SOCIAL & COMMUNITY CONTEXT

SOCIAL & COMMUNITY CONTEXT

- Social Support
- Isolation & Integration
- Trauma
- Stress
- Community Empowerment
- Racism & Oppression
- Discrimination & Inequities
- Stigma
- Incarceration
- Institutionalization

The **Social and Community Context** domain of the SDOH includes social relationships, cultural norms, and social systems. While these factors are relatively abstract, they have a significant influence on health and must not be overlooked in research and programming. In this section, survey questions pertaining to social circumstances, supports, responsibilities, and experiences are reviewed. These topics were also discussed in the focus groups. Pertinent quotes from the focus groups are presented at the end of this section.

SOCIAL SUPPORTS

There is growing evidence that having high-quality relationships and social connections decreases risk of death and disease [22]. Perceived levels of social supports along with other health influences and outcomes were reviewed and analyzed.

Respondents were asked how often they could rely on friends or family for *Emotional Support*, *Having Fun*, and *Practical Help*. They responded on a scale from *Never* to *Always*, to which values of 0-4 were assigned. The shapes on the charts below represent averages of these values for each type of support.

0 = Never   1 = Rarely   2 = Sometimes   3 = Often   4 = Always

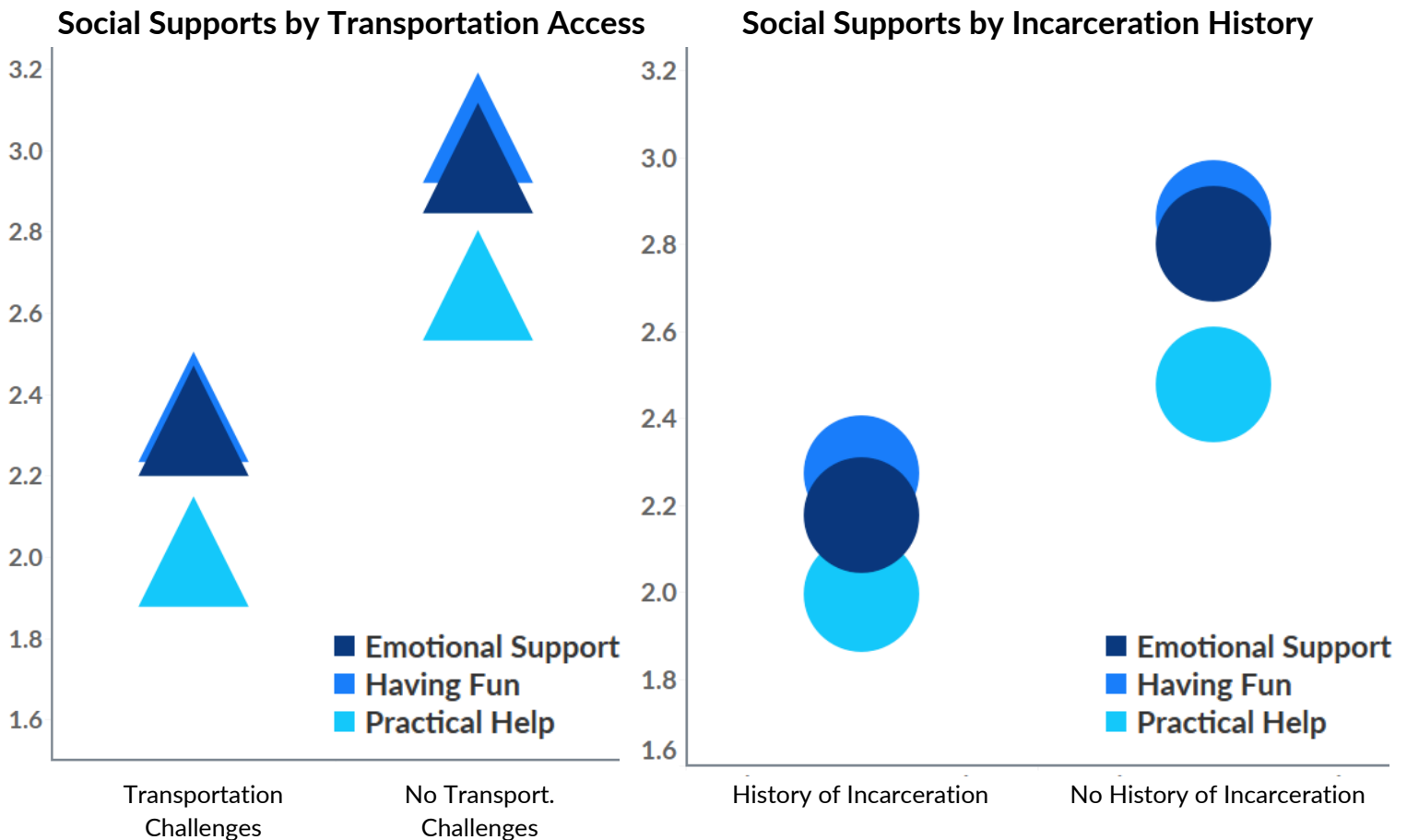**Social Supports by Age**

Age in Years
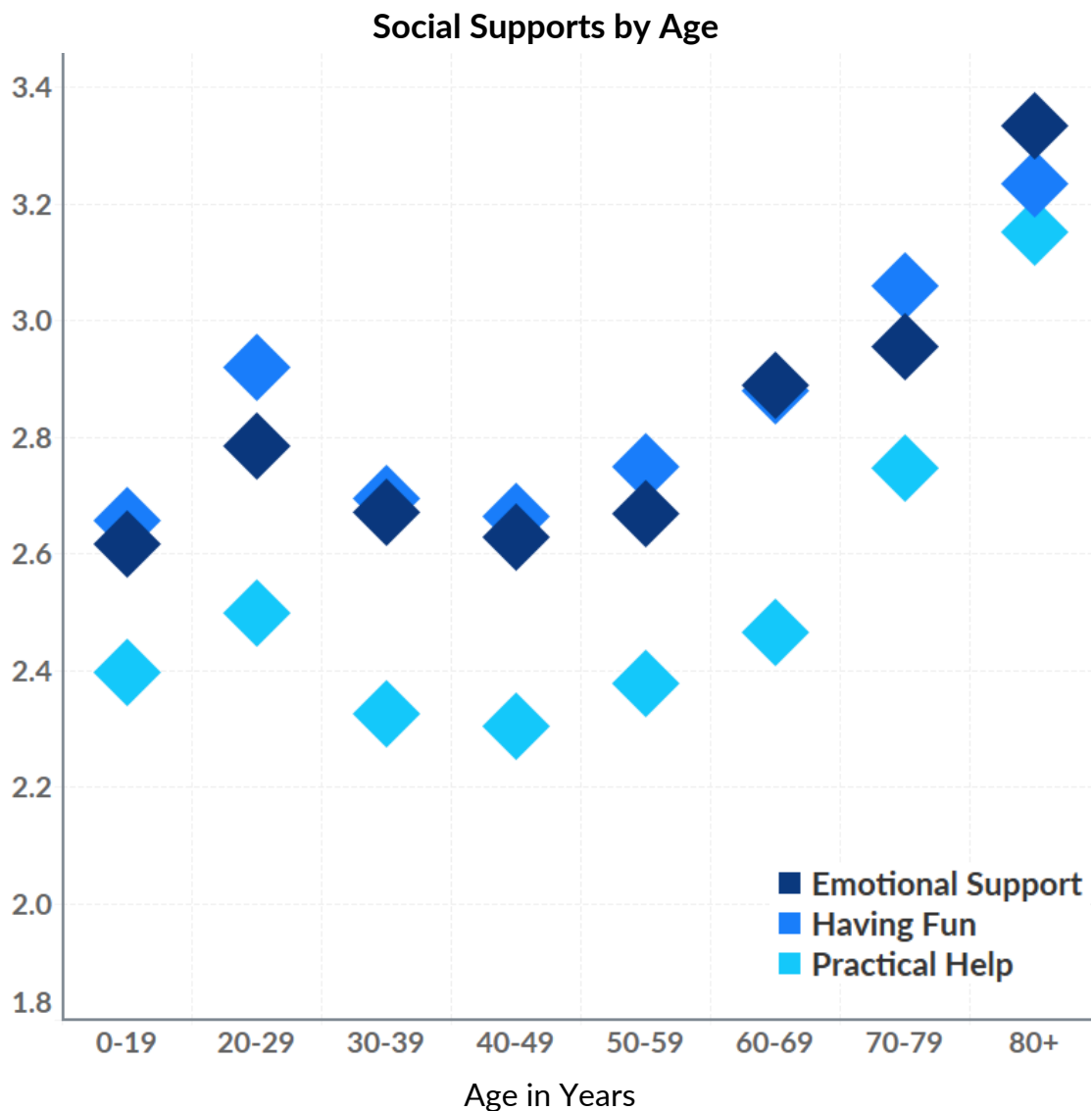
Respondents ages 80+ reported notably higher levels of social supports than other age groups. However, greater differences are observed when the values are disaggregated by socioeconomic factors, experiences, and responsibilities than by basic demographics or immigration status. See more in Appendix A.

