



2024 **health equity** **impact report**



a message from our chief health equity officer

Dear colleagues and community members,

At Children's Health,SM we believe high-quality care must be equitable and accessible. This belief is core to our mission of making life better for children and drives our continued commitment to health equity – not merely as a concept, but as a strategic priority and vital component of sustainable, effective health care. Our goal is to ensure every patient has the fair and just opportunity to achieve their highest level of health, regardless of background or circumstance.

At the heart of our strategy is our systemwide screening for social determinants of health (SDOH). Identifying pressing social needs like food insecurity, housing instability and access to transportation has become central to our model for care. To date, we have screened more than 150,000 patients and connected families in need with meaningful, individualized support.

2024 has been a year of remarkable progress. We've introduced new programs, refined existing processes and received early national recognition, reinforcing our role as an emerging leader in equitable pediatric care. Today, we're supported by a robust and evolving portfolio of hospital-based and community-focused interventions designed to reduce barriers to health, strengthen access to care and promote long-term well-being.

As we look ahead, we remain steadfast in our pursuit of progress. We are prioritizing the reach and precision of our screening efforts, deepening community partnerships and advancing research that helps us better understand and address the diverse needs of the families we serve.

I am profoundly grateful for our extraordinary team and all whose work brings our vision to life each day. Together, we move closer to a future where every child receives the equitable, compassionate care they deserve.

Thank you for your continued support.

Sincerely,



Stormee Williams, M.D.

SVP and Chief Health Equity Officer





Introduction: advancing health equity at Children’s Health	4
Living our values through health equity	4
Progress grounded in transparency	5
The state of social needs	6
Screening for social determinants of health (SDOH)	6
Differences in SDOH needs by hospital areas	8
Differences in SDOH risks across Dallas County	9
Health equity by the numbers	10
Health equity in action: hospital-based interventions.....	11
Automated resource provision	11
Resource navigation and case management	11
Chaplain-led social support pilot.....	11
Los Barrios Unidos (LBU) community partnership program	12
Cross-functional collaboration drives success	12
LBU patient story: Salvador	12
Health equity in action: community-focused engagements.....	13
Medical Explorers Day	13
Community Resource Fair	14
Health Equity Talks	15
Community Health Improvement Week	15
Recognitions and affiliation highlights	17
Education, research and innovation	18
Education	18
Embedding equity from the inside out	18
Extending our reach through thought leadership.....	18
Faculty spotlights	19
Publications	19
Looking ahead: watch us growSM	20
Conclusion	21
Appendices	22
Appendix I: glossary of terms	22



introduction: advancing health equity at Children's Health

Since our humble beginnings in 1913 as a baby camp, Children's Health has remained committed to a single, unifying mission – **to make life better for children**. More than a century later, this mission continues to guide every aspect of our care, innovation and community partnerships.

Today, with more than 50 pediatric specialty and subspecialty programs and a network of nearly 1,900 medical and dental professionals, including physicians and advanced practice providers, we are delivering high-quality care to more children across North Texas than ever before. As one of the region's largest pediatric health systems, we not only broaden access to lifesaving care but also serve as a vital resource and lifeline for many of North Texas' most vulnerable communities.

Ensuring every child has timely access to care and the opportunity to achieve their full health potential is both a **responsibility** and a **priority**.

Living our values through health equity

At Children's Health, our Health Equity team plays a central role in putting our organizational values into practice. **Through selfless service, passionate advocacy, commitment to excellence and unwavering integrity**, the team works to advance equitable care across every level of our system.

We recognize that social, economic and environmental factors have a profound impact on health. Advancing equity requires us to look beyond clinical care and address the broader conditions that shape a child's well-being.

Through groundbreaking work and strategic innovation, our Health Equity team is driving real change by expanding access to equitable, high-quality care and identifying and removing barriers to health that exist beyond the walls of the hospital.



Leading a growing body of work that touches nearly every corner of our system, the Health Equity team centers its efforts around the following strategic priorities.



Systemwide screening for social determinants of health (SDOH)

Identifying and addressing non-medical barriers to health through targeted screening and tailored resource referrals.



Hospital-based interventions

Connecting patients and families to real-time support through a variety of robust programs and initiatives, including chaplain-led social support, resource navigation and financial assistance.



