



Unite
Annual Summit



**Global
Heart Hub**

Dr Ratna Devi

Social determinants of Health



GETTING THE BASICS RIGHT ACROSS CVD

Barcelona 2023 | #GHHUnite

Social Determinants of Health



Economic Stability



Neighborhood &
Built Environment



Education Access
& Quality



Healthcare Access
& Quality



Social & Community
Context

Chronic Psychosocial and Environmental Stressors

Low Socioeconomic
Status

Neighborhood Violence

Limited Healthcare

Early Childhood Adversity

Discrimination

Unsafe or Insecure Housing

Transportation Noise Exposure

Food Insecurity

Social Isolation

Sociopolitical & Economic Context



Economic Stability



Education Access
& Quality



Neighborhood &
Built Environment



Healthcare Access
& Quality



Structural
Discrimination &
Racism

Social & Community Context



Food Environment



Social Environment
& Cohesion

Social Risks



Transportation
Instability



Financial Strain



Food Insecurity



Housing Instability

Lived Personal Experience



Everyday
Discrimination/Stigma



Neighborhood
Perception



Health Literacy



Implicit Bias



Social Needs



Perceived Health
Status

PATIENT & Community Participation for Hypertension management

**A patient-centric and equitable
approach to**

**Hypertension Control: Solutions from
the Last Mile**

SUPPORTED BY



Key findings



- Almost 100% of respondents are aware of Hypertension, *however only 40% could name the risk factors and the complications that arise from them.*
- A large proportion of male respondents *use tobacco and alcohol regularly.* The number of liquor stores have *grown four-fold in the last two years.*
- Most respondents are *unaware of age-appropriate blood pressure* readings.
- Almost all respondents *have never gone for preventive screening*
- About 30% had various myths and misconceptions including HT being harmless and something that happens to everybody with age.
- About *50% never went back for a followup*
- All PHCs had IEC material on Hypertension *on the walls.* There was no interactive material, videos or other means for patients to watch and engage
- All PHCs had NCD registers maintained by ANMs. However, *data is hand collected and uploaded into the portal at the PHC,* making it difficult for ANMs and ASHAs to track and trace
- Messages on *adherence and follow up were not present.*





- 80% villagers said PHC was within walkable distance and reaching it was easy.
- However *less than 30% said they went to the PHC at the onset of symptoms*
- Medicine outages were present and patients were sometimes offered only one week of medicines
- *PHCs could not offer the tests prescribed by the doctors, like USG, CT scan and X Ray.* Basic lab tests were unavailable in some PHCs
- *Navigating the district public hospitals was timetaking* and patients preferred to go to the private sector as services were more prompt.
- *Referral systems were not well established* and patients who did go to the district hospitals were not referred back to the PHCs for follow up with the patients.

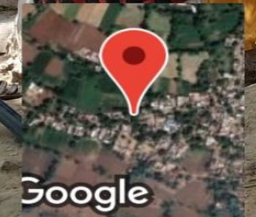
MYTHS

- Medicines need to be taken only *when sick*.
- Medicines are “hot” and will cause harm or dependency if taken for long time
- Stopping smoking or reducing alcohol is enough to manage HT and *medicines need not be taken*
- Alternate systems of medicines are better as *modern medicines will cause harm*
- Religious and other beliefs prevail especially in the older populations



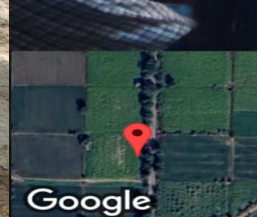
GPS Map Camera

Jawahra, Haryana, India
 7Q5R+HF5, Jawahra, Haryana 131306, India
 Lat 29.25907°
 Long 76.790661°
 20/04/23 02:14 PM GMT +05:30



GPS Map Camera

Barh Doroli, Rajasthan, India
 7P76+F29, Barh Doroli, Rajasthan 301408, India
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 27/04/23 01:12 PM GMT +05:30



GPS Map Camera

Sonipat, Haryana, India
 Unnamed Road, Haryana 131001, India
 Lat 29.014337°
 Long 76.828669°
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A rectangular, cream-colored card with a slightly textured surface is centered on a vibrant purple background. The card is held in place by four pieces of translucent, light-brown tape at its corners. The words "Thank you" are written in a fluid, black cursive script, with "Thank" on the top line and "you" on the bottom line, connected by a long, sweeping horizontal flourish. The purple background is decorated with several realistic-looking water droplets of varying sizes, some with highlights and shadows, scattered around the card. Sprigs of dark green, oval-shaped leaves are placed around the card, with a larger cluster at the top right and smaller ones at the bottom left and top left. The overall composition is clean and aesthetically pleasing.

*Thank
you*