SOCIAL SUPPORTS

Level of Social Support Varies According to Assets, Challenges, and Experiences

Responses related to social support varied among respondents with different assets, challenges, and life experiences. Assets examined in the survey included homeownership, access to a personal vehicle, and having enough money to save or invest some. Challenges assessed in the survey included barriers to transportation and employment. Life experiences explored in the survey included incarceration history, caregiver status, and disability status. Respondents with fewer assets and more challenges reported that they have friends or family they can rely on for *Emotional Support*, *Having Fun*, and *Practical Help* less consistently than those with more assets and fewer challenges. Perceived available support from friends and family was rated on a scale from *Never* to *Always*, to which values of 0-4 were assigned. The shapes on the charts below represent averages of these values for each type of support.

<div align="center">0 = Never   1 = Rarely   2 = Sometimes   3 = Often   4 = Always</div>

Social Supports by Transportation Access

Social Supports by Incarceration History

Respondents who are *Employed* indicated <u>higher</u> social supports than those who are *Unemployed*. Of those who are *Unemployed*, social support was ranked <u>lower</u> among the respondents who are *Unemployed Due to Caregiver Responsibilities* or *Currently Looking for Work* compared to those *Not Looking for Work* or *Retired*.

SOCIAL SUPPORTS

Perceived available support from friends and family, which was rated on a scale from *Never* to *Always*, varied by whether or not respondents reported health conditions as well as by different life experiences. The shapes on the social support charts represent averages of these values for each type of support by different health statuses and experiences.

0 = Never 1 = Rarely 2 = Sometimes 3 = Often 4 = Always

Respondents who reported *Struggling With Substance Use*, on average, had social support values that were close to those who reported experiencing both *Mental and Physical Illnesses*, which was markedly <u>lower</u> than those who reported *Not Struggling With Substance Use*.

Social Supports by Response to "Are You Struggling with the Use of Any Kind of Substance?"
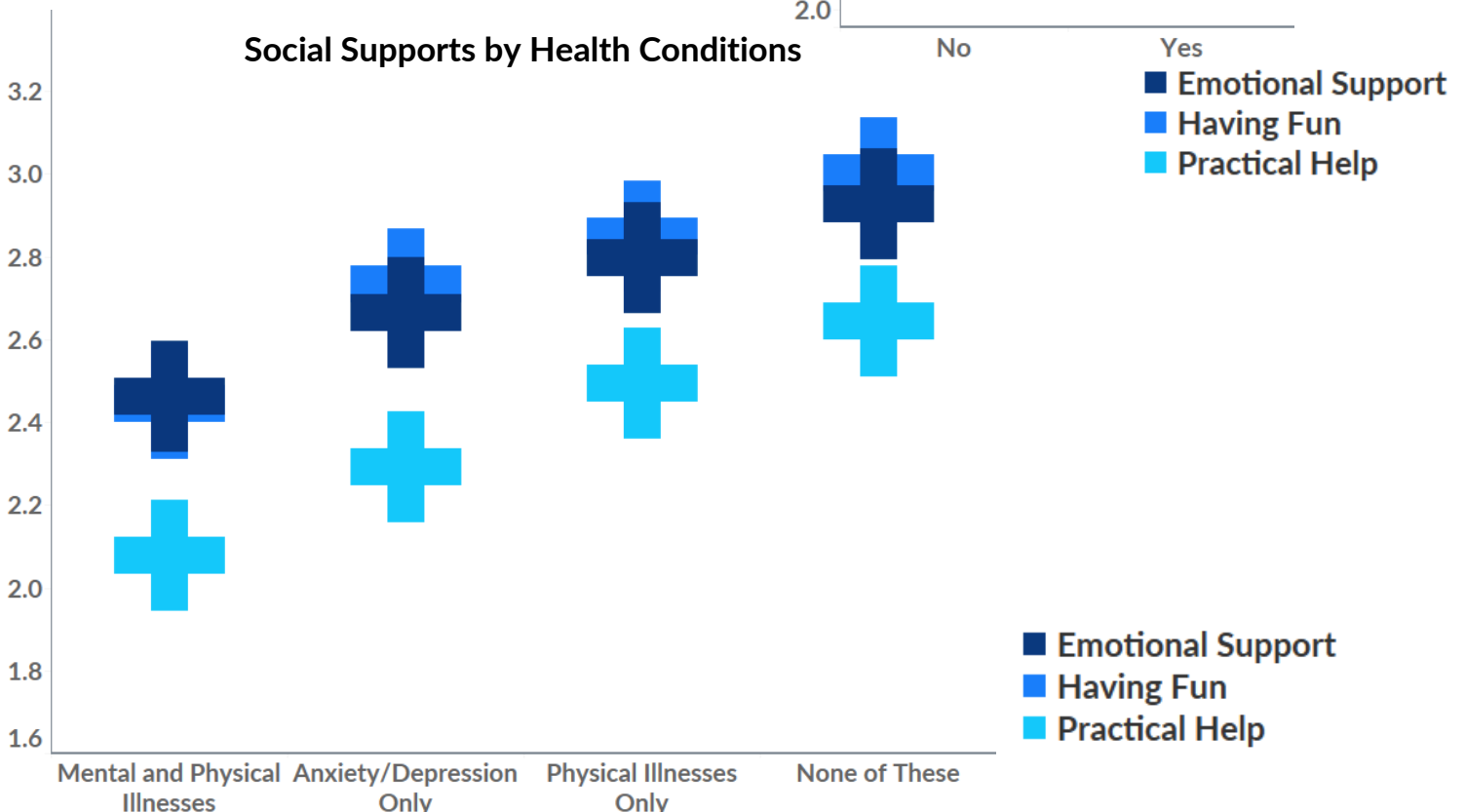

