Social Determinants of Health Training in Family Medicine: An analysis of a national survey of program directors
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Abstract:
Social factors account for a majority of all health outcomes, underscoring the need to address social determinants of health (SDH) to eliminate health disparities. This study aimed to describe the scope of formal SDH curricula in family medicine residencies and to identify residency program characteristics associated with integrated core curriculum components to teach SDH. Survey items were included as one component of a larger, national survey of family medicine residency program directors conducted by the 2020 Council of Academic Family Medicine (CAFM) Educational Research Alliance (CERA). The sampling frame for the survey was all ACGME accredited US family medicine residency program directors as identified by the Association of Family Medicine Residency Directors (AFMRD). Overall, 41.2% of program directors reported significant formal SDH training in their residency program, though a majority (93.9%) agree screening for social needs should be a standard part of care. Most (58.9%) do not currently utilize standardized screening tools. The most commonly cited barriers to addressing SDH were lack of clinical resources (e.g., social work, legal advocates, etc.), lack of community resources (e.g., food banks, SUD treatment, etc.), and inadequate SDH screening instruments or integration into the EMR. Availability of referral resources was associated with increased learner competency in addressing SDH. Additional research is needed to better train the next generation of physicians to identify and meaningfully address social needs. By surveying family medicine residency program directors, we present empirical explorations of factors associated with increased learner competency addressing SDH.