Whereas, the World Health Organization\(^1\) defines the social determinants of health (SDOH) as the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life; and

Whereas, These forces and systems include economic policies, development agendas, social norms, social policies and political systems; and

Whereas, Healthy People 2020 “highlights the importance of addressing the social determinants of health by including “create social and physical environments that promote good health for all”\(^2\); and

Whereas, Our American Medical Association (AMA) policies support efforts to ensure that individuals have access to safe, high-quality and patient-centered health care; and

Whereas, Our AMA adopted policy H-295.874, “Educating Medical Students in the Social Determinants of Health and Cultural Competence”; and

Whereas, Our AMA opposes polices and rules that would lead to barriers to access resources that are examples of SDOH such as housing applicants who consent to the disclosure of medical information about alcohol and other drug abuse treatment as a condition of renting or receiving Section 8 assistance or Temporary Assistance for Needy (TANF) and work requirements for Supplemental Nutrition Assistance Program (SNAP); and

Whereas, The federal government is proposing budget cuts to the U.S. Department of Agriculture’s discretionary budget by $3.5 billion, or 15 percent by eliminating $17 billion in funds available to SNAP (food stamps); and

Whereas, The federal government seeks to cut more than $3 billion from the U.S. Department of Education; and

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\(^1\) World Health Organization, [http://www.who.int/social_determinants/sdh_definition/en/](http://www.who.int/social_determinants/sdh_definition/en/), accessed March 22, 2018

Whereas, The federal government seeks to substantially reduce Section 8 federal housing subsidies, eliminate the $1.9 billion fund for public housing capital repairs, zero out community development block grants, discontinue grants to states and local governments to increase homeownership for the lowest-income Americans, and institute work requirements for individuals receiving housing subsidies; and

Whereas, The federal government seeks to decrease funding for National Dislocated Worker Grants -- support for those who lose their jobs in natural disasters or factory closures -- from $219.5 million in 2017 to $51 million in 2019; and

Whereas, The federal government seeks to decrease funding for Adult Employment and Training Activities, which serve veterans, Native Americans and young people who have dropped out of high school, by nearly half, from $810 million in 2017 to $490.3 million in 2019; and

Whereas, our AMA seeks to maximize opportunities for collaboration among federal-, state-, and local-level partners related to social determinants of health; therefore be it

RESOLVED, That our American Medical Association actively advocate that Congress, the White House, and senior cabinet officials ensure that programs designed to meet daily needs, support changes in individual behavior, and improve the health of populations remain funded at current levels and remain available without additional restrictions or rules. (Directive to Take Action)

References:

Fiscal Note: Not yet determined

Received: 05/02/18

RELEVANT AMA POLICY

Healthy Lifestyles H-425.972
1. Our AMA: (A) recognizes the 15 competencies of lifestyle medicine as defined by a blue ribbon panel of experts convened in 2009 whose consensus statement was published in the Journal of the American Medical Association in 2010; (B) will urge physicians to acquire and apply the 15 clinical competencies of lifestyle medicine, and offer evidence-based lifestyle interventions as the first and primary mode of preventing and, when appropriate, treating chronic disease within clinical medicine; and (C) will work with appropriate federal agencies, medical specialty societies, and public health organizations to educate and assist physicians to routinely address physical activity and nutrition, tobacco cessation and other lifestyle factors with their patients as the primary strategy for chronic disease prevention and management.

2. Our AMA supports policies and mechanisms that incentivize and/or provide funding for the inclusion of lifestyle medicine education and social determinants of health in undergraduate, graduate and continuing medical education.

Citation: Res. 423, A-12; Appended: Res. 959, I-17;

See also:
Educating Medical Students in the Social Determinants of Health and Cultural Competence H-295.874
Improvements to Supplemental Nutrition Programs H-150.937
Transforming Medicaid and Long-Term Care and Improving Access to Care for the Uninsured H-290.982