



Social Determinants Of Health (SDoH)

August 2025 US.PSY.D.25.00023

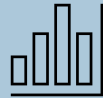
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Objectives



Define and highlight the relationship between health equity, SDoH, and population health



Analyze how SDoH impacts the economics of the population



Provide an example of how mental health, specifically trauma, is connected to SDoH



Examine how payers utilize SDoH data to influence decisions and program investments



Assess how SDoH can impact value-based payment methods

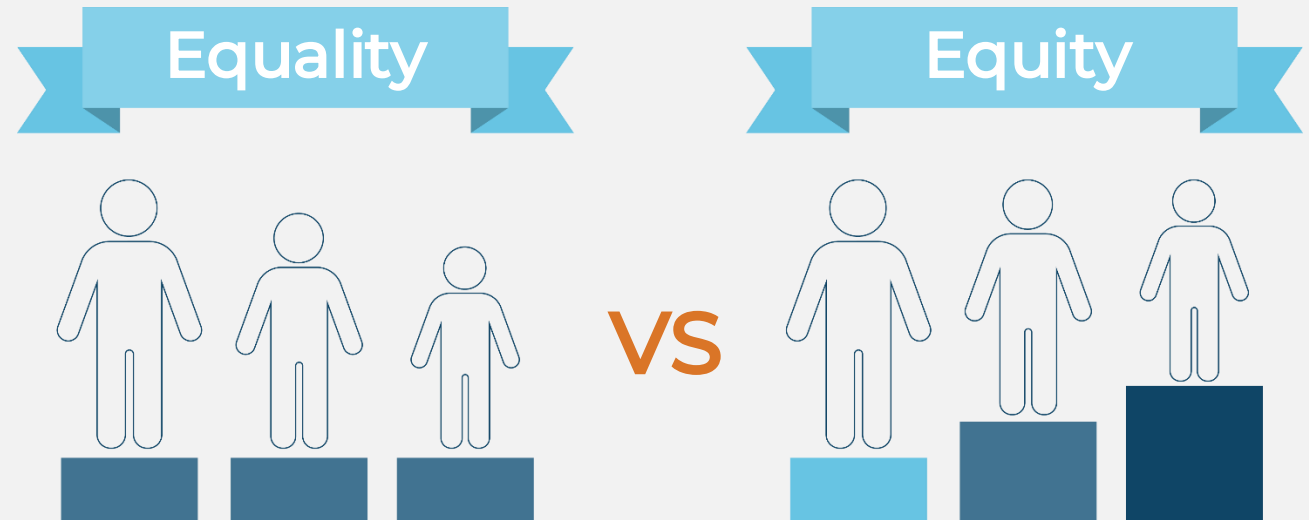
SDoH, social determinants of health.

Health Equity

Health equity is achieved when everyone is valued **equally** “with a focus and ongoing societal efforts to **address avoidable** inequalities and injustices, and the **elimination** of health and health care disparities”¹

Health inequities are reflected in differences including²:

- length of life
- quality of life
- rates of disease, disability, and death
- severity of disease
- access to treatment



References:

1. About health equity. CDC. Published February 5, 2024. Accessed June 20, 2025. <https://www.cdc.gov/health-disparities-hiv-std-tb-hepatitis/about/index.html>.
2. Health equity for people with disabilities. CDC. Published April 3, 2025. Accessed June 20, 2025. <https://www.cdc.gov/disability-inclusion/strategies/health-equity.html>.

SDoH

What Are They And Why Are They Important?

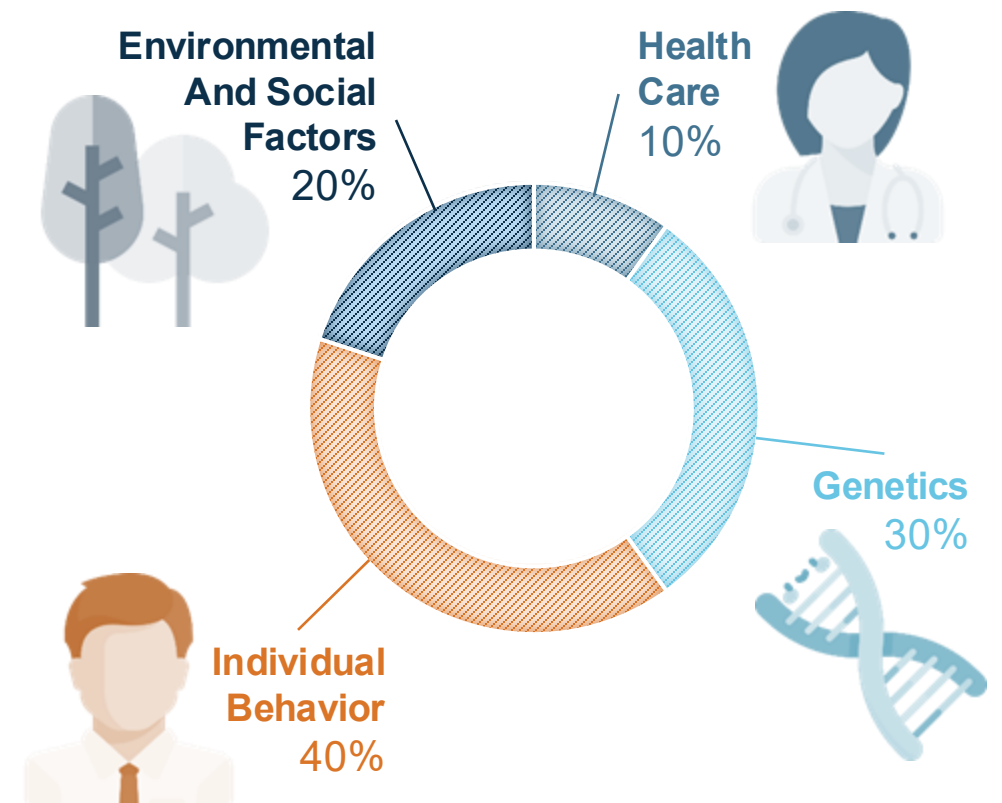
SDoH are conditions in the environment where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks¹

SDoH, social determinants of health.

References:

1. Social determinants of health. ODPHP. Accessed June 20, 2025. <https://odphp.health.gov/healthypeople/priority-areas/social-determinants-health>.
2. Artiga S, Hinton E. Beyond health care: the role of social determinants in promoting health and health equality. KFF. Published May 10, 2018. Accessed June 20, 2025. <https://www.kff.org/disparities-policy/issue-brief/beyond-health-care-the-role-of-social-determinants-in-promoting-health-and-health-equity>.
3. Schroeder SA. *N Engl J Med*. 2007;357(12):1221-1228.

Impacts Of Different Factors On Risk Of Premature Death^{2,3}



SDoH

Domains And Examples¹



Economic Stability

- Employment
- Food insecurity
- Housing instability
- Poverty



Education Access And Quality

- Early childhood development and education
- Enrollment in higher education
- High school graduation
- Language and literacy



Health Care Access And Quality

- Access to health services
- Access to primary care
- Health literacy



Neighborhood And Built Environment

- Access to foods that support healthy dietary patterns
- Crime and violence
- Environmental conditions
- Quality of housing



Social And Community Context

- Civic participation
- Incarceration
- Social cohesion

SDoH, social determinants of health.