A Closer Look at Health Conditions

Of all the health conditions listed in the question, respondents who reported having *Kidney Disease* or *Diseases of the Liver* reported the <u>lowest</u> levels of social supports (see Appendix G, Question 34).
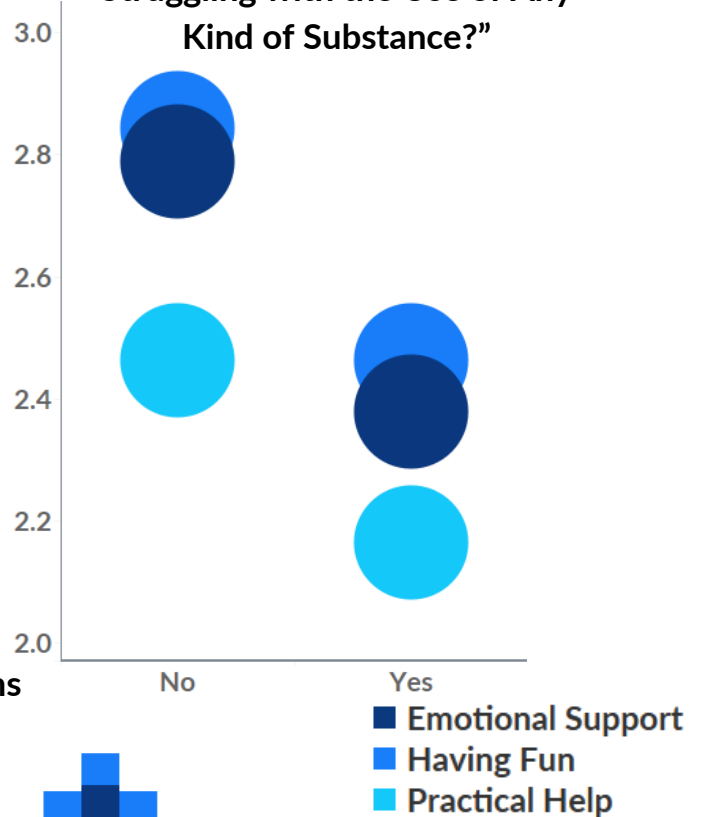
Social Supports by Health Conditions

SOCIAL SUPPORTS

Proximity to resources and other people may influence the levels of social support that are both needed and available to an individual. Other factors within a given geographic area, such as average age of residents may influence the combined level of needed and available social supports in a geographic community. On this page the average level of reported social supports within Erie County ZIP codes are examined.

Combined Social Supports

Perceived available support from friends and family was rated on a scale from *Never* to *Always*, to which values of 0-4 were assigned.

For this map, the values of the 3 types of social supports (*Emotional Support*, *Having Fun*, and *Practical Help*) were combined and averaged per ZIP code. A value of 4 on this map is represented by blue which fades to grey and then white as the value decreases.

