Dr. Scharmaine Lawson (00:15):
Throughout The Future of Nursing podcast, we've heard a lot about social determinants of health. In case you needed a reminder on what social determinants are and how they impact health equity, we talk with Dr. Victoria Tiase.

Dr. Victoria Tiase (00:28):
So social determinants of health are factors that are typically not collected during a healthcare encounter.

Dr. Scharmaine Lawson (00:38):
Dr. Tiase is an Informatics Nurse, the Director of Research and Science at New York Presbyterian Hospital, and is also on the Future of Nursing 2020-2030 committee.

She's noticed that when people are seeking medical care, there are often other factors influencing their health, factors that may not be acknowledged during an assessment.

Dr. Victoria Tiase (01:01):
So there are social and behavioral aspects in which a person lives, works, and plays, that might impact their access to healthcare, and, as we have noted from evidence, can also impact their health outcomes. So things like their financial status, their housing situation, and even the physical environment in which they live and reside. So these factors can certainly augment the way we provide care and also help us support the best access to healthcare for individuals.

Dr. Scharmaine Lawson (01:50):
Knowing the social determinants of health that influence an individual's health outcomes is critical to giving them high quality, patient-centered care. In New York City, there are some unique factors that influence the health outcomes of many people in the city's population.

Dr. Victoria Tiase (02:06):
So an example of where a social determinant of health might impact someone's ability to access care, is certainly seen, from my perspective, here in New York City, with the homeless population. So the homeless population might not want to access care or might not be in a place where they can access care. And I think very connected to that, is also access to transportation.

So one of the examples that we use quite frequently in New York City is individuals that might not have the financial ability to take a subway for regular appointments. And how can we help subsidize that through different programs or initiatives to support that, ensure the patients have a Metro Card, and can get to care when they need it?

Dr. Scharmaine Lawson (03:02):
It's not just New York City where things like financial instability or lack of transportation contribute to much of the population not receiving high quality care. People in urban and rural areas all across the country also experience this. Helping people access public transportation so they can get to healthcare appointments is a great way to address one specific social determinant in one specific location.

Throughout The Future of Nursing podcast, we've been exploring specific ways that nurses can address social determinants of health and work to advance health equity. But to do this, it will take a
broader, more coordinated, and more collaborative approach to really address these challenges on a
national and global level.

Dr. Martha Dawson (03:49):
We have to focus on not only from the patient and engage in the community.

Dr. Scharmaine Lawson (03:56):
That's Dr. Martha Dawson. Dr. Dawson is the president of the National Black Nurses Association. And
she's seen why it's so important to develop a broad strategy for nurses to address social determinants of
health.

Dr. Martha Dawson (04:09):
But we also have to focus on it in terms of: how are we going to educate future nurses to be comfortable
in that space and to really understand what the social determinants of health are? And then to
understand how that really ties back and connect to our political system, the political determinants of
health, and those social justice issues that we have to address. Whether we are talking about housing,
the environment, jobs. Whether we are talking about, again, how people live, work, and play, how the
communities are affected by certain policies and procedures and statutes that are out there.

And how do we get those nurses, or the frontline caregivers, in public health, or in practice, or in
a long-term care facility, how do we help to educate them within the academic setting so they're ready
to advocate once they leave the educational setting?

Dr. Scharmaine Lawson (05:11):
There are many moving parts in equipping nurses to address these things, therefore it's important that
all organizations and nursing leaders are on the same page. So we must focus on creating a shared
agenda to address this unique challenge in health equity.

This is The Future of Nursing, a series from the National Academy of Medicine, based on the
recently published report, The Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity.

I'm Dr. Scharmaine Lawson. I'm a nurse practitioner. And I'll be taking you through the stories of
nurses confronting health inequities. And together, we'll learn how nurses can use their unique skills,
knowledge, and dedication, to address health inequities and overall improve the health and wellbeing of
the nation.

In this episode, we'll be hearing from the experts about a really important recommendation in
The Future of Nursing 2020-2030 report, which is to develop a shared agenda for addressing social
determinants of health, and overall achieving health equity.