Reference:

1. Social determinants of health literature summaries. ODPHP. Accessed June 24, 2025. <https://odphp.health.gov/healthypeople/priority-areas/social-determinants-health/literature-summaries#economic>.

Objective Examples*,1-5



Economic Stability

- Reduce the proportion of people living in poverty
- Increase employment in working-age people
- Increase the proportion of children living with at least 1 parent who works full time



Education Access And Quality

- Increase the proportion of high school students who graduate in 4 years
- Increase the proportion of children who are developmentally ready for school
- Increase the proportion of students with disabilities who are usually in regular education programs



Health Care Access And Quality

- Reduce the proportion of emergency department visits with a longer wait time than recommended
- Increase the proportion of adults who get recommended evidence-based preventive health care
- Reduce the proportion of people who can't get prescription medicines when they need them



Neighborhood And Built Environment

- Increase the proportion of schools with policies and practices that promote health and safety
- Increase the proportion of adults with broadband internet
- Reduce the rate of minors and young adults committing violent crimes



Social And Community Context

- Reduce anxiety and depression in family caregivers of people with disabilities
- Reduce the proportion of children with a parent or guardian who has served time in jail or prison
- Increase the proportion of adolescents who have an adult they can talk to about serious problems

*This is not an exhaustive list of SDoH objectives.
SDoH, social determinants of health.

References:

1. Economic stability. ODPHP. Accessed June 26, 2025. <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/economic-stability>.
2. Education access and quality. ODPHP. Accessed June 26, 2025. <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/education-access-and-quality>.
3. Health care access and quality. ODPHP. Accessed June 26, 2025. <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/health-care-access-and-quality>.
4. Neighborhood and built environment. ODPHP. Accessed June 26, 2025. <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/neighborhood-and-built-environment..>
5. Social and community context. ODPHP. Accessed June 26, 2025. <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/social-and-community-context>.

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Factors Influencing SDoH¹



SDoH, social determinants of health.

Reference:

1. The alliance for the determinants of health. Alliance For The Determinants Of Health. Accessed June 23, 2025. <https://www.utah.gov/pmn/files/510933.pdf>.

Image taken from The Alliance for the Determinants of Health

SDoH: Food Stability



\$1,834 more
is spent annually on health care costs for food-insecure adults
compared to those who are food secure.¹



Food insecurity added
about 11%
to the health care costs of older adults.²

2025
Food Price
Outlook³



Overall food prices are predicted to
increase by 2.9%
(prediction interval: 2.0% to 3.9%) as they are expected
to rise at the historical average rate of growth

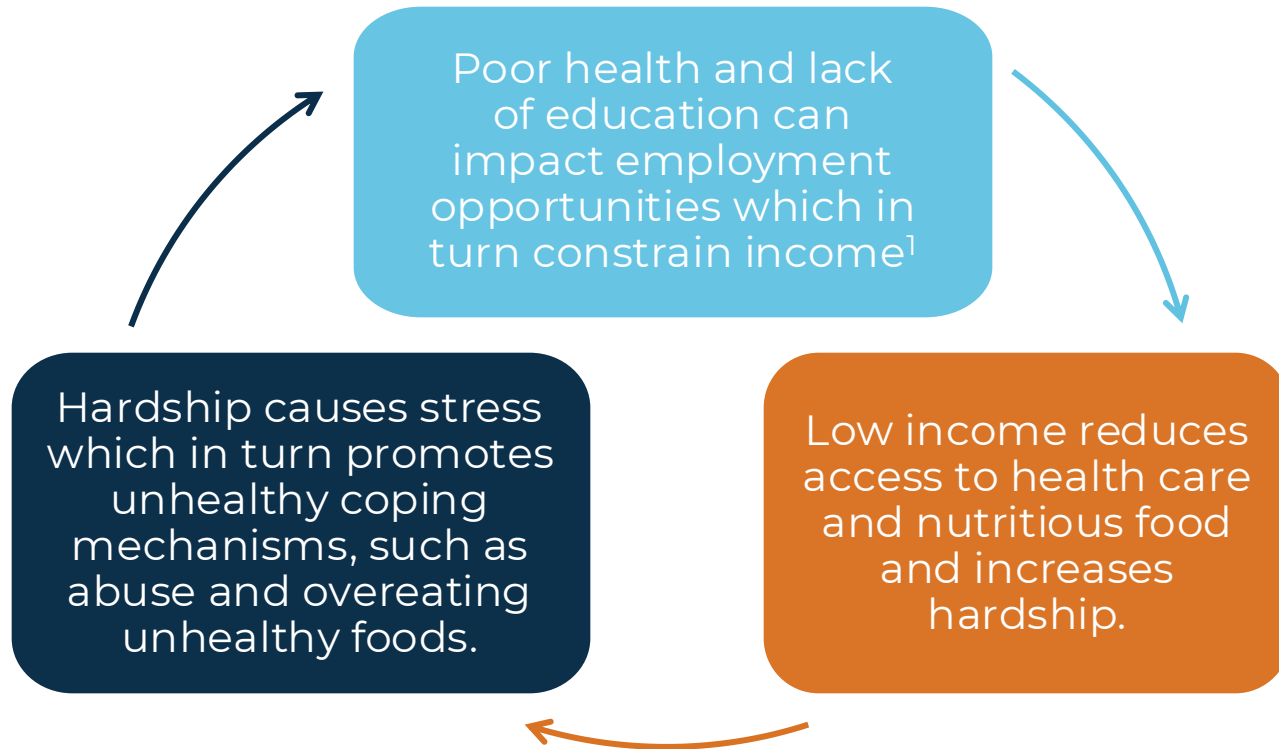
SDoH, social determinants of health.

References:

1. Berkowitz SA, et al. State-level and county-level estimates of health care costs associated with food insecurity. CDC. Published July 11, 2019. Accessed June 26, 2025. https://www.cdc.gov/pcd/issues/2019/18_0549.htm.
2. Garcia SP, et al. Incremental health care costs associated with food insecurity and chronic conditions among older adults. CDC. Published August 30, 2018. Accessed June 26, 2025. https://www.cdc.gov/pcd/issues/2018/18_0058.htm.
3. Food price outlook – summary findings. USDA. Updated June 25, 2025. Accessed June 26, 2025. <https://www.ers.usda.gov/data-products/food-price-outlook/summary-findings>.

Understanding The Cycle Of SDoH Including Food Access Barriers

Break The Loop Of SDoH¹

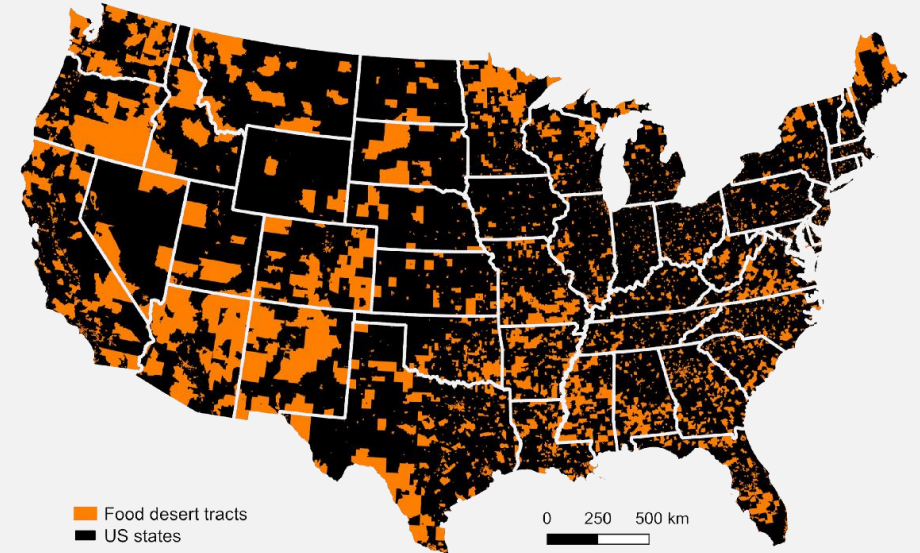


SDoH, social determinants of health.