Community-focused engagement

Partnering with trusted local organizations to deliver culturally responsive care, build relationships and reduce health disparities at the neighborhood level.



Research, education and innovation

Elevating equity through research and equity-centered education for team members and systemwide learning.

Progress grounded in transparency

This inaugural Health Equity Impact Report tells the story of our work in 2024. It outlines key milestones, highlights areas of learning and improvement and reinforces our commitment to sustained, systemwide progress.

Designed for a range of audiences – from care teams and leaders to community stakeholders – this report provides a transparent account of where we are today and the foundation we're building for tomorrow.

We are proud of the progress made and look forward to continuing this journey toward a more equitable future for every child under our care.



CURIOUS ABOUT A TERM?

Check out the *Health Equity Glossary* in the appendix for helpful definitions and context



the state of social needs

When thinking about what children need to live healthy, thriving lives, we often consider things like medicine, hospitals and doctor visits. While there's no doubt high-quality clinical care plays a vital role in health outcomes, achieving and maintaining optimal health is deeply influenced by a variety of external factors, including access to nutritious food, reliable transportation and stable housing.

These critical externalities are broadly known as **social determinants of health (SDOH)** – the non-medical factors that shape how children grow, learn, play and live. SDOH have a wide-ranging impact and can influence everything from a child's ability to access care to how well they recover after treatment.

At Children's Health, we recognize that addressing these broader conditions is essential to achieving health equity. By screening for these factors early on, we can connect families with the resources they need to achieve their highest level of health.

Screening for social determinants of health

In 2022, Children's Health embarked on a systemwide effort to integrate social needs screening into clinical care, formally launching SDOH screening in outpatient settings.

In February 2024, we expanded screening to inpatient areas, and in September, we completed our rollout by initiating screening in the Emergency Departments at both Children's Medical Center Dallas and Children's Medical Center Plano. With the completion of this milestone, we are now officially screening across all major areas of the system.

SDOH SCREENING BY THE NUMBERS



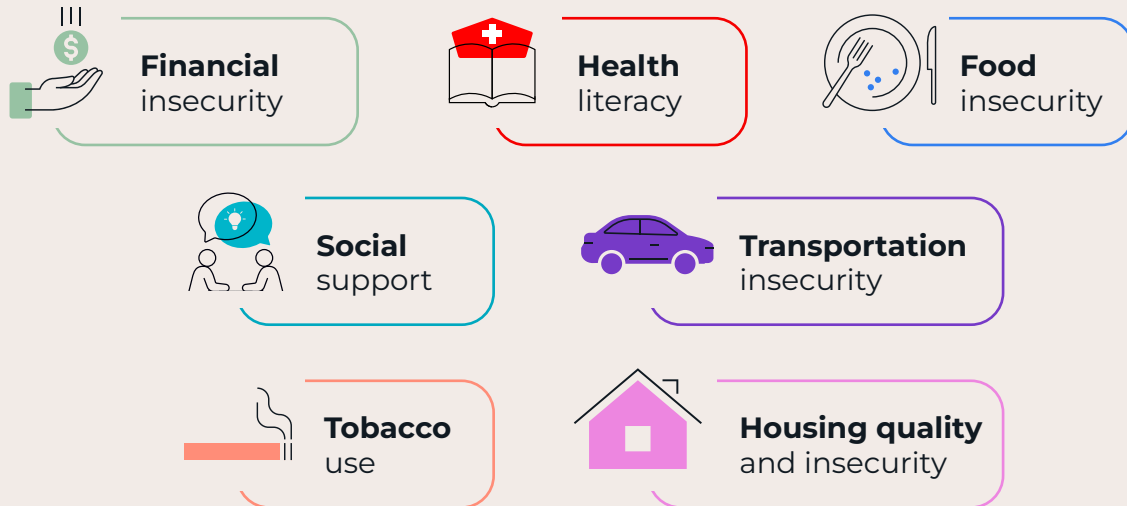
In **2024**, we completed
88,510
screenings across **140**
clinical areas



Since **2022**, we completed
159,734
screenings in
150 clinical areas



To ensure a consistent and effective approach to SDOH screening, the Health Equity team, in collaboration with clinical and non-clinical partners, developed a standardized screening process to identify patient needs in a compassionate, efficient manner. Currently, Children's Health screens for seven SDOH domains:



If a parent or caregiver gives a response indicating a need in any of the seven domains, the system will automatically send a list of community-based resources to the family via text message and include it in the After Visit Summary. Also, if a parent requests to speak with a staff member, one will contact the parent directly. This early intervention model helps ensure families obtain the holistic support necessary to achieve positive health outcomes and leads to stronger community partnerships.



