

Insights from NC Seniors: Understanding Social Determinants of Health through Focus Group Analysis

Claire Evans, Pavitra Madala, Lauren Bedard, Nehemiah Stewart, Zachary Schrank
 Division of Geriatric Medicine, UNC School of Medicine



THE UNIVERSITY
 of NORTH CAROLINA
 at CHAPEL HILL

Introduction

- Social determinants of health (SDoH) are defined as the conditions in which people are born, grow, live, work, and age, encompassing factors such as socioeconomic status, education, physical environment, employment, and social support networks.¹
- Seniors represent a population particularly susceptible to the effects of SDoH due to their unique life circumstances and vulnerabilities.
- While research has highlighted the importance of addressing SDoH in healthcare delivery, there remains a gap in understanding how these factors are perceived and experienced by seniors themselves, as well as how healthcare providers are addressing them in clinical practice.

By conducting focus group discussions with seniors from diverse socioeconomic backgrounds and geographic locations, we aim to shed light on factors that warrant greater attention in healthcare delivery and policy planning to better support the health and well-being of older adults.

Methods



Recruitment
 At senior centers in chosen counties.



Demographic Survey
 Age, Location of Birth, Education Level, Financial Status, Ratings on Feelings about Healthcare.



Focus Group
 Orange, Caswell, and Chatham County.



NVIVO
 Coding of scribe notes.



Inductive Thematic Analysis
 Supported theme development and eliminated biases.

Results



Domains	Subdomains	Caswell	Chatham	Orange
Education Access and Quality	Education as a vehicle for healthcare engagement	✓	✓	✓
	Travel to appointments	✓		✓
Neighborhood and Built Environment	Housing accommodations for seniors	✓	✓	✓
	Paying for healthcare	✓	✓	✓
Economic Stability	Peace of mind	✓	✓	✓
	Familial support		✓	✓
Social Community and Context	Friends and groups			✓
	Provider burden limiting care	✓	✓	✓
Healthcare Access: State of the Healthcare System	Higher goals of the system	✓		✓
	Insurance control	✓	✓	✓
	Healthcare inefficiency	✓	✓	✓

Discussion

Some factors were commonly noted amongst all counties, suggesting they are generalized concerns in healthcare.

- Financial stability in paying for healthcare and providing peace of mind.
- Overburdened healthcare providers limiting time and quality of care received.
- Insurance control and rising healthcare costs limiting willingness to access healthcare.
- Healthcare inefficiency and concerns with the overall healthcare system.

Other factors were only mentioned by certain counties, potentially due to urban/rural context.

- Poor healthcare resources and education surrounding healthcare navigation were a major concern for the more rural Caswell and Chatham Counties. This may suggest that lack of major healthcare presence in communities can negatively impact health outcomes.
- The need for socialization was only mentioned in Orange and Chatham Counties which may suggest a stronger community support network in a rural county such as Caswell County.

Our study highlights a need for further research for:

- More comprehensive or community tailored SDoH assessments.
- Identification of structural factors underlying these SDoH.
- Confirmation of identified SDoH and related needs in the broader community.

References

¹Thornton RL, Glover CM, Cené CW, Glik DC, Henderson JA, Williams DR. Evaluating Strategies For Reducing Health Disparities By Addressing The Social Determinants Of Health. Health Aff (Millwood). 2016 Aug 1;35(8):1416-23. doi: 10.1377/hlthaff.2015.1357. PMID: 27503966; PMCID: PMC524193.
 Marmot, M. (2005). Social determinants of health inequalities. The Lancet, 365(9464), 1099-1104.
 Adler, N. E., & Stewart, J. (2010). Health disparities across the lifespan: Meaning, methods, and mechanisms. Annals of the New York Academy of Sciences, 1186(1), 5-23.
 Peek, M. E., & Howrey, B. T. (2019). Addressing the unique needs of older adults in health disparity research. American Journal of Public Health, 109(S1), S58-S59.