References:

1. Social determinants of health (SDoH). NEJM Catalyst. Published December 1, 2017. Accessed June 22, 2025. <https://catalyst.nejm.org/doi/full/10.1056/CAT.17.0312>.
2. Haider Z, et al. *Socio-Economic Planning Sciences*. 2022;82:101301.

Food Deserts In The United States²



A food desert is a term used to describe neighborhoods and communities where there is limited access to affordable and nutritious foods due to income and access issues

Image credit: Haider Z, et al. *Socio-Economic Planning Sciences*. 2022;82:101301. Used under fair use for educational purposes.

What Is Population Health?

Population Health¹

“The health outcomes of a group of individuals, including the distribution of such outcomes within the group. These groups are often geographic populations such as nations or communities, but can also be other groups such as employees, ethnic groups, disabled persons, prisoners, or any other defined group.”

- David Kindig

Population Health Management²

- A model of care that addresses individuals' health needs at all points along the continuum of care, including in the community setting, through participation, engagement and targeted interventions for a defined population
- Aims to maintain or improve the physical and psychosocial well-being of individuals and to address health disparities through cost-effective and tailored health solutions

References:

1. Kindig D, Stoddart G. *Am J Public Health*. 2003;93(3):380-383.
2. Population health management resource guide. NCQA. Published 2018. Accessed June 22, 2025. https://www.ncqa.org/wp-content/uploads/2018/08/20180827_PHM_PHM_Resource_Guide.pdf.

The Link Between Population Health And SDoH¹



Health care leaders are increasingly aware of data and research indicating that **the social determinants of health have a higher impact on population health than health care** and that a higher ratio of social service spending versus health care spending results in improved population health

According to a study published by the National Center For Biotechnology Information, states that allocate more resources to social services than to medical expenditures have substantially improved health outcomes over states that do not

States that provide higher levels of social services are outperforming their counterparts in areas such as:

- Obesity
- Asthma
- Mental health
- Cancer
- Myocardial infarction
- Type 2 diabetes

SDoH, social determinants of health.

Reference:

1. Social determinants of health. NEJM Catalyst. Published December 1, 2017. Accessed July 8, 2025. <https://catalyst.nejm.org/doi/full/10.1056/CAT.17.0312>.

EXAMPLES

Increased Welfare Generosity* Linked To Significant Mortality Declines¹

Fixed Effects Panel Regression Models Predicting Adult Death Rate As A Function Of Welfare Generosity* 1977-2017

	First Difference Female Death Rate Age 55 [†]	First Difference Male Death Rate Age 55 [†]
Lagged Welfare Generosity* (\$1,000s)	-23.31 [‡] (10.83) beta=-0.1670	-41.08 [‡] (17.01) beta=-0.2032
State & Year Fixed Effects	Yes	Yes
State Controls	Yes	Yes
Lagged Mortality	Yes	Yes
N	2,000	2,000

All models include lagged and first-difference values of the independent variables. Robust standard errors in parentheses. Beta coefficients are standardized to standard deviation increase. Models include state and year fixed effects and one-year lagged mortality. Models adjust for state characteristics: percent non-Hispanic white, percent married, poverty rate, median age, unemployment rate, population rate, and median wage income.

An **increase** in welfare generosity* is associated with **large declines** in the death rate for both men and women ($P<0.05$ for both)

*Welfare generosity is measured as total per-capita expenditures on programs that provide cash assistance, health insurance and care, or in-kind benefits to the poor.

[†] $P<0.10$

[‡] $P<0.05$

Reference:

1. Fenelon A, Witko C. *Health Place*. 2021;71:102644.

The Global Health Equity Challenge¹



Closing the equity gap between the poorest and wealthiest in low- and middle-income countries could

save 1.8 million childrens' lives annually



3.8 billion people worldwide

lack adequate social protections, like child or paid sick leave benefits, directly impacting their health



High debt burdens are crippling governments' abilities to invest in these services, with the 75 poorest countries seeing a

4x increase in interest payments over the past decade

Reference:

1. Health inequities are shortening lives by decades. WHO. Published May 6, 2025. Accessed June 26, 2025. <https://www.who.int/news/item/06-05-2025-health-inequities-are-shortening-lives-by-decades>.

QUESTION

How do SDoH influence health care costs?

SDoH, social determinants of health.

ANSWER

SDoH **significantly** influence health care costs across Medicare, Medicaid, and private insurance programs¹

- Level of educational and social isolation affect **Medicaid expenditures**, with higher costs linked to lower education and increased isolation
- Neighborhood quality and economic stability are key factors in **Medicare spending**, impacting costs based on access to parks and financial confidence
- Medical discrimination and debt collection contact are associated with increased **private insurance expenditures**

SDoH, social determinants of health.

Reference:

1. Grossi G. Social determinants of health linked to higher health care costs, payer expenditures. AJMC. Published October 23, 2024. Accessed July 8, 2025. <https://www.ajmc.com/view/social-determinants-of-health-linked-to-higher-health-care-costs-payer-expenditures>.

Understanding Health Spending And Its Drivers

Association Of SDoH With Health Care Expenditures¹

SDoH domains	SDoH exposure variables	Medicaid	Medicare	Private
1) Education	Educational attainment	●	▲	▲
2) Health care access and quality	Access to medical care	●	●	●
	Medical discrimination	●	●	●
3) Neighborhood and built environment	Housing affordability	▲	▲	●
	Access to healthy foods	●	●	●
	Availability of parks	●	●	●
4) Economic stability	Contacted by collections	●	●	●
	Cover unexpected expenses	●	●	●
5) Social and community context	Feeling socially isolated	●	●	●
	Attending club meetings	●	▲	●

