficult. Have these examples
3. Please print off enough copies of the Handout for the number of participants in the session.
4. Have a whiteboard or flipcharts available and at least one post-it note per participant available for the Improvement Activity at the end of the session. Depending on how the session has gone you can decide whether to not do the Improvement Activity and end the session after the Quiz.

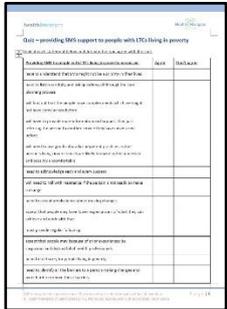
Purpose and time	Activity											
	<p>Welcome everyone to the session.</p> <p>Explain that this session is going to go over the social determinants of health with a focus on poverty and then discuss its impact on providing SMS to people with LTCs living in poverty. People living in poverty are likely to have more complex needs as well as fewer resources for self-management.</p>											
<p>Activating prior knowledge (15 mins)</p>	<p>Social determinants of health</p> <p>Ask participants if they have heard of the term ‘Social determinants of health’. If yes get some examples. If not, explain that social determinants are social, cultural and economic factors that affect people’s health and their health outcomes, for example, quality of housing.</p> <p>Give all participants a copy of the Handout. Give them 5 minutes to read through page 1.</p> <p>When they have finished give participants another 5 minutes to go through the list on page 2.</p> <p>Once they have finished the list go through their responses with them. (see below). Participants may have other responses that they can explain. If necessary remind participants that they might know individuals who have overcome these determinants and now have higher socio-economic status and therefore better health and other outcomes.</p> <table border="1" data-bbox="384 1290 1102 1951"> <thead> <tr> <th>Social determinant</th> <th>Comment</th> </tr> </thead> <tbody> <tr> <td>1. If a person lives in a poor neighbourhood</td> <td>Yes – predicts access to fewer resources and lower socio-economic status</td> </tr> <tr> <td>2. How much a person earns</td> <td>Yes – predicts socio-economic status</td> </tr> <tr> <td>3. If a person has a long-term health condition such as asthma from childhood</td> <td>Yes – could affect education, employment</td> </tr> <tr> <td>4. Whether a person owns their own house</td> <td>Yes –predicts better socio-economic status</td> </tr> </tbody> </table>	Social determinant	Comment	1. If a person lives in a poor neighbourhood	Yes – predicts access to fewer resources and lower socio-economic status	2. How much a person earns	Yes – predicts socio-economic status	3. If a person has a long-term health condition such as asthma from childhood	Yes – could affect education, employment	4. Whether a person owns their own house	Yes –predicts better socio-economic status	<p>Page 1 & 2 of handout</p>  
Social determinant	Comment											
1. If a person lives in a poor neighbourhood	Yes – predicts access to fewer resources and lower socio-economic status											
2. How much a person earns	Yes – predicts socio-economic status											
3. If a person has a long-term health condition such as asthma from childhood	Yes – could affect education, employment											
4. Whether a person owns their own house	Yes –predicts better socio-economic status											

Purpose and time	Activity		
	5. If a person is on a benefit	Yes – predicts lower socio-economic status	
	6. If a person lives in a polluted environment	Yes – direct impact on health, access to outside spaces and activity	
	7. In New Zealand if a person has Māori ethnicity	Yes in NZ – there is specific research on this	
	8. If a person has access to cheap healthy food	Yes – predicts better health	
	9. If a person has access to cheap unhealthy food	Yes – predicts poorer health	
	10. The year a person was born	Not specifically	
	11. If a person was brought up in a single parent family	Not specifically but can predict low socio-economic status	
	12. If the person went to a low decile school	Yes – can impact on education, income and socio-economic status	
	13. If a person has been to many schools	Yes – can impact on education and social inclusion	
	14. If a parent has been in jail	Not specifically but can impact on income, and family cohesion	
	15. If a person belongs to a strong community	Yes – impacts on social cohesion	
	16. If a person has access to good public transport	Yes – impacts on employment and access to health services	
17. If a person has lots of family	Can be both positive and negative depending on		

