



# SOCIAL DETERMINANTS OF HEALTH & SURVIVORS

## UNDERSTANDING SOCIAL DETERMINANTS OF HEALTH

According to the U.S. Department of Health and Human Services, “Social Determinants of Health are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality of life outcomes and risks.” Understanding social determinants of health and how they affect those we serve is essential. Women, LGBTQ+ individuals, Black, Indigenous, People of Color (BIPOC), People Living with HIV, and survivors of intimate partner violence are disproportionately affected by the social determinants. For individuals living at the intersections of these identities, these effects are even greater.



**Neighborhood  
& Built  
Environment**



**Education  
Access &  
Quality**



**Health Care  
Access &  
Quality**



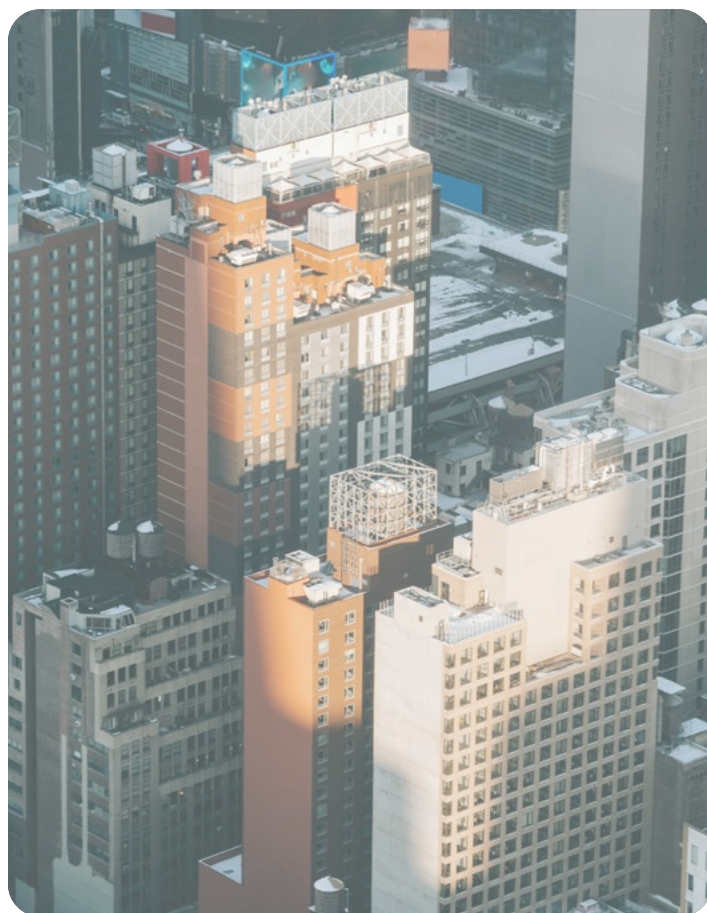
**Economic  
Stability**



**Social &  
Community  
Context**

## NEIGHBORHOOD AND BUILT ENVIRONMENT

Neighborhood and built environment impacts an individual's access to safe, affordable housing, access to affordable, healthy foods, access to public transportation, exposure of community violence, and access to clean air and drinking water. BIPOC folks disproportionately live in neighborhoods with high rates of community violence, lack safe affordable housing, and do not have clean air or drinking water. For survivors living with HIV, a lack of access to public transportation limits their ability to reach domestic violence and health care services. These services may not even be available in the survivor's neighborhood or even their county, further limiting access. A lack of safe, affordable housing is a significant barrier to survivors being able to safely leave their abusive relationships.



## EDUCATION ACCESS AND QUALITY

Education access and quality is a strong determinant of future health and well-being. The stress of poverty and trauma can negatively affect child development and their ability to succeed in school. The history of redlining and systemic racism in housing has led to large disparities in the U.S. school systems, leaving students of color with often significantly lower quality schools. Black and Latinx young women are disproportionately impacted by the school to prison pipeline. LGBTQ+ youth experience higher rates of bullying in school, impacting their ability to succeed academically.