2.6

was the average social support value in the ZIP codes within the City of Buffalo, while 2.8 was the average social support value in the ZIP codes outside the City of Buffalo.

Social Supports by ZIP Code

■ No data
Average of Social Supports

0.0   4.0

0 = Never   1 = Rarely   2 = Sometimes
3 = Often   4 = Always
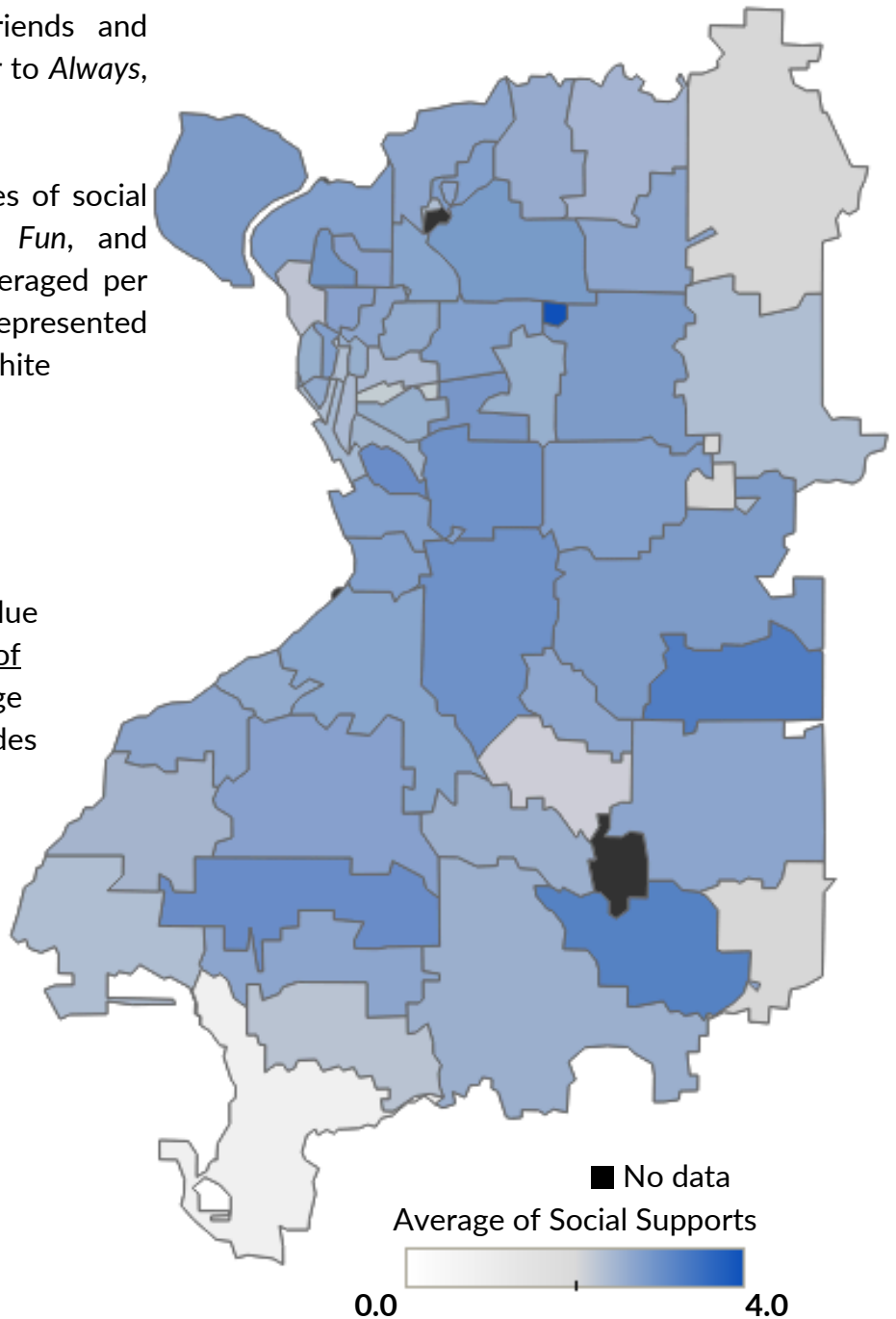
Some ZIP codes have fewer than 10 respondents. Therefore, the rates depicted on the map may not be representative of the community within these areas.

CAREGIVERS

Care within families is an integral part of a functioning society. Being a family caregiver for children, older adults, or people who have illnesses or disabilities may influence the caregiver's ability to lead a healthy life. On this page, challenges experienced by caregivers are explored, including the financial situations reported by respondents who selected *I take care of children or another person without pay* when asked why they were *Unemployed*.