Purpose and time	Activity		
		<p>dynamics but generally positive for family inclusion</p>	
	<p>18. If the person lives close to safe parks and other recreation spaces</p>	<p>Yes – impacts on levels of activity</p>	
	<p>19. If a person lived in a family where the only income was a benefit</p>	<p>Yes –predicts low socio-economic status</p>	
	<p>20. If a person' has a long family history of a type of cancer</p>	<p>Yes - impacts on education, employment and life expectancy</p>	
<p>Building new knowledge (20 mins)</p>	<p>Poverty is a key determinant of health</p> <p>Explain to participants that you are going to ask them to read a summary of some UK research into poverty. This research mainly looked at how poverty can affect people’s educational achievements. Explain that this research is also relevant to health because so many of findings are similar. Give participants 5 minutes to read through page 3 of the Handout. Ask them to underline parts of the page which in their experience explain how living in poverty impacts on providing SMS to people with LTCs living in poverty. If necessary, give them one example e.g. key point 1 - decision making means people will struggle to set future goal. At the end ask participants if they have any quick comments or questions before you move onto the next activity.</p> <p>Allocate the participants to one of the four paragraphs on pages 4 and 5 – Thinking processes, Behavioural patterns, Navigating life’s challenges and Navigating the social world. If you have a big group of participants get them to work in pairs. Ask each group to read the paragraphs you have given them. (They can also read the Conclusion on pages 5)</p> <p>Ask each group to identify for their paragraph one or two impacts on the provision of SMS support to people with long term conditions. If necessary give one example e.g. for Thinking processes one impact could be that a person living in poverty could find it hard to set goals.</p> <p>Once everyone has finished, go around and write up examples of impacts on a whiteboard or flipchart. Don’t rub</p>		<p>Page 3, 4, 5 of handout</p>  

Purpose and time	Activity	
	<p>out these impacts – you will refer to them later. If participants don't include the examples below consider adding them to the whiteboard/flipchart.</p> <p>Thinking processes</p> <ul style="list-style-type: none"> • Difficult to set goals • Difficult to set action plans • Difficult to use decision making processes • Difficult to think through barriers and challenges and decide on ways of overcoming. <p>Behavioural patterns</p> <ul style="list-style-type: none"> • Find it hard to achieve goals • Making changes is too hard – needs time and \$\$\$ • Find it hard to be motivated to make a change • More likely to be ambivalent about behaviour change • Making change is too hard – needs time and \$\$\$ • More likely to use sustain talk than change talk <p>Navigating life's challenges</p> <ul style="list-style-type: none"> • Hard for people to focus on future when there are overwhelming problems in the present. • People think that what they do doesn't matter. • People think LTCs are just what happens to them – don't see that making changes will make a difference. • Too stressed to focus on changing behaviours • If people are desperate they may take risks rather than follow care plan <p>Navigating the social world</p> <ul style="list-style-type: none"> • People likely to be aggressive and suspicious of health professionals and the health service. • Care more about looking after children and friends and family rather than themselves • People might find it difficult to engage with another organisation they are referred to especially if they don't know the organisation. 	
<p>Building new knowledge (20 mins)</p>	<p>SMS strategies that would work with people with LTCs living in poverty?</p> <p>Now that participants understand the impact of poverty on people with LTCs, ask them what strategies they would now use in providing SMS to overcome the impacts they have identified? If necessary, give an example: Under Thinking processes if person wants to set goals they are likely to be non-health rather than clinical goals so need to be prepared for that</p> <ul style="list-style-type: none"> • Focus on what is really important at this time to the person. 	

Purpose and time	Activity	
	<p>Give participants 5 minutes to do this and then write the strategies up on the whiteboard/flipchart alongside the impacts they identified earlier. If necessary add these strategies if they haven't been identified by participants. Point out that most of these strategies will work with every stage e.g. Thinking processes, Behavioural patterns, Navigating life's challenges, and Navigating the social world.</p> <ul style="list-style-type: none"> • Keep goals really small and achievable. • Make sure you do what you say you will do. • Ask questions and listen really carefully to what the person is saying to identify any current issues that are important and need to be dealt with. • Keep full notes of a person's reasons for change or to stay the same. Refer to these before each appointment with the person to see if things are changing or staying the same. • Be pleasant and persistent about addressing their needs • Use processes such as action-planning, problem-solving and decision-making, even with small problems. • Make sure the person and their family are connected to all the services they need. • Make it easier for people to access health services. • Make sure the person is getting correct financial entitlements (if on a benefit or entitled to Accident Compensation Corporation or Ministry of Health allowances). • Acknowledge successes no matter how small • Roll with resistance and remember you cannot motivate a person to change • Accept if someone is ambivalent – maybe the time is just not right for them. • Consistently check how important making change is to the person • Spend a lot of time identifying barriers to behaviour change and how these barriers could be addressed • Consistently check how confident a person is about making any changes and don't pressure them to commit to a goal if they are uncertain • Focus on what is realistic for the person and their circumstances. • Be open to the person having very different and unexpected goals that may not have anything to do with health e.g. getting school uniforms. • Provide regular follow up depending on what the person wants and what you said you would do. 	