## HEALTH CARE ACCESS AND QUALITY

Access to quality healthcare is essential for everyone. However, 1 in 10 people in the U.S. do not have health insurance. Even those with insurance face barriers due to high co-pays, lack of transportation, historical trauma within the healthcare system, a lack of trauma-informed care, and experiences of racism, sexism, homophobia, transphobia, and fatphobia by providers.

For survivors of intimate partner violence, access to healthcare is often compromised by their abusive partners. The abusive partner may prohibit access to medical care or prohibit the use of birth-control, antiretrovirals, or medicine that limits the chances of acquiring HIV such as PrEP and PEP. Many survivors may share a health insurance plan with their abusive partner, making it difficult to receive treatments without the partner's knowledge. Survivors may lose their health insurance when leaving the relationship. Survivors living with HIV are not always able to afford treatment due to high costs. Lastly, healthcare providers are not always knowledgeable on how to talk about or screen for HIV and/or domestic violence.

## ECONOMIC STABILITY

Economic stability impacts access to food, health care, housing, education, and more. Unfortunately, women continue to experience lower wages compared to their male counterparts. The wage gap is even more significant for women of color. Women's economic stability may also be impacted by caregiving responsibilities and sexual harassment in the workplace. LGBTQ+ individuals experience high rates of discrimination in the workplace and in housing, leading to higher rates of poverty and homelessness. BIPOC experience high rates of poverty and housing instability. People Living with HIV have high unemployment rates, sometimes caused by discrimination in employment.

Survivors of intimate partner violence living with HIV often face economic instability that lasts long after the abusive relationship has ended. Abusive partners may control their finances, misuse disability checks, not allow

them to work, and hurt their credit. The mental and physical effects of trauma can impact work performance and employment. The high rates of housing costs may cause survivors to stay in abusive relationships. Intimate partner violence is the leading cause of homelessness for women.



## SOCIAL AND COMMUNITY CONTEXT

Relationships with family, friends, co-workers, community members, and faith communities all impact health and well-being. Individuals without healthy, supportive relationships and engaged communities experience worse health outcomes. Intimate partner violence has devastating physical and mental health effects on survivors and is experienced at disproportionate rates by women living with HIV. Abusive partners may isolate them from friends, family, and supportive services. Abusive partners may threaten to disclose their partner's HIV status or threaten them with the criminalization of HIV.

## CONSIDERING THE IMPACT OF SOCIAL DETERMINANTS OF HEALTH TO ENHANCE YOUR ADVOCACY

**Create Diverse Partnerships** Partner with HIV and / or domestic violence organizations, people living with HIV, BIPOC folks, sex workers, and medical providers. Show these communities that you value their expertise and implement that knowledge into your services.

**Expand Your Services** Consider providing on-site testing for STIs or join community testing days. Provide condoms and lubricants in communal areas, signaling that your organization values sexual health. Create support groups for survivors living with HIV and allow peers to lead these groups. HIV organizations should consider having an on-site domestic violence advocate in case someone discloses and feels ready and comfortable to talk about their situation.

**Review Organization Materials** Regularly review your policies and procedures, considering what message they convey, what purpose they have, and do they build trust between staff and survivors. Consider your promotional materials by looking at who is represented, who is able to access them, and what type of information is conveyed. Be sure to have these materials available in the languages spoken in the communities you serve.

**Preparing For Conversations** Normalize discussions around domestic violence, HIV, and sexual health. While you do not have to be experts in these topics, it is important staff convey an openness to having these discussions. Consider the language you use to describe people and their experiences. Remember people are more than their status and/or their trauma experience.

For more information about how your organization can receive individualized training on the intersection of hiv/aids & domestic violence, please contact the positively safe team at the National Network to End Domestic Violence (NNEDV) at [DVHIV@NNEDV.org](mailto:DVHIV@NNEDV.org).

Learn More at [NNEDV.ORG](https://www.nnedv.org)