Differences in SDOH needs by hospital areas

Since launching our screening initiative in 2022, approximately **52%** of patients screened have reported at least one social need. These findings provide essential insight into the non-medical challenges affecting our patients and their families and guide our response.

In 2024, the top three needs reported across our system were:



Social support
(17,647 patients)



Financial insecurity
(14,434 patients)



Food insecurity
(14,043 patients)

However, social needs are not evenly distributed across care settings. Different environments reveal different challenges:



Inpatient settings:

Financial insecurity was the most frequently reported need among screened patients admitted at either campus (Dallas/Plano).



Outpatient settings:

Social support was the most frequently reported need among screened patients in outpatient settings across our Dallas and Plano campuses.



Emergency Departments (EDs):

Food insecurity was the most frequently reported need among screened patients visiting the ED at either campus (Dallas/Plano).

These variations reflect the unique circumstances patients face based on where and how they access care. Understanding these patterns allows us to tailor our interventions and ensure support is available when and where it's needed most.

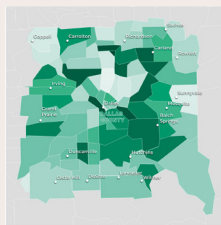


Differences in SDOH risks across Dallas County

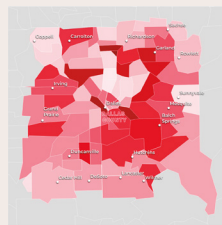
Just as social needs vary by care setting, they also differ across the communities we serve. In North Texas, a child's ZIP code can significantly influence their access to resources and overall health outcomes. By analyzing our SDOH screening data geographically, we can identify where social risks are most concentrated and tailor our support efforts accordingly.

The following heat maps illustrate the ZIP codes where patients have screened positive for various social needs. Darker areas represent regions with higher concentrations of risk, helping us better understand and address the disparities that exist across Dallas County.

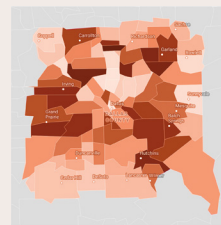
RISKS BY ZIP CODE IN DALLAS COUNTY



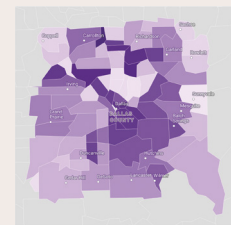
FINANCIAL RISK



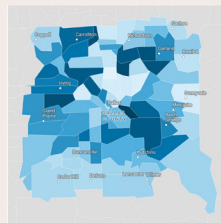
FOOD RISK



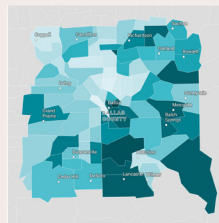
LITERACY RISK



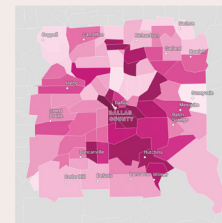
HOUSING RISK



SOCIAL SUPPORT RISK



TOBACCO RISK



TRANSPORTATION RISK

FINANCIAL RISK:

Financial needs are highest in regions alongside the I-635 highway, including in the southeastern (Pleasant Grove/Balch Springs/Seagoville), eastern (Mesquite/Town East) and northeastern (Casa View/Vickery Meadows/Garland) regions of Dallas County.

FOOD INSECURITY:

Like the social support and financial risk maps, food insecurity risk follows the same geographic pattern, concentrating in the southeastern, eastern and northeastern regions of Dallas County.

HEALTH LITERACY:

Health literacy risk tends to concentrate in a circular pattern toward the outer regions of downtown Dallas. This includes the areas of Grand Prairie, Irving, Lake Highlands, Casa View and in the southeastern portion of the county (Pleasant Grove/Balch Springs).

HOUSING QUALITY AND INSECURITY:

Housing insecurity risk tends to concentrate in the northwestern region of the county as well as in portions of South Dallas and West Dallas.