There needs to be an agenda that includes explicit priorities across nursing practice, education,
leadership, and health policy engagement. And the process for creating this agenda should be led by the
Tri-Council for Nursing and the Council of Public Health Nursing Organizations.

The Tri-Council for Nursing is an alliance between several nursing associations and organizations.
And the Council of Public Health Nursing Organizations is a coalition of the nation's leading public health
nursing organizations.

Of course, there are dozens of national organizations and hundreds, if not thousands, of local
groups involved in healthcare across the country. With all these different groups attempting to address
social determinants of health, it can be challenging to envision what a shared agenda might look like and how it might come together.

Dr. Victoria Tiase (07:23):
A shared agenda is something that outlines common interests and goals. So it can also include work plans, or a framework, in order to do the work. But I think the key point, and really a key message from the report, is that it's shared. And what that means, it's not a separate agenda for each nursing organization; which is sometimes what we've seen in the past.

So this is the idea that it is a cohesive agenda across academia, practice, industry. And specifically, in the report's recommendation, we call out all nursing organizations nationally, should initiate this work to develop explicit priorities. And we also mention nursing organizations such as the Tri-Council for Nursing, which is AACN, ANA, AONL, and the National League for Nursing, as well as the state boards of nursing. So a whole bunch there, aligning with the Council for Public Health Nursing Organizations.

So it's really about working collaboratively and leveraging the respective expertise of all of these organizations in this agenda setting process.

Dr. Scharmaine Lawson (08:46):
As this shared agenda is created, it's incredibly important to draw from the expertise of nurses.

Dr. Victoria Tiase (08:53):
I think the new piece and the new message in this report, is that we are looking at a shared agenda across nursing organizations. So not each individual organization. So the hope is that, when one is created, it will not only leverage the expertise of nurses, but draw in knowledge on community needs and even partnership with patients in underserved communities. So I think that the difference here, it's a real opportunity to use the collective voice of nursing to advance this work in health equity.

Dr. Scharmaine Lawson (09:34):
Dr. Dawson, who we heard from earlier, has established some clear ideas for how nurses and nursing organizations can establish this agenda.

Dr. Martha Dawson (09:44):
I think, first of all, we need to look at: so what is going to be the agenda for nursing going forward? We have to look at this from the large perspective first and focus on what is best for the profession. And then how do we create those strategies, goals, and objectives, so that we are working together and not necessarily in parallel with each other?

So, for example, when we start talking about the social determinants of health, I think we first all need to agree that the social determinants of health are really the downstream issues that we are trying to address and resolve. And maybe we need to take a step back and begin to address those upstream things that actually causes the social determinants of health.

Dr. Scharmaine Lawson (10:35):
Like Dr. Dawson mentioned, a shared agenda must address the root of the problems that cause health inequities. To address these problems as effectively as possible, nurses must be unified.
Dr. Martha Dawson (10:47):
So if I begin to address that within the National Black Nursing Association, it would be great to know that all other nursing associations are doing the same thing. Whether their practice is membership focus, from professional colleagues, or if we're in that practice area ... because there are many association that focus on practice ... or if we are in that leadership sphere, or even if we are talking about researching advocacy and policy influencing, I think we need to have the same message.

Dr. Scharmaine Lawson (11:19):
Nurses can lead the effort to address social determinants of health and achieve health equity, but they can't do it alone.

Dr. Angie Millan is a nurse practitioner who has served as a president of the National Association of Hispanic Nurses, and is also a member of the Future of Nursing 2020-2030 committee. Dr. Millan has recognized that there are several entities within the healthcare industry that have to work together to achieve these goals.

Dr. Angie Millan (11:45):
In order for nursing to play a critical role and make an impact, those who employ nurses need to straighten the nursing profession, they will need to provide the education and supportive work environments, and make sure that nurses have all the resources that are needed. Because for nurses to advance the shared agenda, they will need to be well prepared to bridge medical and social, advocating for policies, addressing poverty, racism, and other conditions that stand in the way of health and wellbeing.

