



Social Needs Network for Evaluation and Translation

FALL 2023

So much to be grateful for in 2023

A message from SONNET directors Katie Coleman and Meagan Brown

In the spirit of the season, we're using SONNET's last newsletter of the year to express our gratitude to all who make our work possible. From our sponsors to our collaborators nationwide to the members who participate in our projects — we are deeply grateful for the many contributions that helped advance social health at Kaiser Permanente and beyond in 2023.



SONNET Coordinating Center leaders (L-R): Andrea Paolino, Katie Coleman, Meagan Brown, and Carolyn Bain — feeling thankful for great coffee during a strategic planning meeting in August

First and foremost, we are thankful for the more than 6,300 Kaiser Permanente members who completed our 2022 National

Social Health Survey — and for the nearly 50 members who shared more detailed perspectives in follow-up interviews. Recently released results from the survey and interviews reaffirm that Kaiser Permanente's work to improve social health is more important than ever and helps us focus our effort where it's needed most (see story below).

Second, we so appreciate the contributions of our fabulous Evaluation and Research Committee (ERC), which includes members from all 8 Kaiser Permanente markets plus the Social Interventions Research & Evaluation Network (SIREN), Kaiser Permanente's Bernard J Tyson School of Medicine, and the Kaiser Permanente Evaluation, Learning, Measurement, and Regulatory Reporting (ELMR) team. Over the past year, our ERC led a wide array of projects that shed light on the impact of social needs across regions and populations. One recent example is a new SONNET publication from David Mosen, PhD, MPH, which looks at the link between social needs and health care utilization in older adults (see story below). Another example is a new SONNET report from Teaniese "Tina" Davis, PhD, MPH, which explores strategies for addressing missing race and ethnicity data in electronic health records — a gap that

often limits conclusions among specific populations in social health research (<u>see story below</u>). And as we look forward to 2024, we're thankful for the growing number of opportunities our ERC members have seized to apply for extramural funding that will advance our scientific understanding of social health. (Fingers crossed, and we'll keep you posted!)

Finally, we're extremely grateful for the partnership with our sponsors in Kaiser Permanente's Office of Community Health. Our collaboration in the past year strengthened the alignment between SONNET's work and Kaiser Permanente's national social health objectives, and we're excited to continue using and sharing results from the 2022 Social Health Survey and other SONNET projects to improve social health for Kaiser Permanente members and communities everywhere.

With gratitude and best wishes for a joyous holiday season, Katie and Meagan

Results are in from Kaiser Permanente's 2022 National Social Health Survey!

Our second national survey of members' social needs reaffirms that our work to improve social health is as important as ever

We're excited to share final results from Kaiser Permanente's 2022
National Social Health Survey.
Led by SONNET Associate Director,
Meagan Brown, PhD, MPH, the
2022 survey is a follow up to our
2020 survey, in which we heard from more than 10,000 members
nationwide about their social needs and desire for assistance from
Kaiser Permanente.



For the follow-up survey, we reached out to these same members to learn more about their social needs after the height of the pandemic. **More than 6,300 members responded**, providing insights on differences in social needs over time and across demographics and lines of business.

Key quantitative findings include:

- More than 2 in 3 members (68%) across all lines of business have at least 1 social need, and 90% of members with Medicaid plans have at least 1 social need.
- Members with any social need are 6x more likely to report fair or poor mental/emotional health and 3x more likely to report fair or poor physical health.
- **61%** of members with social needs are interested in receiving assistance from Kaiser Permanente.

In addition, we learned more about members' perspectives on social health and social needs screening in a qualitative project led by SONNET

collaborators <u>Clarissa Hsu, PhD, David Mosen, PhD, MPH</u>, and Dea Papajorgji-Taylor, MPH. Their team conducted interviews with 49 Kaiser Permanente members who completed the 2020 and 2022 surveys.

These qualitative findings highlight that:

- Members are open to health care systems providing social support but feel that receiving reliable medical care is the priority.
- It's important to improve communication to members about the relationship between social needs and overall health and why Kaiser Permanente is asking about their social needs.
- Having trusting relationships is a key factor in members' willingness to talk about social needs with their care teams.

Final reports summarizing results from both the survey and member interviews are available on our <u>website</u>, or you can download the PDFs below.

- Final report on quantitative results from the survey
- Final report on qualitative results from interviews
- Brief summary of combined quantitative and qualitative results

Featured publication

New SONNET paper finds that financial strain, housing instability, and social isolation are linked to use of emergency services in older adults

A recent SONNET study led by <u>David Mosen</u>, <u>PhD</u>, <u>MPH</u>, explored the link between social needs and health care utilization in older adults by examining the independent association of 5 common needs with future emergency department (ED) visits and hospital admissions.