SOCIAL SUPPORT:

Social support needs are highest in the southeastern (Pleasant Grove/Balch Springs/Seagoville), northwestern (Irving/Grand Prairie) and northeastern (Casa View/Vickery Meadows) regions of Dallas County.

TOBACCO USE:

Tobacco use risk tends to concentrate in less urbanized regions in the southeastern region of the county, including areas such as Seagoville, Highland Hills and Lancaster.

TRANSPORTATION INSECURITY:

Transportation insecurity risk tends to concentrate in the southern and southeastern regions of Dallas County. There is also increased risk observed in certain portions of North Dallas, including Vickery Meadows.



health equity by the numbers

Behind every data point is a story of impact. The following snapshot highlights key metrics from 2024 that reflect the scale of our health equity efforts. From screenings completed to patients reached and resources delivered, these figures demonstrate the breadth of our commitment to advancing equitable care across every corner of our system.

**88,510****Patients screened**
for SDOH**176****Patients referred**
to Children's Health specialists from
federally qualified health centers
(FQHC) through Los Barrios Unidos**600** **Community members**impacted (Medical Explorers
Day participants and
Resource Fair attendees)**Community resource**
referrals delivered**46,803****317****Hours volunteered**
with community
partners**4,792****Enterprise
Care Management (ECM)**
patients served through SDOH

health equity in action: hospital-based interventions

At Children's Health, addressing the non-medical needs of our patients is central to our standard of equitable care. Through a growing suite of hospital-based interventions and initiatives, we are actively closing the gap between clinical care and real-world challenges by meeting families where they are emotionally, socially and logistically. From digital tools to in-person support, these programs reflect our ongoing commitment to providing holistic, equitable care inside our walls.

Automated resource provision

To ensure families leave their hospital visit with tangible support, we've implemented an automated system that delivers community resources via SMS text messages and an After Visit Summary (AVS). This resource list includes high-level community resources relevant to common social needs such as food access, housing and transportation. In addition, clinic team members add tailored resources based on the patient's specific responses to the social determinants of health (SDOH) screening.

Resource navigation and case management

Through our Enterprise Care Management (ECM) Resource Navigation Program, patients who indicate they need help with food, housing or utilities are connected with trained ECM staff for personalized follow up. This added layer of care coordination ensures no patient's request for help goes unanswered and those at highest risk are supported with dignity and compassion.

Chaplain-led social support pilot

SDOH screening has continually identified social support as one of the most frequently reported needs among patients. In response, our Health Equity and Spiritual Care teams partnered to launch a chaplain-led pilot to provide emotional and spiritual support during hospital stays.

The program launched in December 2024, with pilots at both our Dallas and Plano campuses. In its first month, chaplains engaged with **four patients**, offering compassionate bedside support and other resources during moments of stress, transition and isolation. Since then, the program has served more than **40 patients**, signaling both its early impact and tremendous potential. We look forward to tracking continued growth and deepening reach in 2025 as we expand this vital support to more families across our system.

"One mother, feeling isolated from her own family after relocating to North Texas from out of state, expressed gratitude for our outreach. What began as a conversation became an emotional lifeline during a difficult chapter for her and her son."

– **Simbarashe "Simba" Sigauke**,
Chaplain Resident Fellow

"I spoke with a mother who had recently given birth and was facing a really difficult situation. Her son has autism, and she shared that her husband had left and her family was struggling to cope. We talked for over an hour. It was clear she needed someone to talk to, and I was grateful to be that steady presence for her."

– **Adam Lubbers**,
Chaplain Resident Fellow



Los Barrios Unidos community partnership program

In 2024, Children's Health proudly celebrated the second anniversary of our affiliation with Los Barrios Unidos (LBU) Community Clinic. The goal of the program is to increase access to ambulatory clinic visits, improve care coordination and reduce preventable emergency room visits for shared patients, many of whom face barriers to specialty care.

SINCE PROGRAM LAUNCH:



Generated
443 referrals
for 372 patients



Scheduled
234 appointments



Reduced
preventable emergency
room visits by **11%**

Cross-functional collaboration drives success

The program's success is highly attributable to cross-functional collaboration among Patient Financial Services, Ambulatory Services, Transition Navigation, IT Core Clinical Applications and the incredible team at Los Barrios Unidos.

"This program expanded specialty access to our most vulnerable patients, provided needed support to our pediatricians and coordinated care for families. It has been a godsend."