So the country's challenges include not only public access to high quality affordable care, but also the lack of access many communities have to fresh food, clean air, even public transportation and good schools. These are all factors of health and wellbeing.

So the shared agenda will focus on addressing the social determinants and the barriers, specifically for the underserved communities. We need the government, the payers, the health organizations and foundations. So we need to leverage all groups, all expertise, and we need to work as one and not in our own silos.

So the agenda also needs to include clear priorities across nursing practice, education, leadership, and health policy. So cross-sector collaboration is key, and we need to prioritize and align resources so that the limited resources can be leveraged and maximized.

Dr. Scharmaine Lawson (13:23):
And while it will take the efforts of healthcare professionals, academics, and public health experts, The Future of Nursing report is clear about who is responsible for implementing these strategies.

Dr. Angie Millan (13:35):
Nursing will implement the shared agenda. The committee's calling out on all nurses, at all levels and all work settings, to help implement this shared agenda. Because nurses are uniquely woven into the fabric of the community, they're in schools, different workplaces, they go to people's homes, they're at prisons, they're at hospitals, they're at assisted living facilities and other community spaces. So they're positioned to be a more powerful part of improving health and health equity.
And, again, we will need nurses with their various expertise, from all levels, to be able to address complex social, economic, and environmental problems in a more effective manner to better coordinate and integrate in order to have a greater impact on health outcomes.

Dr. Scharmaine Lawson (14:29):
While it may be a challenge to establish a shared agenda across so many different organizations and professions, the results will undoubtedly change healthcare.

Maureen Bisognano (14:40):
I believe that a shared agenda is going to be critical to improving health and healthcare globally, especially here in the United States.

Dr. Scharmaine Lawson (14:50):
That's Maureen Bisognano, the President Emerita and Senior Fellow at the Institute for Healthcare Improvement, who we heard from in our last episode. For Maureen, there's a reason why nurses are in the best position to improve healthcare.

Maureen Bisognano (15:05):
We've got a tremendous opportunity for nurses, because nurses work in so many settings, in schools, in nursing homes, in all different settings. So nurses are out there in the field seeing the burden of social determinants. And they're in the best position, in a community, to bring together the resources to think upstream about: how do we prevent healthcare problems?

Dr. Scharmaine Lawson (15:29):
In order to create and implement a shared agenda that allows nurses to address healthcare problems at their root, there are certain steps that must be taken.

Dr. Tiase laid out exactly what those steps are.

Dr. Victoria Tiase (15:43):
I think the first piece is to perform an assessment and look at the gaps, in terms of where there are states that might not have similar policies, or where there are gaps within states or organizations that are perpetuating health inequities.

A next step would be to identify the relevant expertise in each of the nursing organizations, and taking a look at what each of those organizations bring to the table. So this also includes bringing in the National Coalition of Ethnic Minority Nurses, also connecting with our public health organizations, connecting with payers and foundations and other groups that have a vested interest in supporting nurses as well.

Dr. Scharmaine Lawson (16:46):
Multiple players in healthcare will collaborate to create this agenda. And according to Ms. Bisognano, nurses must take the lead in these developments.

Maureen Bisognano (16:55):
Nurses really step up to develop these innovations. They're out in the field, they're looking at food, they're looking at housing, they're looking at parental and family problems. And they're working out there to try and surface those, and then bringing people together to begin to solve them.

I think the problem we've got in the United States is an ineffective or an accelerated way of sharing. We need to make these models visible so that nurses working across the country can learn from each other.

At IHI, we run these collaboratives, these joined learning sessions, where people come together and they share their current experiences and they learn together how to build new ones. I think if nurses can see the innovations that are happening around the country and they can share together, not only the problems they see, but the solutions that they're finding, I think we could accelerate the pace of change across the country.

Dr. Scharmaine Lawson (17:55):
Nurses will have to step up and use their voices. And they may need to do this in some non-traditional ways. And Dr. Tiase believes the voice of nurses is especially important to address this challenge.