Unemployed Caregivers' Ability to Pay for Expenses

40% 45% 15%

Not Enough Money Just Enough Money More than Enough Money
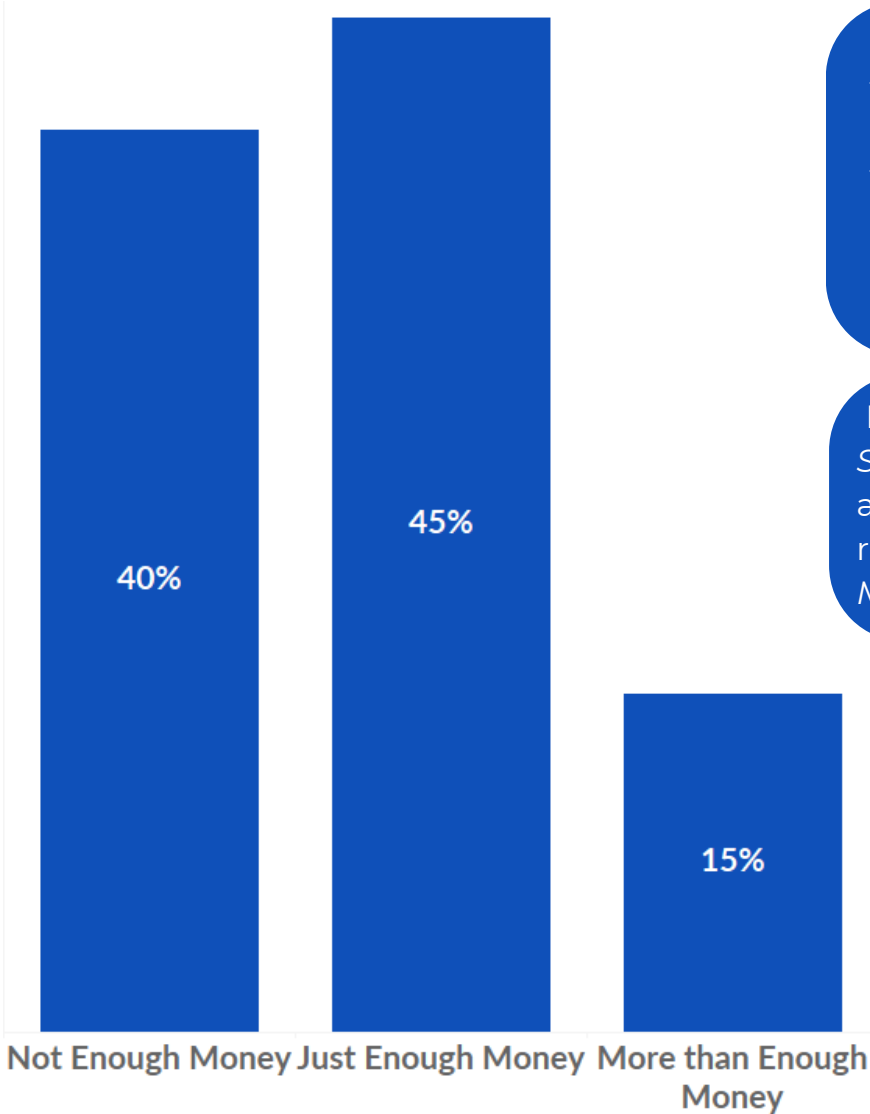
Respondents who reported being a family caregiver for an adult were nearly twice as likely to respond that they are *Struggling With Substance Use* (17%) as respondents who did not report being a family caregiver for an adult (9%).

Respondents with a *History of Military Service* were twice as likely (14%) to be a family caregiver for an adult as respondents with *No History of Military Service* (7%).

When asked about their financial situation, respondents who reported that they are *Unemployed* because they are an unpaid caregiver were 22% more likely than the pool of total respondents to report that they have *Not Enough Money* to pay for day-to-day expenses and 22% less likely to report that they have *More Than Enough Money* to pay for day-to-day expenses.

CAREGIVERS: FINDING CARE

The ability to find care for family members may influence whether or not a caregiver can participate in the workforce, become involved in the greater community, or engage in healthy habits.

