

Social Determinants of Health: School-Based Screening

This brief shares findings from *Project ESSY*, an IES-funded research grant (R305A220249) with aims to develop and evaluate the ESSY Whole Child Screener, a school-based screening instrument and associated data reporting structures for assessing a range of child and environmental indicators.

What are social determinants of health?

Social determinants of health (SDOH) are the environmental conditions in which people live and grow.¹ SDOH include economic stability, education, social and community context, health and clinical care, neighborhood and physical environment, and food (see picture). Research increasingly highlights strong connections between SDOH and children’s physical, cognitive, behavioral, and emotional health. Many professional organizations (e.g., American Association of Pediatrics) recommend SDOH screening in doctors’ offices to increase connections to supports, such as access to food or transportation. However, because students may only see a doctor occasionally, schools may be an important place for SDOH screening to make sure children do not fall through the cracks. However, in the literature, it is unclear how often schools screen for SDOH.

Social Determinants of Health



Economic Stability

- Employment
- Income, expenses
- Financial support



Education

- Early childhood education
- High school graduation
- Language, literacy



Health and Clinical Care

- Access to primary care
- Provider linguistic and cultural competency
- Quality of care



Social and Community Context

- Discrimination
- Support systems
- Community engagement



Neighborhood and Physical Environment

- Safety, crime, & violence
- Housing quality
- Transportation



Food

- Food insecurity
- Access to healthy options

Note. Categories and examples drawn from Henrickson et al., (2019)²



What did we do?

We searched published literature for examples of SDOH measures used in K-12 or university settings. We were interested in the types of questions on these measures and any outcomes reported from using them. This work was done to inform the initial steps in our process to whole child screener development that engages a [Consequential Validity-Centered Measure Development Framework](#).

What did we learn?

We found six studies describing the development or use of an SDOH measure in an elementary, secondary, or university setting. Each study used a different measure. Measures looked at 3-6 SDOH domains and had an average of 16 items. Education and Neighborhood and Physical Environment were the most commonly assessed domains. Health and Clinical Care was not commonly assessed.

Because SDOH refers to contextual assets and barriers, we were also interested in how items were phrased. More than half of the items asked about barriers in the student's life, about one-fourth asked about assets, and about one-fourth were neutral.

Most studies discussed positive student, family, or school outcomes from using SDOH measures. These included more referrals and connections to services, and changes in school-based offerings (e.g., opening a food pantry, increasing mental health services). Study authors also used screening results to identify unaddressed student need (e.g., family transitions, mobility), and to identify areas for advocacy (e.g., affordable housing, criminal justice reform).

Study authors shared some thoughts about school-based SDOH screening. First, schools need to weigh the pros and cons of using a standardized measure versus customizing measures to match known assets or barriers in their communities. Adding specific items may decrease the chances of families feeling labeled or stereotyped, but could risk overlooking uncommon concerns in the community. Authors also questioned who could best answer SDOH items. Collecting survey responses from family caregivers can be challenging, but children's answers may not be accurate.

How does this relate to Project ESSY?

School-based screening has a strong history of assessing within-child factors, such as a student's academic, social, emotional, or physical development. Despite schools effectively using screeners on within-child factors, they do not yet commonly examine contextual factors (i.e., SDOH) that influence student development. If schools started considering SDOH along with within-child factors, they may be better positioned to connect students with well-matched services. Project ESSY is working to develop a strength-based whole child screening instrument that includes both within-child and contextual factors. The screener is being developed using a [Consequential Validity-Centered Measurement Development Framework](#). Project ESSY aims to increase educators' contextualized understandings of student challenges and improve connections to supports that address the root cause of student challenges.

To learn more, visit the Project ESSY website at <https://expanding-school-screening.education.uconn.edu/>.



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¹ Office of Disease Prevention and Health Promotion. <https://odphp.health.gov/healthypeople/priority-areas/social-determinants-health>

² Henrikson, N. B., Blasi, P. R., Dorsey, C. N., Mettert, K. D., Nguyen, M. B., Walsh-Bailey, C., . . . Lewis, C. C. (2019). Psychometric and Pragmatic Properties of Social Risk Screening Tools: A Systematic Review. *Am J Prev Med*, 57(6 Suppl 1), S13-s24. <https://doi.org/10.1016/j.amepre.2019.07.012>

