

Division of Specialized Care for Children

Community and Social Context as a Social Determinant of Health for Children and Youth with Special Healthcare Needs

Community and social context as a social determinant of health (SDoH) includes community engagement, support systems and how a person integrates within their community. The critical aspect is a feeling or sense of connectedness in the community through relationships. The presence or lack of these relationships significantly affects a person's health and well-being and impacts the academic ability of children.

[Healthy People 2030](#) describes how these relationships can put children hem at risk for not getting enough support from loved ones or others. Examples include:

- A child with a parent or guardian who has served time in jail.
- Children and adolescents who feel they cannot communicate with their parents or an adult about serious problems.
- Adolescents who are bullied, especially those who identify as LGBTQ.
- Individuals with intellectual or developmental disabilities who live in institutional settings.

Children and Youth with Special Healthcare Needs and Community and Social Context

Children and youth with special healthcare needs (CYSHCN) are a vulnerable population. Therefore, the condition of their relationships with those in their home, school and community (including how those in their lives perceive them) affects their health. There is an emerging understanding that health inequities and SDoH have a greater impact on their health and well-being.



Examples of community and social context as it applies to CYSHCN and their families include:

- Do parents have friends and family they can talk to about the struggles of caring for their child with special healthcare needs?
- Does the child also have positive experiences in their home and at school?
- Do CYSHCN feel included in activities and/or having roles similar to peers without a special healthcare need?
- What services, resources, and locations are available in the community that are inclusive? Are these resources safe, available and accessible? Are these resources available in [all communities](#)? This can involve having recreation centers, a boys/girls club and available access to public libraries or bookmobiles.

Community Resource	Impact on Health
Community Recreation Activities	Higher rates of physical activity and general well-being with lower risk for childhood obesity
Community-Based Organizations (YMCA or Boys and Girls Clubs)	Positive development outcomes, like the ability to internally self-regulate and reduce stress
Public Libraries	A community resource hub that improves childhood and adult literacy

Highlights and Effects on Children and Youth with Special Healthcare Needs

In the *National Survey of Children's Health*, CYSHCN face less community inclusion

Compared to their peers without special healthcare needs, CYSHCN are less likely to participate in extracurricular activities (arts, athletics and social clubs) or engage in community service or volunteer work at their school, church or community.

Having the proper resources and accommodations can help CYSHCN feel visible in their community.

Compared to peers without special healthcare needs, CYSHCN are:

- **six times** more likely to be bullied in school
- **20 times** more likely to have difficulty making or keeping friends
- **two times** less likely to have parents who are confident that their child is ready for school (academically or socially)

Opportunities

Disability is a natural part of the human experience and in no way should diminish the rights of individuals, including CYSHCN, to participate in society. SDoH research shows that when there is an investment in viewing children holistically, such as in a *Health in All Policies* or *Life Course Health Development* framework, we can develop initiatives to create healthy, equitable and sustainable communities. For CYSHCN, these initiatives include:

- Provide accommodations and accessible areas for CYSHCN to participate in community spaces and activities as well as school or extracurricular activities.
- Encourage family engagement in ALL community settings while supporting family resilience.
- Support research of interventions that are culturally sensitive and tailored to meet the need of subgroups of CYSHCN, including those in chronic poverty, from immigrant backgrounds, in foster care and with incarcerated parents.
- Support policy that would strengthen programmatic coordination and policy alignment between home visiting, early childcare and education programs, and *medical homes*.
- Support the creation and implementation of programs that ensure families have access to high-quality, cost-effective, local community-based programs that support the psychological well-being of the primary adult caregivers and contribute to building resilience and reducing family stress.

Find out more about the Division of Specialized Care for Children's programs and who we help on our website at dsc.uic.edu. You can also contact us at dsc@uic.edu or (800) 322-3722.