Significant

Not significant

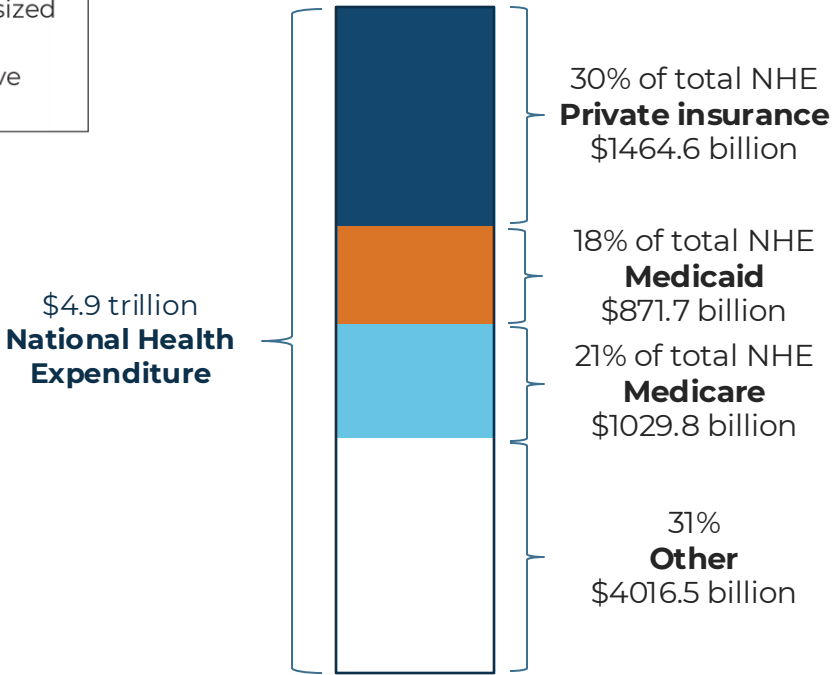
●

Hypothesized direction

▲

Alternative direction

2023 National Health Expenditure (NHE) Breakdown²

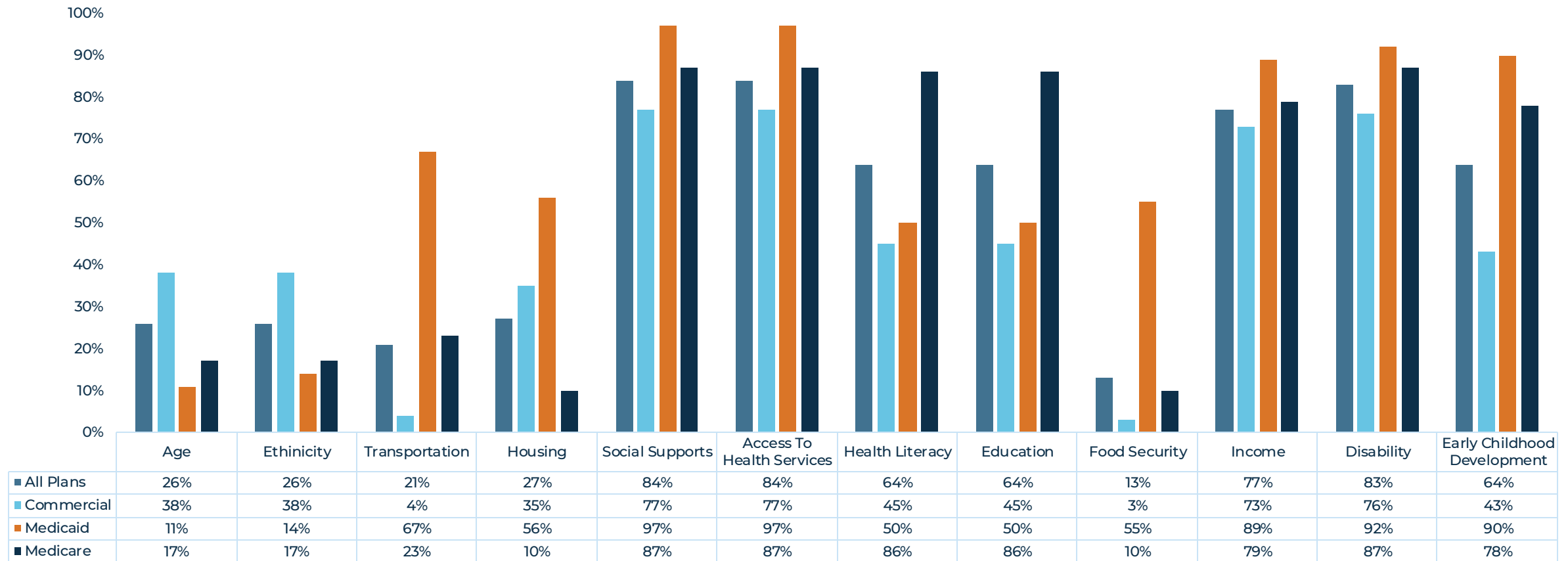


^{*}The "other" category consists of out-of-pocket spending, other third-party payers and programs and public health activity, hospital expenditures, physician and clinical services expenditures, and prescription drug spending. SDoH, social determinants of health.

References:

- Mohan G, Gaskin DJ. *JAMA Netw Open*. 2024;7(10):e2440467.
- NHE fact sheet. CMS. Updated December 18, 2024. Accessed June 27, 2025. <https://www.cms.gov/data-research/statistics-trends-and-reports/national-health-expenditure-data/nhe-fact-sheet>.

Utilization Of SDoH Strategies, By US Payer System¹



SDoH, social determinants of health.

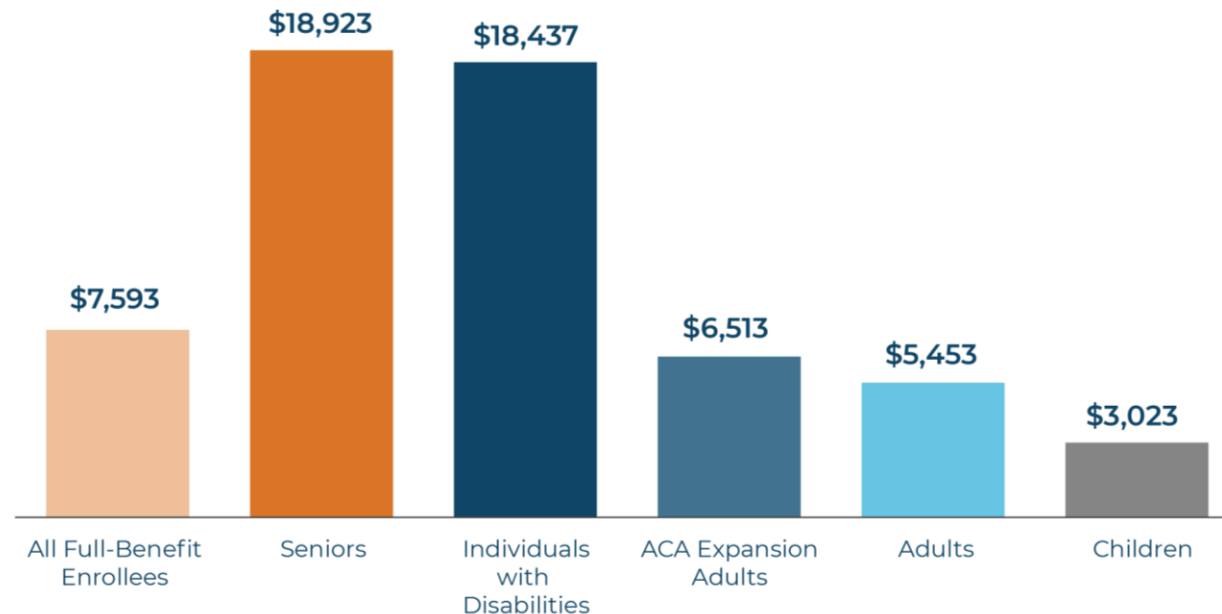
Reference:

1. 2019 Trends in behavioral health: A reference guide on the U.S. Behavioral health financing & delivery system, 2nd Edition. Rockville, MD: Otsuka America Pharmaceutical, Inc.

Enrollment And Spending In Seniors And Individuals With Disabilities¹

Overall, children account for **37% of full-benefit enrollment but 15% of the spending**, while seniors and individuals with disabilities account for **21% of enrollment but 52% of the spending**

Spending Per Full-Benefit Enrollee By Eligibility Group (2021)



Why is the spending for seniors and individuals with disabilities much higher than the other groups?