Respondents who indicated that they are responsible for *Child Care* or *Adult Care* were asked about challenges to finding care. Respondents were able to select multiple challenges. However, if a respondent selected *No Challenges* as well as any kind of challenge, their response was considered a conflicting response and excluded. The bubbles in the charts below display the number of times each response was selected.
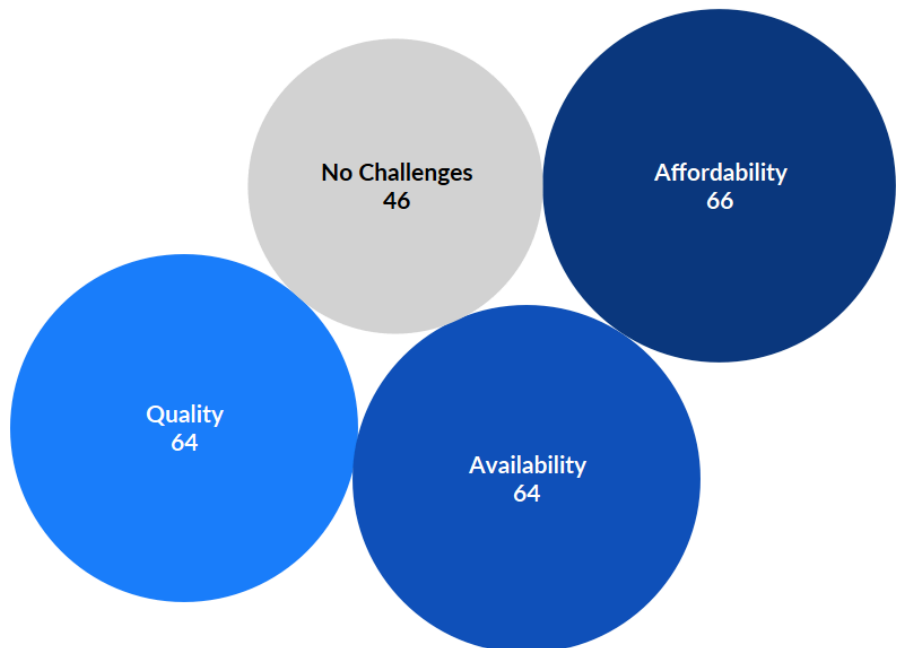
Reported Challenges to Finding Child Care

No Challenges
168

Affordability
267

Quality
197

Availability
191
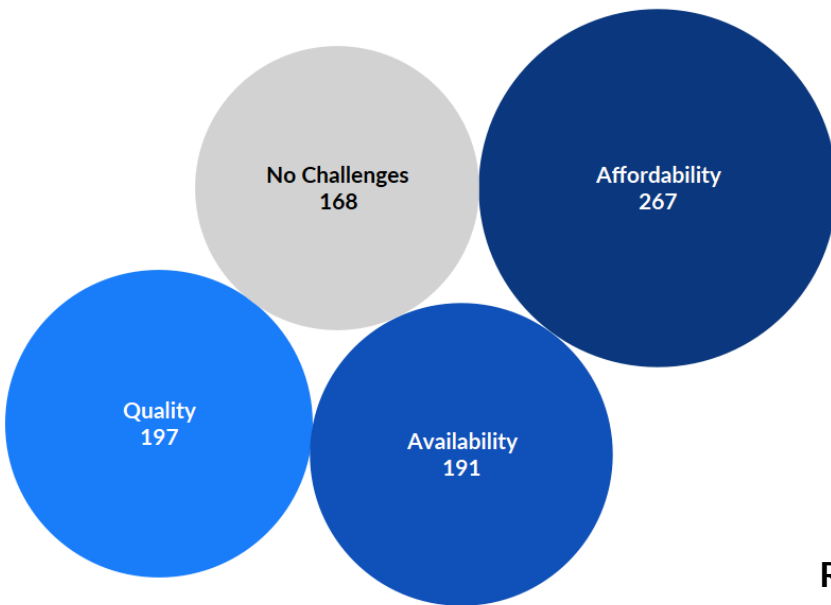
25%

of respondents who reported having young children said that *Lack of Child Care* is a challenge to accessing health care.

Reported Challenges to Finding Adult Care

No Challenges
46

Affordability
66

Quality
64

Availability
64

### The Affordability Challenge
Affordability of care was the most common challenge reported by caregivers of both adults and children, though at a higher rate for caregivers of children.