– **Sharon Davis, D.O.**, Chief Medical Officer, LBU



LBU patient story: Salvador

Salvador, a 4-year-old boy referred to Children's Health by LBU, had been experiencing decreased muscle tone. With help from a dedicated Social Work Navigator, his family secured financial aid, received necessary medical equipment and established coordinated care across Neurology, Pulmonology, Cardiology, Rehabilitation Medicine and Nutrition. Today, Salvador receives comprehensive care through the Duchenne Muscular Dystrophy Program at Children's Health.



health equity in action: community-focused engagements

At Children's Health, we recognize meaningful, lasting change happens when we meet families where life happens – in schools, neighborhoods and community spaces. Through innovative, on-the-ground initiatives and meaningful partnerships with trusted local organizations, we are working to bridge gaps, build trust and deliver care that's responsive to the lived realities of the children and families we serve.

Medical Explorers Day

In spring 2024, Children's Health hosted its first Medical Explorers Day at Buckner Terrace Montessori, a Dallas ISD elementary school located in one of the city's most underserved neighborhoods. The event provided more than 450 students with a hands-on introduction to careers in medicine and was brought to life by 32 dedicated volunteers from across our system.

For one day, the school gym was transformed into a miniature medical center. Students rotated through various stations where they listened to heartbeats with stethoscopes, toured an ambulance and even took "X-rays" of plastic fruits. The event served as a meaningful opportunity to show the students that careers in health care and STEM are accessible and within their reach.

By creating space for representation, mentorship and hands-on discovery, Medical Explorers Day embodies the spirit of health equity: planting seeds of possibility, especially in communities that historically have had limited access to these opportunities.

"It's important for these students to see that medical careers in STEM are possible, and there are people who look like them currently occupying these roles from whom they can learn"

– **Monica Morris**, Director of Education and Community Engagement, Children's Health



Community Resource Fair

In October 2024, the Health Equity team hosted its first Community Resource Fair, marking a meaningful milestone in our ongoing work to reduce health disparities and support the well-being of families across North Texas.

The event welcomed more than **150 families**, offering them the opportunity to connect directly with local community-based organizations (CBOs) that provide essential support services. Rooted in our commitment to addressing social determinants of health (SDOH), the fair served as a bridge between patient needs and the community partners equipped to meet them.

We are grateful to the team members, volunteers and CBO staff who made this inaugural event possible. Together, we are building a more connected community where every family has access to the support they need to thrive.



Health Equity Talks

Health Equity (HE) Talks is an educational series launched in 2024 to equip team members with a deeper understanding of health equity, the impact of social needs on health and how these factors affect the lives of the patients and families we serve.

More than 200 team members attended the first session on how SDOH can affect health and outcomes for patients with pulmonary conditions. Speakers explored the connection between inequity and chronic disease, offering clinical teams practical ways to identify barriers and better support their patients.

HE Talks marks the beginning of a broader effort to create safe, consistent spaces for learning, reflection and discussion around health equity. With more sessions planned, this series will continue to foster a culture of awareness and shared accountability across our system.

Community Health Improvement Week

Each year, Community Health Improvement (CHI) Week, led nationally by the American Hospital Association, honors the efforts of health care professionals working to advance equity and community well-being. In June 2024, Children's Health joined this national observance with a series of events aimed at celebrating our commitment to pediatric health and amplifying our local impact.

HIGHLIGHTS INCLUDE:

- **Beyond ABC webinar (June 12):** Presented key findings from the 18th edition of our Beyond ABC report, which evaluates the well-being of children in North Texas across health, education and economic indicators.
- **ABC lunch and learn (June 12):** Recognized the work of internal teams actively engaging with community partners to improve child health outcomes.
- **Metrocrest Services volunteer event (June 15):** Engaged team members in direct community service, reinforcing our shared responsibility to support families beyond hospital walls.

Since 1996, **Beyond ABC** has served as a trusted **source of insight into the challenges children face in our region**. During CHI Week, we reaffirmed our commitment to equity by highlighting not just data, but the people and partnerships driving change across the Dallas-Fort Worth area.



Want to partner with us?

Whether you're a philanthropist, part of a community organization or simply passionate about advancing health equity for children, there's a place for you in this work.