These groups of people tend to have higher rates of chronic conditions, more complex health care needs, and are more likely to utilize long-term services and supports than other enrollees

ACA, Affordable Care Act.

Reference:

1. Euhus R, Chidambaram P. A look at variation in Medicaid spending per enrollee by group and across states. Published August 16, 2024. Accessed June 30, 2025. <https://www.kff.org/medicaid/issue-brief/a-look-at-variation-in-medicaid-spending-per-enrollee-by-group-and-across-states>.

QUESTION

What mental health outcomes do you associate with SDoH?

SDoH, social determinants of health.

ANSWER

Trauma is a mental health outcome that is associated with SDoH.

It is defined as the exposure of an individual to a harmful or threatening event(s) or circumstance(s) that has ongoing negative effects on well-being (particularly, psychological well-being) and/or ability to function¹

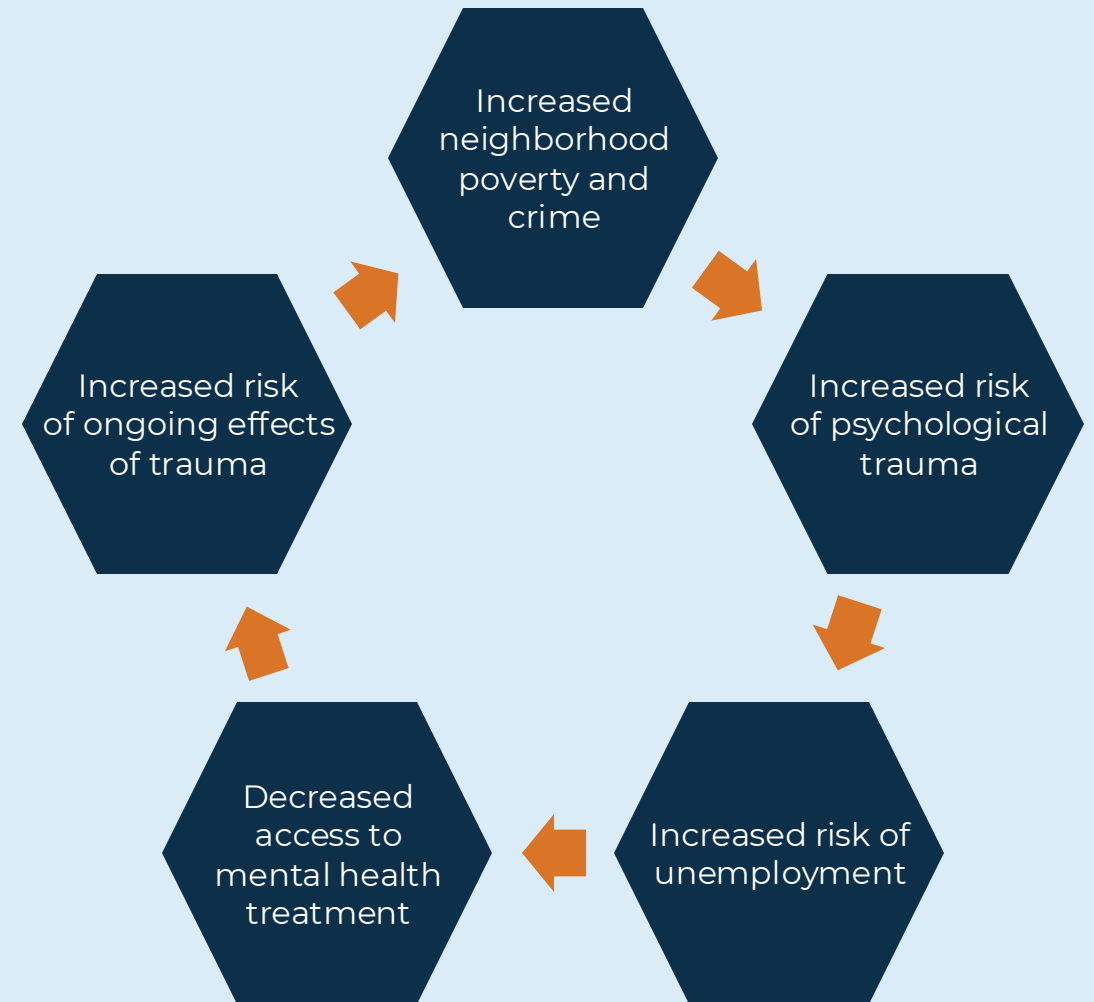
Reference:

1. Chisholm-Burns, MA. Addressing social determinants of health through trauma-informed care. [Presentation]. Presentation given at the 2025 AAPP Conference. Salt Lake City, Utah.

Relationship Between SDoH And Trauma

Trauma is the exposure of an individual to a harmful or threatening event(s) or circumstance(s) that has ongoing negative effects on well-being (particularly, psychological well-being) and/or ability to function¹

SDoH and trauma have a **cyclical relationship**



SDoH, social determinants of health.

Reference:

1. Chisholm-Burns, MA. Addressing social determinants of health through trauma-informed care. [Presentation]. Presentation given at the 2025 AAPP Conference. Salt Lake City, Utah.

Trauma-Informed Care (TIC)¹

A strengths-based framework based on the 4 Rs that can facilitate a culture of empowerment, healing, and trust between patient and provider

Realize

how trauma impacts individuals and their families and communities

Recognize

signs and symptoms of trauma

Respond

by “fully integrating knowledge about trauma into policies, procedures, and practices”

Resist

re-traumatization (ie, causing others to re-experience prior trauma)

Reference:

1. Chisholm-Burns, MA. Addressing social determinants of health through trauma-informed care. [Presentation]. Presentation given at the 2025 AAPP Conference. Salt Lake City, Utah.

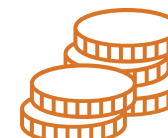
Focusing On Mental Health Inequity Costs In The US¹



The United States currently spends an estimated
\$477.5 billion
annually in avoidable and unnecessary expenses
related to mental health inequities



Under the current conditions, the United States is estimated to spend
\$1.260 trillion
per year by 2040 on costs related to mental health inequities



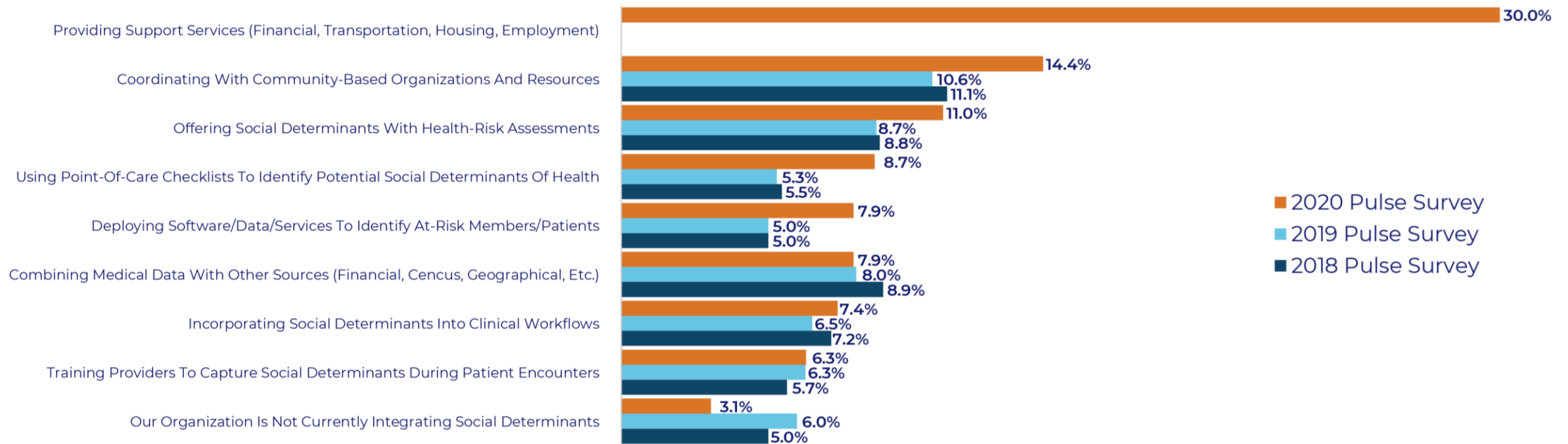
Between today and 2040,
the projected cumulative cost attributable to inequities in mental health care is estimated to amount to
\$14 trillion

