

Clinical Exposomics: Addressing Environmental and Social Needs of Families with a Phone-Based Screening Program at a Pediatric Clinic in New York City

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BACKGROUND

- Exposure to environmental and social stressors impact health. Identifying and intervening on adverse exposures during childhood has the potential to improve health outcomes over the lifetime.
- Since 2018, we have screened families at a pediatric clinic in East Harlem to identify unmet social needs and provide interventions, including referrals to community-based organizations (CBOs).
- Limited evidence exists on the success of such programs in healthcare settings to successfully connect families with CBOs, especially for families facing structural inequities to health.

OBJECTIVE

To characterize unmet social and environmental needs and percentage of caregivers accepting referrals in our patient population.

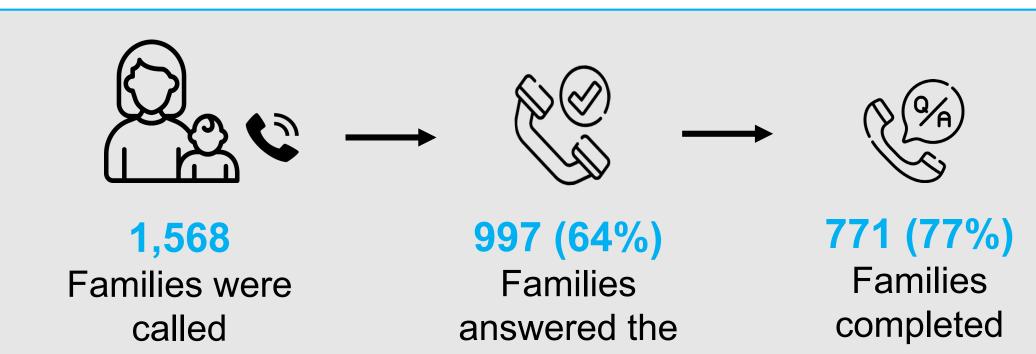
METHODS

- From November 2020-December 2021 an SDH screening tool was administered to caregivers by phone 1 week before the appointment.
- Families with unmet social needs were offered community resources and referrals.
- We used descriptive statistics to analyze SDH screening responses and referral acceptance and completion rates.

BACKGROUND

screener

Figure 1. Overview of telephone-based social determinants of health screening program at a Pediatric Clinic in East Harlem (data represents families screened from November 2020 to December 2021)

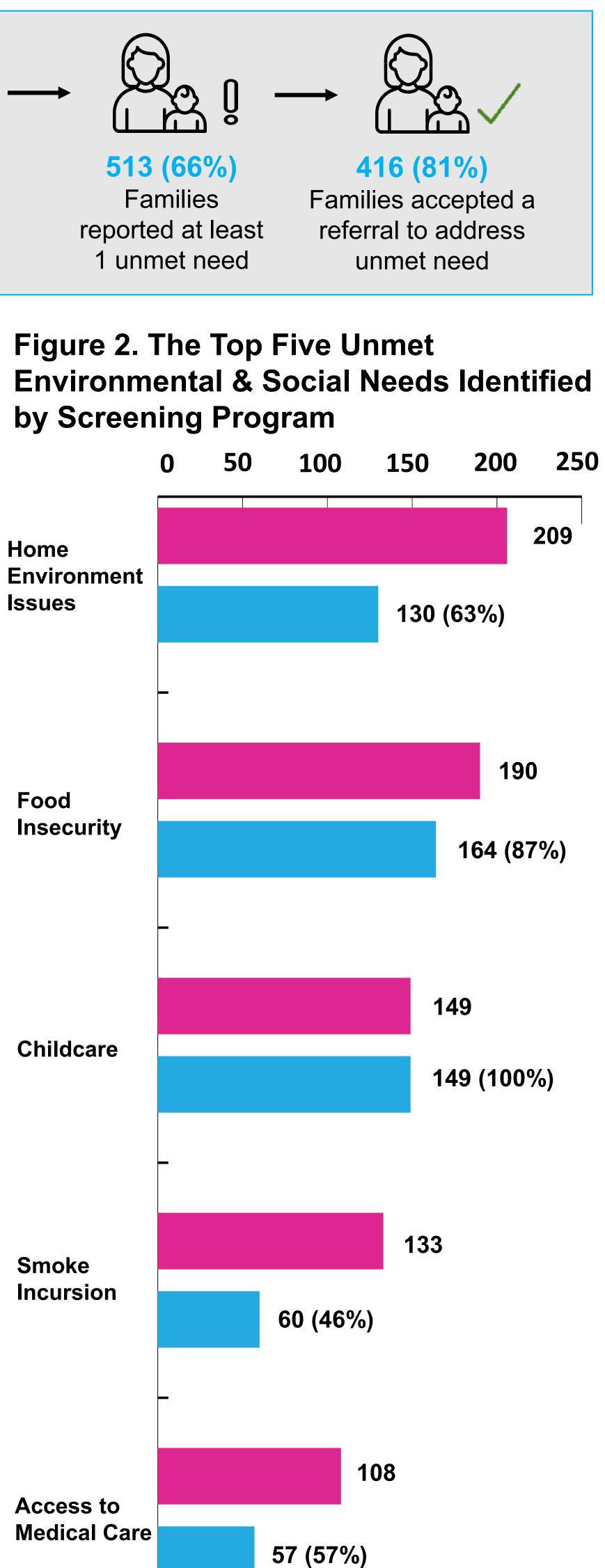


phone

Table 1. Demographic Summary

	All families n(%)	No Needs n(%)	<u>≥1 Need</u> n(%)
Child's age group			
<6 years	602 (78)	201 (81)	392 (76)
6-17 years	169 (22)	49 (19)	121 (24)
Public Insurance	698 (91)	201 (78)	467 (91)
WIC/SNAP	542 (75)	156 (60)	146 (73)
Public Housing	179 (29)	33 (16)	146 (34)
Hispanic Ethnicity	238 (59)	90 (58)	364 (71)
Race			
White	26 (4)	8 (6)	18 (6)
Black	270 (46)	92 (65)	178 (62)
Other	135 (29)	41 (29)	93 (32)

The average number of unmet social needs per family = 1.25



- concerns.



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"In relation to this presentation, there are no conflicts of interest."



CONCLUSIONS

 A phone-based SDH screener identified a range of unmet social needs in our pediatric population. Food insecurity and home environmental issues (e.g., pests, mold, secondhand smoke) were the most common issues reported.

>50% of families with reported needs accepted referrals to CBOs, social work, and/or online resources.

Efforts to expand screenings prior to doctor appointments may be a valuable intervention in outpatient settings in NYC, especially for food and environmental

• Future research will study referral completions and impact on child health.

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REFERENCES