Dr. Victoria Tiase (18:08):
I think one of the untraditional ways that nurses can step up, that I am quite passionate about and which we have seen over the past year, is the use of communication strategies. We have seen that the nursing voice is being heard. And now it's about using these shared agendas to leverage that collective nursing voice to enable change. So this includes the use of social media to amplify messages to the public, to policy makers, and also to connecting with the media, because I think we can also influence and promote the expertise of nurses in health equity related issues.

One other idea, which perhaps might be more traditional to some, but I think most might find this untraditional, is working to increase the number and also the diversity of nurses on boards and in other leadership positions, not just within healthcare, but outside of healthcare. So I think we have made some great strides in getting nurses on boards within healthcare, but it's really that outside of healthcare where I think there is great opportunity.

So what I mean by outside of healthcare, I'm talking about community boards, housing authorities, even school boards; from a technology perspective, nurses working at large technology companies. So I think there's a lot of opportunity there for nurses to influence the work that goes on in other sectors, which will then very much connect to this work on a shared agenda to dismantle inequities.

Dr. Scharmaine Lawson (20:12):
It's important to recognize that these innovations are already happening.

Maureen Bisognano recently visited one program that really showed her the kind of impact nurses can make when they use their voices and choose to act, after observing problems in a community that were disrupting people's health outcomes.

Maureen Bisognano (20:33):
There are examples from around the country, around the world. One of them that I think is very powerful, is during the course of our work for the report, I went to visit the Rhode Island Institute Nursing Middle College. And this is a group of nurses in Rhode Island who used to work in public health.
They were used to seeing the burden of social disease and impact, the burden of poverty, the burden of drug use in communities where people had no resources. And that was their job, in the old days, was taking care of people once they got sick.

But one day they stopped and asked themselves: why don't we move upstream and prevent these problems from happening? So these nurses, public health nurses, opened up a high school, a charter high school, grades 9 to 12, they have several hundred kids in the school. And it's the first school in the country that's a high school crossing over into a college. That's why they call it Middle College. And the students are almost all focused on healthcare as their professions.

They begin as nursing assistants in the summer breaks. They're learning not only science and anatomy and physiology and math, but they're learning empathy and caring. They actually do experiential learning, like they put on glasses that make it look like they have glaucoma so they get to see what it's like when a patient has glaucoma or any kind of disease.

Dr. Scharmained Lawson (22:07):
Addressing social determinants of health requires a shared agenda across nursing. And nurses are just the healthcare professionals to put this strategy into practice.

Dr. Angie Millan (22:17):
We're 4.2 million nurses. The call is for all nurses at all levels. So this includes your LVNs, the RN, your public health nurses, your advanced practice nurses, faculty, nursing leaders, researchers. And also at all settings, whether they're in acute care, community, public health. They need to all be involved to be able to address the social determinants of health. And nurses will need to work as individuals, in teams and across sectors, to meet these challenges, because we have many challenges.

Dr. Scharmained Lawson (22:54):
Through creating a shared agenda, organizations can work toward the same goals. And this can propel nurses and healthcare leaders into action.

Dr. Martha Dawson (23:04):
Until we become a serious nation about addressing these type of things, then we just going to continue to have conversations, but we're not going to have action and we are not going to be able to address the social determinants of health. We need to be speaking with a united voice. Because we all know that that's power, in numbers.

So I think this is an opportunity for the nursing profession to come together and say, "This is the big piece of the pie, and all of us need to collaborate so that we are not conflicting with each other, that we're supporting it and aligning with each other."

Dr. Scharmained Lawson (23:41):
This collaboration is necessary. The COVID-19 pandemic underscored the health inequities that so many people across the nation have been experiencing for decades. The COVID-19 pandemic is just one example of a public health emergency. And it's taught us a lot.

In our next episode, we're going to hear stories from frontline nurses who have served the nation through public health emergencies. And we're going to explore how we can strengthen the nursing workforce to be more prepared when disasters strike.
Until then, if you want to know how your organization can coordinate with others to create a shared agenda to address social determinants of health, check out The Future of Nursing 2020-2030 report. You can visit the report homepage at nap.edu/nursing2030.

And, as always, thanks for listening.