Purpose and time	Activity	
	<ul style="list-style-type: none"> • Be non-judgmental about seemingly risky behaviours (e.g. smoking, alcohol use) and keep asking what is important to the person and what sort of support the person wants. • Be aware that the person is likely to have high levels of stress and may have mental health needs and identify how these are affecting the person and what assistance the person wants with those needs <p>At the end of this activity, identify what is different from the strategies being talked about here – are they really very different from strategies than what would be used with other people with LTCs who are not living in poverty.</p>	
<p>Evaluation (5 mins)</p>	<p>Quiz</p> <p>Ask participants to complete the quiz on page 6 of the Handout. Once they have completed the quiz quickly go through participants’ responses (see suggested responses below) and discuss any that participants were not sure about or had different responses for.</p>	<p>Page 6 of handout</p> 
<p>Improvement activity (5 mins)</p>	<p>One thing I will do now when working with people living in poverty who have LTCs</p> <p>Ask each participant to write down on a post-it with their name on it, one thing they will change or do more of as a result of this session. Go around and share.</p> <p>Take a photo of all the post-its at the end for your records.</p>	

Quiz – providing SMS support to people with LTCs living in poverty

Providing SMS to people with LTCs living in poverty means we	Answers
have to understand that SMS might not be a priority in their lives	<u>Agree - people are likely to be dealing with a whole lot of other complex problems for their families</u>
have to listen carefully and ask questions all through the care planning process	<u>Agree there might be other more urgent issues</u>
will find out that the people have complex needs which we might not have come across before	<u>Agree this is critical</u>
will have to provide more information and support than just referring the person to another service they have never used before	<u>Agree and people will understand if you need to find out more information and get back to them</u>
will need to use good culturally competent practices as the person’s living circumstances are likely to make us feel uncertain and possibly uncomfortable	<u>Agree they will need a lot of support to access new service</u>
need to acknowledge each and every success	<u>Agree – it can be very challenging to support people who have a lot of needs Agree people may not have experienced success</u>
will need to roll with resistance if the person is not ready to make a change	<u>Agree you can’t force a person to change</u>
need to accept ambivalence about making changes	<u>Agree – it is normal to feel ambivalent about change</u>
accept that people may have lower expectations of what they can achieve and work with that	<u>Agree people’s expectations are determined by their previous experiences</u>
must provide regular follow up	<u>Agree – people may need a lot more support</u>

accept that people may because of prior experiences be suspicious and distrustful of health professionals	<u>Agree – everyone’s experiences determine trust</u>
need to feel sorry for people living in poverty	<u>Disagree – you need empathy</u>
need to identify all the barriers to a person making changes and work hard to remove those barriers	<u>Agree – barriers will prevent any chance of success</u>
need to make sure the person gets their correct Work and Income. ACC and Ministry of Health entitlements	<u>Agree – people need to have access to all entitlements</u>
have to find ways and services fix the person’s problems	<u>Disagree – you can’t fix problems as much as you want to</u>
need to get the person to focus on their own needs rather than everyone else’s needs	<u>Disagree –person’s goal may often be about others and achieving the goal is success</u>
make it okay if the person has not done what they said they would do e.g. action planning	<u>Agree – you need to focus on the barriers and see if they can be addressed – maybe the goal is too big or things have changed</u>
always check how the person and their family have been since you saw them last	<u>Agree – things may change very quickly and having this information helps you understand when you talk about progress with goals and action plans</u>
need to keep good notes of the person’s motivations including how they change, so we can remind the person of what was important to them and what they want to do about it	<u>Agree when people have busy stressful lives they often forget what was important to them and why</u>
accept that people may be taking part in risky behaviours such as smoking or not taking part in screening programmes for reasons that are very valid to them	<u>Agree- there are many reasons including stress that people may take part in risky behaviours or not participate in screening programmes.</u>