To explore a partnership for advancing opportunities, please contact:

healthequity@childrens.com

To make a charitable contribution, please contact:

giving@childrens.com

or visit **give.childrens.com**.

Together we can create a healthier, more equitable future for every child!



recognitions and affiliation highlights

Our commitment to advancing health equity is not only reflected in our daily work but also affirmed by the recognition of national partners who share our values.

In 2024, two leading organizations in public health and pediatric care acknowledged our efforts, highlighting both the impact of our initiatives and the strength of our collaboration across systems and communities.



HEALTHY PEOPLE 2030 CHAMPION

In 2024, Children's Health was recognized as a "Healthy People 2030 Champion" by the U.S. Department of Health and Human Services Office of Disease Prevention and Health Promotion.

This recognition highlights our efforts to screen for social determinants of health (SDOH), address health disparities and health literacy, advance disease prevention, reduce language barriers and strengthen partnerships with community organizations to support patient well-being.



COMMUNITY HEALTH AFFILIATE

Also in 2024, Children's Health was named a Community Health Affiliate by the Children's Hospital Association (CHA), joining a select group of 43 pediatric hospitals dedicated to advancing health equity through shared resources and peer collaboration.



education, research and innovation

Education

At Children's Health, we believe education is essential to advancing equity, both through clinical excellence and by building a shared understanding of the broader factors that shape health outcomes. In 2024, the Health Equity team continued to integrate equity-focused education across every level of our organization, from onboarding and residency programs to national conferences and public health forums.

Embedding equity from the inside out

From the Children's Health governing board to new-hire orientations and nurse residency programs, educating our teams on social determinants of health (SDOH) is now a core part of our institutional learning journey. The Health Equity team led more than **70 internal presentations** this year, partnering with departments across clinical, operational and executive leadership to build shared understanding and accountability.

KEY PROGRAMS INCLUDE:

- Physician orientations and nurse residency tracks
- Team member onboarding with embedded SDOH content
- Maintenance of Certification (MOC) Portfolio Program, which integrates SDOH into quality improvement (QI) projects, helping physicians enhance their practice while earning continuing education credit

Extending our reach through thought leadership

The Children's Health Equity team shared equity-focused research and insights across 21 external forums in 2024. These included national conferences such as:

- Pediatric Academic Societies (PAS) Meeting
- Accelerating Health Equity National Conference
- Children's Hospital Association webinars and site presentations
- National Medical Association's Pediatric Health Disparities Panel

These engagements reflect our commitment to not only applying but also shaping best practices in equitable care. Faculty and leaders across our system are also contributing to equity-focused research and presentations at an increasing rate, and we look forward to offering a more comprehensive view of these efforts as this work continues to grow.



Faculty spotlights

Advancing health equity is a shared commitment, spanning multiple disciplines across Children's Health and our academic partner, UT Southwestern. Our faculty researchers are leading critical work to better understand how social factors influence care and outcomes for children – and to develop interventions that close the equity gap in pediatric health.



KRISTINA ALICIA CIAGLIA, M.D. – PEDIATRIC RHEUMATOLOGIST, CHILDREN'S HEALTH

Dr. Ciaglia's research examines how social determinants of health impact children with rheumatic diseases. Her work explores neighborhood-level factors that contribute to disparities in disease burden, with the goal of informing interventions that promote equity. Her current focus is on improving health literacy and addressing educational barriers for families navigating childhood-onset lupus (SLE).



PUJA UMARETIYA, M.D. – PEDIATRIC HEMATOLOGIST-ONCOLOGIST, CHILDREN'S HEALTH

Dr. Umaretiya's research centers on how health-related social needs shape outcomes for children with cancer and their families. She is developing parent-partnered interventions to better support families during treatment, including ASSIST, a benefits navigation tool currently in clinical trial at UT Southwestern and Children's Medical Center Dallas. Her work is supported by funding from UT Southwestern's Dean's Scholar in Clinical Research program, the UTSW-Parkland Health Equity Scholars Program and the American Society of Clinical Oncology.

Publications

PUBLICATION SPOTLIGHT



Williams, Stormee, et al.

"Disparities in patient family social determinants of health in a large urban pediatric health system." *Journal of Pediatric Health Care*, vol. 38, no. 2, Mar. 2024, pp. 172–183

This study analyzed electronic health records from August to December 2022, capturing data from more than 15,000 families. More than half of respondents reported at least one social need, with lack of social support emerging as the most prevalent. The analysis also revealed disparities across race, ethnicity, language preference and insurance type – reinforcing the critical need for targeted, equity-driven interventions.