<u>Published online</u> in October by *Population Health Management*, the study included data from nearly 10,000 Kaiser Permanente Northwest members age 65 or older who had completed the Medicare Total Health Assessment survey. Among the study's key findings:

- One-third of members surveyed reported 1 or more of 5 social needs: financial strain, food insecurity, housing instability, social isolation, and/or transportation needs.
- After adjusting for other social needs and population characteristics, 3 social needs — financial strain, housing instability, and social isolation — were independent predictors of future ED utilization. Financial strain was the only independent predictor of future hospital admissions.

While these findings point to specific social needs as potential priorities for social health interventions, **the authors also call for future research** that: 1) looks at social needs and health care utilization in people with chronic conditions and among populations that are more racially diverse, and 2) evaluates the effectiveness of social health interventions and whether resolving social needs is linked to fewer ED visits and hospital admissions.

Dr. Mosen's co-authors from Kaiser Permanente Northwest's <u>Center for Health</u> <u>Research</u> are <u>Matthew Banegas</u>, <u>PhD</u>, <u>MPH</u>; Erin Keast, MPH; and <u>John Dickerson</u>, <u>PhD</u>. Funding for this project came from SONNET and the National Cancer Institute.

Featured project

Recently completed SONNET project points to strategies for addressing missing race and ethnicity in electronic health records

Data about race and ethnicity are more likely to be missing from patient electronic health records (EHRs) compared to other demographic data like sex and insurance status. A recent SONNET project led by <u>Teaniese "Tina" Davis, PhD, MPH</u>, explored strategies for improving the accuracy and completeness of race and ethnicity data in EHRs to help advance knowledge on health disparities — and increase researchers' ability to address those disparities in studies focused on social health interventions.

Dr. Davis's team from Kaiser Permanente Georgia's Center for Research and Evaluation interviewed 23 experts from Kaiser Permanente and other organizations engaged in capturing and documenting patients' race and ethnicity. Their new final results summary describes what they learned and highlights solutions for addressing missing race and ethnicity data at multiple levels:

- Staff level: Train providers and staff to collect and correct race and ethnicity data.
- Administrative level: Fix systems that erase and replace race and ethnicity data, such as employer updates through HR systems.
- Organizational level: Improve patients' comfort by helping them understand why the health system

wants to correct and include race and ethnicity data.

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We're grateful to Dr. Davis and her team for surfacing this important issue and collaborating with SONNET to summarize their final results!

News from our partners at SIREN

The Social Interventions Research and Evaluation Network (SIREN) is hosting several activities to support their growing community of social care researchers! Check out these exciting opportunities to get involved in a robust community of scientists committed to advancing research on social care interventions.

SIREN Works-in-Progress sessions (SIREN WIPs)

- These "research community-only" sessions will be held every other month in 2024. Each of the 6 sessions will offer a unique space for researchers and trainees focused on social care interventions to learn about each other's work and share insights about how to overcome challenging design, analysis, or data interpretation issues.
- If you're interested in participating in the SIREN WIPs, please fill out this short form. To facilitate trust and a lively exchange of ideas, SIREN asks all participants to commit to attending at least 3 of the 6 annual WIP sessions.

 The series kicks off on January 23 from noon to 1 p.m. (Pacific) with a presentation on "Understanding and Addressing the Impact of Structural Racism and Discrimination on Minority Health and Health Disparities."

Social Needs & Health Equity Learning Community

- SIREN and the Patient Insight Institute are excited to broaden access to a new Learning
 Community focused on integrating the patient voice and perspective into social
 care research. The Learning Community is composed of Experts by Experience (ExE)
 from across the United States who have lived experience of social and/or economic
 adversity.
- The goal is to make it easier for social care researchers to get critical feedback from a national ExE group at any stage of the research process — from study design to specific study materials to dissemination of findings.
- To learn more or participate in a future Learning Community meeting, please <u>fill out</u> this short form.

SIREN Methods Conversations

- Launched last spring, the Methods Conversations webinar series focuses on emerging or challenging methods relevant to social care research.
- Find recordings of the <u>first 2 webinars</u> in the SIREN library, or sign up for the <u>SIREN</u> newsletter to receive announcements about upcoming Methods Conversations.

Stay in touch

We'd love to hear what you're working on! Email our team: sonnet@kp.org.

Did you miss the previous SONNET newsletter? Read it here.

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Our SONNET Coordinating Center would like to acknowledge that our Seattle offices are on the ancestral lands and traditional territories of the Puget Sound Coast Salish People.

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