US, United States.

Reference:

1. Projected cost and economic impact of mental health inequities in the united states. Meharry School of Global Health. Accessed July 1, 2025. <https://meharryglobal.org/research-scholarship/projected-cost-and-economic-impact-of-mental-health-inequities>.

What SDoH Does Your Organization Capture At The Member Or Patient Level?¹

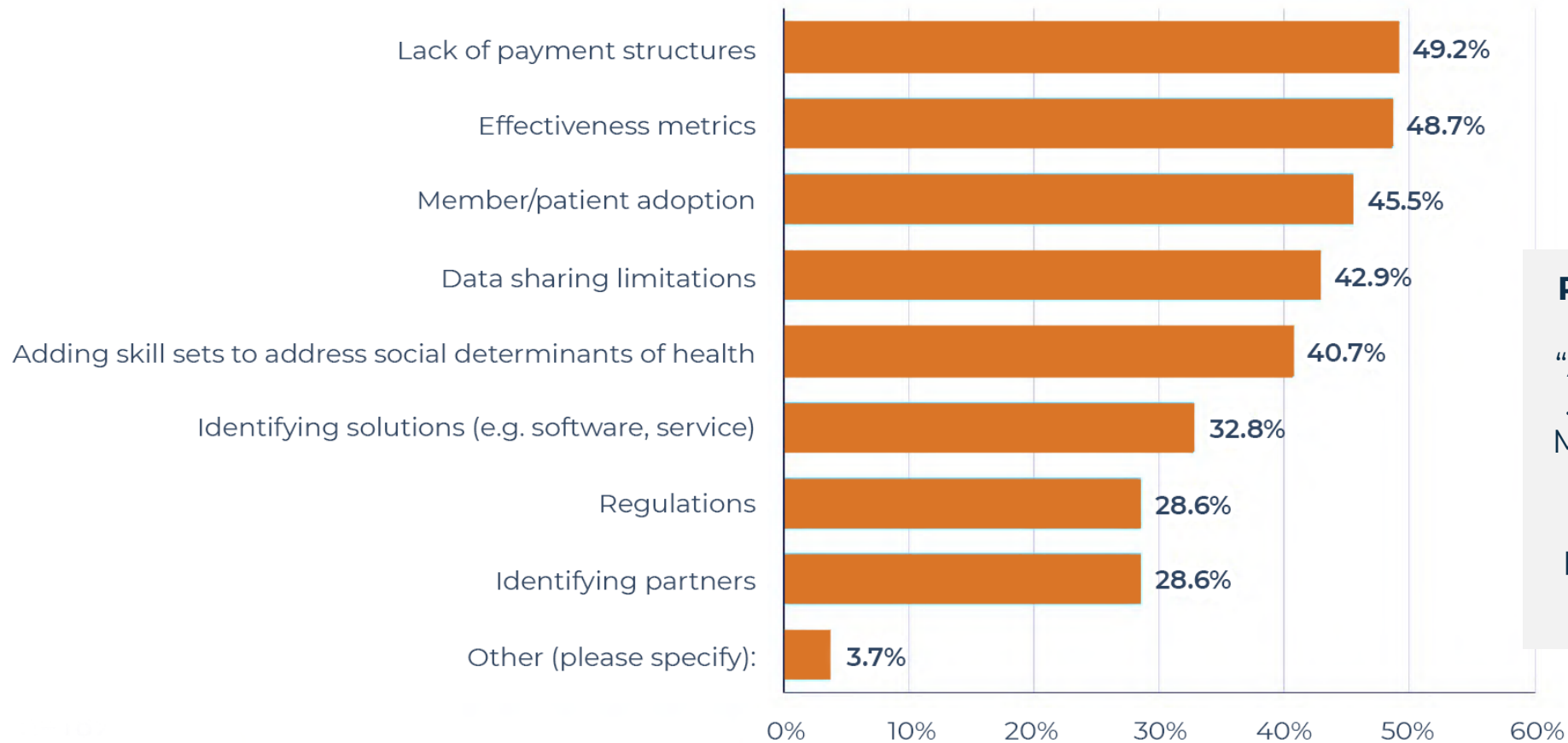


SDoH, social determinants of health.

Reference:

1. The 2020 industry pulse report. Change Health care. Published February 2020. Accessed June 22, 2025. <https://hceg.org/wp-content/uploads/10th-Annual-Industry-Pulse-Report-2020.pdf>.

Which Of The Following Barriers Do You Anticipate Facing As You Look To Integrate And/Or Support Non-Medical Solutions In Your Population And Clinical Care Programs?¹



Pulse Survey Respondent (Hospital Executive):

“As more of our consumers ... are moving to Managed Medicaid, we have to figure out how to treat that population with reduced payments but still provide the quality care.”

Reference:

1. The 9th annual industry pulse survey. Change Healthcare. Published 2019. Accessed June 22, 2025. https://hceg.org/wp-content/uploads/Change_Healthcare_Industry_Pulse_2019_Digital.pdf.

Health Plans Are Investing In SDoH

Health plans are committing resources to improve health by addressing SDoH through:



Investments in affordable housing initiatives¹



Enhanced health and social programming to support vulnerable populations¹



Pioneering innovations in care quality and payment models²



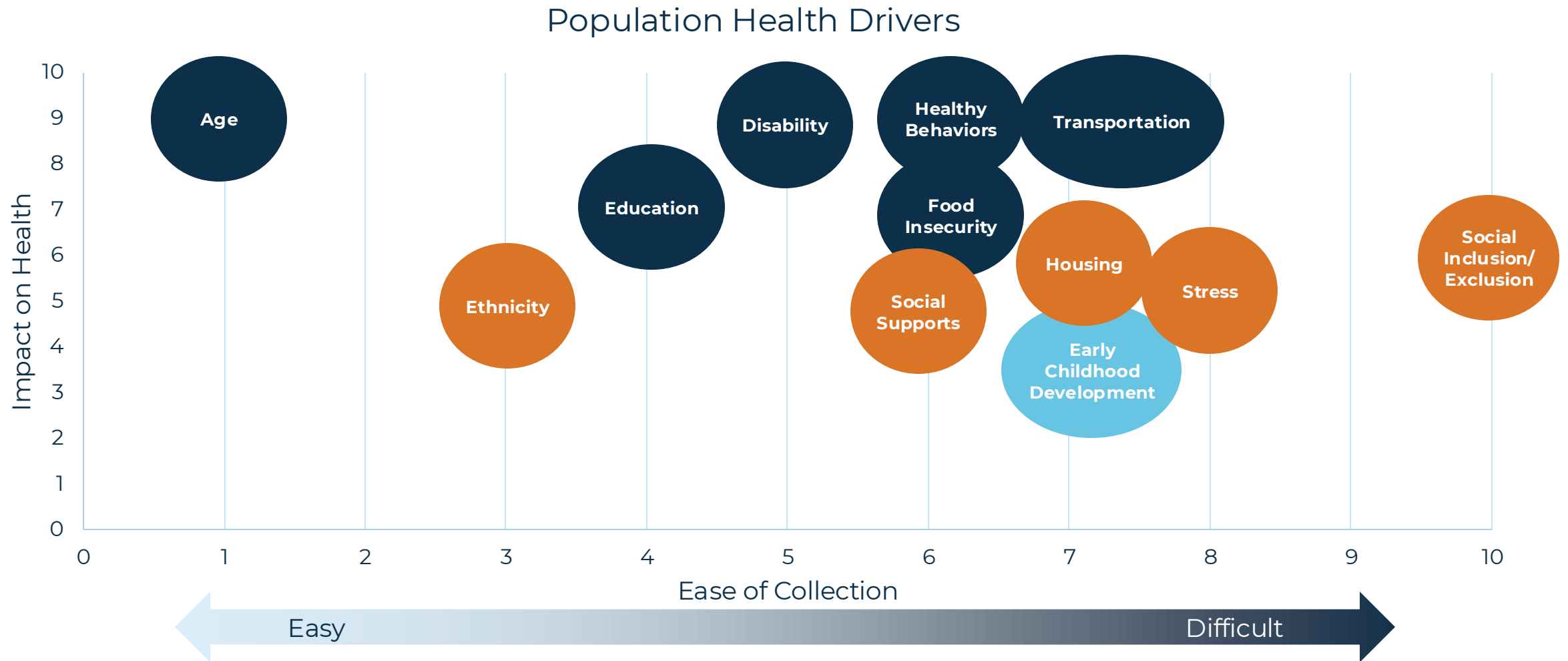
Creating or contributing to funds to help tackle housing instability and homelessness³

SDoH, social determinants of health.

References:

1. Investing in housing & health. UnitedHealthcare. Published May 2024. Accessed June 30, 2025. <https://sahfnet.org/sites/default/files/documents/UHG-SAHF-Thought-leadership-health-and-housing-FINAL.pdf>.
2. NQF leads national call to address SDOH – story. NQF. Accessed June 26, 2025. https://www.qualityforum.org/Story/NQF_Leads_National_Call_to_Address_SDOH_-_story.aspx.
3. Housing for health. Kaiser Permanente. Accessed June 26, 2025. <https://about.kaiserpermanente.org/expertise-and-impact/healthy-communities/improving-community-conditions/housing-security>.

Return On Investment In Collecting SDoH¹



SDoH, social determinants of health.

Reference:

1. Adler, D. Succeeding in a managed care & value-based world: Who's afraid of the big bad wolf?. [Presentation]. Presentation given at the meeting of Tennessee Community Organizations. Nashville, TN.

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The Intersection Of Value-Based Programs And SDoH

Value-Based Programs: tie reimbursement to quality measures¹

- Facilitates the achievement of the triple aim—better care for individuals, better health for populations, and lower costs
- Supports the move towards paying providers based on quality, rather than quantity of care they give patients
- Rewards providers with incentive payments for quality of care



Value-Based Programs

SDoH

SDoH: conditions in which people are born, grow, live, work, and age, and people's access to power, money, and resources²

- Provide important detail that can guide interventions to achieve value-based program goals³
- Increase understanding of population needs³
- Move value-based program beyond easy-to-access measures that hold greater meaning³

Question To Payers:

How are you collecting SDoH and leveraging to support alternative payment arrangements?

SDoH, social determinants of health.

References:

1. Value-based programs. CMS. Updated September 25, 2024. Accessed July 1, 2025. <https://www.cms.gov/medicare/quality/value-based-programs>.
2. Social determinants of health. WHO. Accessed July 8, 2025. https://www.who.int/health-topics/social-determinants-of-health#tab=tab_1.
3. Value-based payment models: a catalyst for addressing the non-medical factors that influence health. HCTTF. Accessed July 8, 2025. <https://hcttf.org/wp-content/uploads/2018/01/HCTTF-SDOH-Short-Template.pdf>.

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Summary



SDoH are conditions in the environment where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks



These conditions impact the economics of the population—for instance, increased welfare generosity linked to significant mortality declines



A cyclical relationship exists between these conditions and trauma



Health plans and other entities use these conditions to invest in specific funds or resources to help populations



These conditions can provide important data that can guide interventions to achieve value-based program goals

SDoH, social determinants of health.

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Appendix

Economic Stability Objectives¹

General

Reduce the proportion of people living in poverty

Increase employment in working-age people

Increase the proportion of children living with at least 1 parent who works full-time

Reduce the proportion of adolescents and young adults who aren't in school or working

Arthritis

Reduce the proportion of adults with arthritis whose arthritis limits their work

Housing And Homes

Reduce the proportion of families that spend more than 30% of income on housing

Nutrition And Healthy Eating

Reduce household food insecurity and hunger

Eliminate very low food security in children

Workplace

Reduce work-related injuries resulting in missed workdays

SDoH, social determinants of health.

Reference:

1. Economic stability. ODPHP. Accessed June 26, 2025. <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/economic-stability>.

Education Access And Quality Objectives¹

Adolescents

- Increase the proportion of high school students who graduate in 4 years
- Increase the proportion of high school graduates enrolled in college the October after graduating
- Increase the proportion of 8th graders with reading skills at or above the proficient level
- Increase the proportion of 8th graders with math skills at or above the proficient level

Children

- Increase the proportion of children who are developmentally ready for school
- Increase the proportion of children who participate in high-quality early childhood education programs
- Increase the proportion of children and adolescents who receive preventive mental health care in school
- Increase the proportion of children with developmental delays who get intervention services by 4 years of age

People With Disabilities

- Increase the proportion of students with disabilities who are usually in regular education programs

Schools

- Increase the proportion of 4th graders with math skills at or above the proficient level
- Increase the proportion of 4th graders with reading skills at or above the proficient level
- Increase interprofessional prevention education in health profession training programs

SDoH, social determinants of health.

Reference:

1. Education access and quality. ODPHP. Accessed June 26, 2025. <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/education-access-and-quality>.

Health Care Quality And Access Objectives¹

General

Reduce the proportion of emergency department visits with a longer wait time than recommended

Increase the proportion of adults who get recommended evidence-based preventive health care

Adolescents

Increase the proportion of adolescents who speak privately with a provider at a preventive medical visit

Increase the proportion of adolescents who had a preventive health care visit in the past year

Cancer

Increase the proportion of females who get screened for breast cancer

Increase the proportion of females who get screened for cervical cancer

Increase the proportion of adults who get screened for lung cancer

Increase the proportion of adults who get screened for colorectal cancer

Increase the proportion of people who discuss interventions to prevent cancer with their providers

Increase the proportion of people with colorectal cancer who get tested for Lynch syndrome

Children

Increase the proportion of children with developmental delays who get intervention services by 4 years of age

SDoH, social determinants of health.