ADDITIONAL PUBLICATIONS

Williams S, Hill K, Owen B, Melton F. "Implementing Social Determinants of Health Data Collection in a Large Urban Pediatric Hospital Setting." *Children's Health*. 2024. childrens.com/footer/about/health-equity/health-equity-initiatives

Williams, S., Xie, L., Hill, K., Mathew, M. S., Perry, T., Wesley, D., & Messiah, S. E. (2021). "Potential utility of school-based telehealth in the era of COVID-19." *Journal of School Health*, 91(7), 550-554.

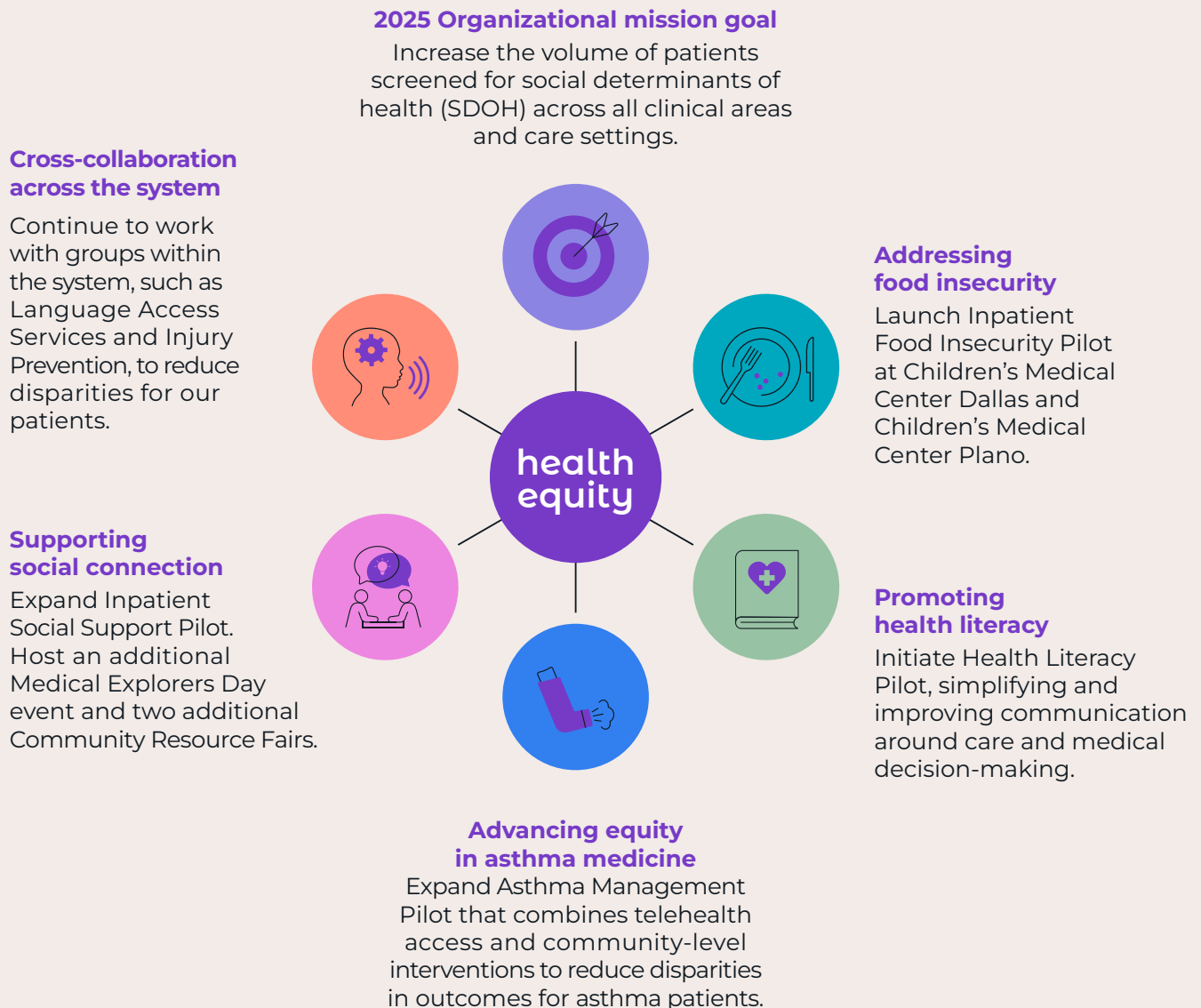
Williams, S., Hill, K., Xie, L., Mathew, M. S., Ofori, A., Perry, T., Wesley, D., & Messiah, S. E. (2021). "Pediatric telehealth expansion in response to COVID-19." *Frontiers in Pediatrics*, 9, 642089.



looking ahead: watch us growSM

As we reflect with gratitude and pride on the progress made in 2024, we remain focused on the work still ahead. Our path forward is grounded in purpose as we continue to advance health equity both within our system and beyond our walls, ceaselessly working to ensure every child we serve has the opportunity to reach their highest level of health.

In 2025, our efforts will be guided by our vigorous commitment to equitable health care in action. The following infographic demonstrates our priorities for the coming year and sets the pace for our continued journey toward a more connected, compassionate and equitable care experience for every child who enters our spaces.



conclusion

Thank you for exploring the 2024 Health Equity Impact Report. We believe the content of these pages more than just reflects our progress as an institution – it provides a window into a monumental movement taking shape across our system and community. From our first screenings to the latest pilot programs, in hospital corridors and in school gymnasiums, our work in health equity continues to grow, evolve and take root in new places.

This work is far from finished, but what we've accomplished together in 2024 affirms what's possible when passion meets purpose. Each milestone captured in this report is a bold demonstration of what can be achieved when we approach care through an equitable lens.

Together, we're not simply imagining a better future, we are taking steps to make it real.



appendices

Appendix I: glossary of terms

In health care, we often use terms, acronyms and concepts that may be unfamiliar. This glossary is designed to ensure all readers – whether team members, partners or community stakeholders – have a shared understanding of the key terms used throughout this report.

ENTERPRISE CARE MANAGEMENT (ECM)

A multidisciplinary team at Children's Health that works across departments to support the health care and social needs of patients and families – connecting them to services, resources and coordinated care.

FEDERALLY QUALIFIED HEALTH CENTER (FQHC)

A federally funded, nonprofit community health center that provides primary care services in underserved areas. FQHCs serve patients regardless of their ability to pay, often offering sliding-scale fees based on income.

HEALTH EQUITY

The fair and just opportunity for every person to achieve their highest level of health.

HEALTH DISPARITY

Differences in health outcomes and access to care linked to social, economic and environmental factors. These gaps can make it more difficult for some children and families to receive the care they need.

HEALTH INEQUITY

Unfair, avoidable and unjust differences in health outcomes – such as life expectancy, quality of life, disease burden or access to treatment – often shaped by a person's social, economic or environmental conditions.

INTERVENTION

An action or program implemented to improve or protect health status. Interventions can support individuals, families, communities or systems, and they are often used to address health inequities and promote long-term well-being.

SOCIAL DETERMINANTS OF HEALTH (SDOH)

The conditions in which people are born, grow, work, live and play – including access to food, housing, education, transportation and economic stability. These factors influence a wide range of health outcomes and are shaped by the distribution of power, money and resources.



At Children's Health, we screen for seven SDOH domains:

- **Health literacy** – A person's ability to find, understand and use health care information to make appropriate health decisions and follow treatment instructions.
- **Housing insecurity** – Unstable or unsafe housing conditions, including high housing costs, overcrowding, poor housing quality and the risk of eviction or homelessness.
- **Financial insecurity** – A state in which an individual or family struggles to meet financial obligations or feels uncertain about their financial future.
- **Food insecurity** – Limited or uncertain access to a sufficient quantity of affordable, nutritious food.
- **Social support** – Assistance, comfort or encouragement received from social networks, including family, friends, neighbors and community members. Social support can be emotional, informational or practical in nature and plays an important role in overall well-being.
- **Tobacco use** – The consumption or inhalation of tobacco products, including cigarettes, cigars, pipes, e-cigarettes and smokeless tobacco (e.g., snuff or chewing tobacco).
- **Transportation insecurity** – Limited or inconsistent access to safe, reliable and affordable transportation, which may impact a person's ability to access essential services and opportunities.





Learn more at childrens.com/healthequity.