Reference:

1. Health care access and quality. ODPHP. Accessed June 26, 2025. <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/health-care-access-and-quality>.

Health Care Quality And Access Objectives (Cont)¹

Community

Increase the number of community organizations that provide preventive services

Drug And Alcohol Use

Increase the proportion of people with a substance use disorder who got treatment in the past year

Family Planning

Increase the proportion of women who get needed, publicly funded birth control services and support

Health Care

Reduce the proportion of people who can't get prescription medicines when they need them

Increase use of the oral health care system

Reduce the proportion of people who can't get medical care when they need it

Increase the proportion of people with a usual primary care provider

Increase the ability of primary care and behavioral health professionals to provide more high-quality care to patients who need it

SDoH, social determinants of health.

Reference:

1. Health care access and quality. ODPHP. Accessed June 26, 2025. <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/health-care-access-and-quality>.

Health Care Quality And Access Objectives (Cont)¹

Health Communication

Increase the proportion of adults whose health care provider checked their understanding

Decrease the proportion of adults who report poor communication with their health care provider

Increase the proportion of adults whose health care providers involved them in decisions as much as they wanted

Increase the proportion of adults with limited English proficiency who say their providers explain things clearly

Health IT

Increase the proportion of adults offered online access to their medical record

Increase the proportion of hospitals that exchange and use outside electronic health information

Increase the proportion of hospitals with access to necessary electronic information

Increase the proportion of doctors with electronic access to information they need

Increase the proportion of doctors who exchange and use outside electronic health information

Increase the proportion of people who can view, download, and send their electronic health information

Increase the proportion of people who say their online medical record is easy to understand

Increase the use of telehealth to improve access to health services

IT, information technology; SDoH, social determinants of health.

Reference:

1. Health care access and quality. ODPHP. Accessed June 26, 2025. <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/health-care-access-and-quality>.

Health Care Quality And Access Objectives (Cont)¹

Health Insurance

Increase the proportion of people with health insurance

Increase the proportion of people with prescription drug insurance

Reduce the proportion of people under 65 years who are underinsured

Oral Conditions

Increase the proportion of people with dental insurance

Reduce the proportion of people who can't get the dental care they need when they need it

Increase the proportion of low-income youth who have a preventive dental visit

Pregnancy And Childbirth

Increase the proportion of pregnant women who receive early and adequate prenatal care

Sensory Or Communication Disorders

Increase the proportion of newborns who get screened for hearing loss by age 1 month

Increase the proportion of infants who didn't pass their hearing screening who get evaluated for hearing loss by 3 months of age

Increase the proportion of infants with hearing loss who get intervention services by 6 months of age

Increase access to vision services in community health centers

SDoH, social determinants of health.

Reference:

1. Health care access and quality. ODPHP. Accessed June 26, 2025. <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/health-care-access-and-quality>.

Health Care Quality And Access Objectives (Cont)¹

Sexually Transmitted Infections

Reduce the number of new HIV infections

Increase knowledge of HIV status

Increase linkage to HIV medical care

Reduce the rate of mother-to-child HIV transmission

Reduce the number of new HIV diagnoses

Increase viral suppression

Increase the proportion of sexually active female adolescents and young women who get screened for chlamydia

HIV, human immunodeficiency virus; SDoH, social determinants of health.

Reference:

1. Health care access and quality. ODPHP. Accessed June 26, 2025. <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/health-care-access-and-quality>.

Neighborhood And Built Environment Objectives¹

General

Increase the proportion of schools with policies and practices that promote health and safety

Increase the proportion of adults with broadband internet

Reduce the rate of minors and young adults committing violent crimes

Environmental Health

Increase the proportion of people whose water supply meets Safe Drinking Water Act regulations

Reduce the amount of toxic pollutants released into the environment

Reduce health and environmental risks from hazardous sites

Reduce the number of days people are exposed to unhealthy air

Health Policy

Increase the proportion of people whose water systems have the recommended amount of fluoride

Housing And Homes

Reduce the proportion of families that spend more than 30% of income on housing

Reduce blood lead levels in children aged 1-5 years

SDoH, social determinants of health.

Reference:

1. Neighborhood and built environment. ODPHP. Accessed June 26, 2025. <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/neighborhood-and-built-environment..>

Neighborhood And Built Environment Objectives (Cont)¹

Injury Prevention

Reduce death from motor vehicle crashes

People With Disabilities

Increase the proportion of homes that have an entrance without steps

Physical Activity

Increase the proportion of adults who walk or bike to get places

Increase the proportion of adolescents who walk or bike to get places

Respiratory Disease

Reduce asthma deaths

Reduce emergency department visits for children under 5 years with asthma

Reduce emergency department visits for people aged 5 years and over with asthma

Reduce asthma attacks

Reduce hospitalizations for asthma in children under 5 years

Reduce hospitalizations for asthma in people aged 5 years to 64 years

Reduce hospitalizations for asthma in adults aged 65 years and over

Reduce hospitalizations for COPD

COPD, chronic obstructive pulmonary disease; SDoH, social determinants of health.

Reference:

1. Neighborhood and built environment. ODPHP. Accessed June 26, 2025. <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/neighborhood-and-built-environment..>

Neighborhood And Built Environment Objectives (Cont)¹

Sensory Or Communication Disorders

Reduce the proportion of adults who have hearing loss due to noise exposure

Tobacco Use

Increase the proportion of smoke-free homes

Increase the number of states, territories, and DC that prohibit smoking in worksites, restaurants, and bars

Reduce the proportion of people who don't smoke but are exposed to secondhand smoke

Increase the number of states, territories, and DC that prohibit smoking in multiunit housing

Transportation

Increase trips to work made by mass transit

Workplace

Increase the proportion of worksites with policies that ban indoor smoke

DC, District of Columbia; SDoH, social determinants of health.

Reference:

1. Neighborhood and built environment. ODPHP. Accessed June 26, 2025. <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/neighborhood-and-built-environment..>

Social And Community Context Objectives¹

General

Reduce anxiety and depression in family caregivers of people with disabilities

Reduce the proportion of children with a parent or guardian who has served time in jail or prison

Adolescents

Increase the proportion of adolescents who have an adult they can talk to about serious problems

Increase the proportion of adolescents in foster care who show signs of being ready for adulthood

Children

Increase the proportion of children and adolescents who communicate positively with their parents

Increase the proportion of children whose family read to them at least 4 days per week

Increase the proportion of children and adolescents who show resilience to challenges and stress

Health Communication

Increase the proportion of adults who talk to friends or family about their health

Increase the health literacy of the population

Health IT

Increase the proportion of adults who use IT to track health care data or communicate with providers

IT, information technology; SDoH, social determinants of health.

Reference:

1. Social and community context. ODPHP. Accessed June 26, 2025. <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/social-and-community-context>.

Social And Community Context Objectives (Cont)¹

LGBT

Reduce bullying of transgender students

Nutrition And Healthy Eating

Eliminate very low food security in children

People With Disabilities

Reduce the proportion of people with intellectual and developmental disabilities who live in institutional settings with 7 or more people

LGBT, lesbian, gay, bisexual, and transgender; SDoH, social determinants of health.

Reference:

1. Social and community context. ODPHP. Accessed June 26, 2025. <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/social-and-community-context>.