CAREGIVERS AND SOCIAL SUPPORTS

Perceived available support from friends and family was rated on a scale from *Never* to *Always*, to which values of 0-4 were assigned. The shapes on the social support charts represent averages of these values for each type of support, comparing respondents who indicated that they have caregiving responsibilities to those who did not. The numerical values represent the following:

0 = Never   1 = Rarely   2 = Sometimes   3 = Often   4 = Always

Social Supports by Caregiver Responsibilities

■ Emotional Support
■ Having Fun
■ Practical Help
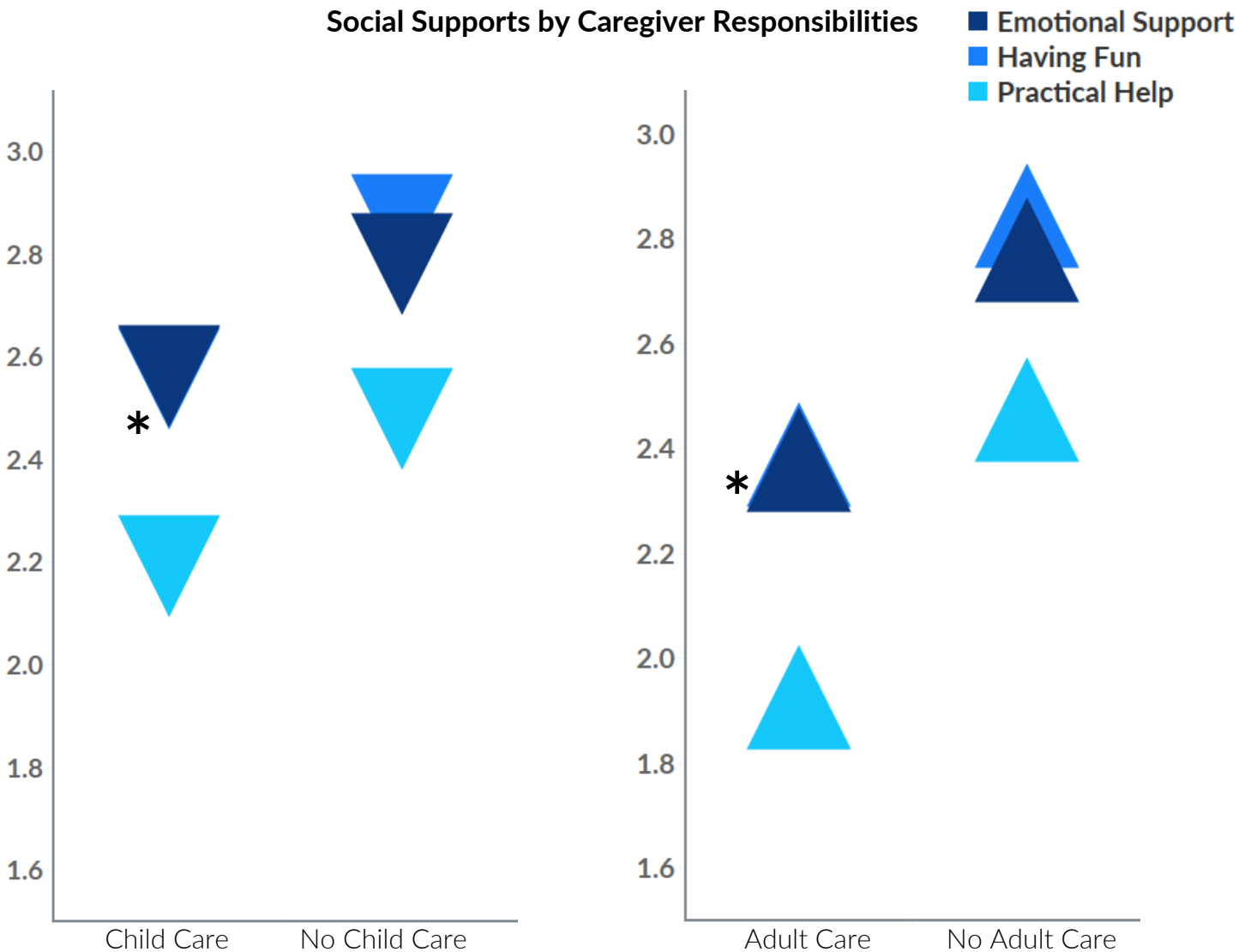
✳ *Emotional Support* and *Having Fun* have nearly identical values for those with in the *Child Care* and *Adult Care* categories.

2.7
Is the value of the 3 types of social supports averaged among respondents who are <u>not</u> responsible for *Child Care* or *Adult Care.*

2.5
Is the value of the 3 types of social supports averaged among respondents with *Child Care* responsibilities.
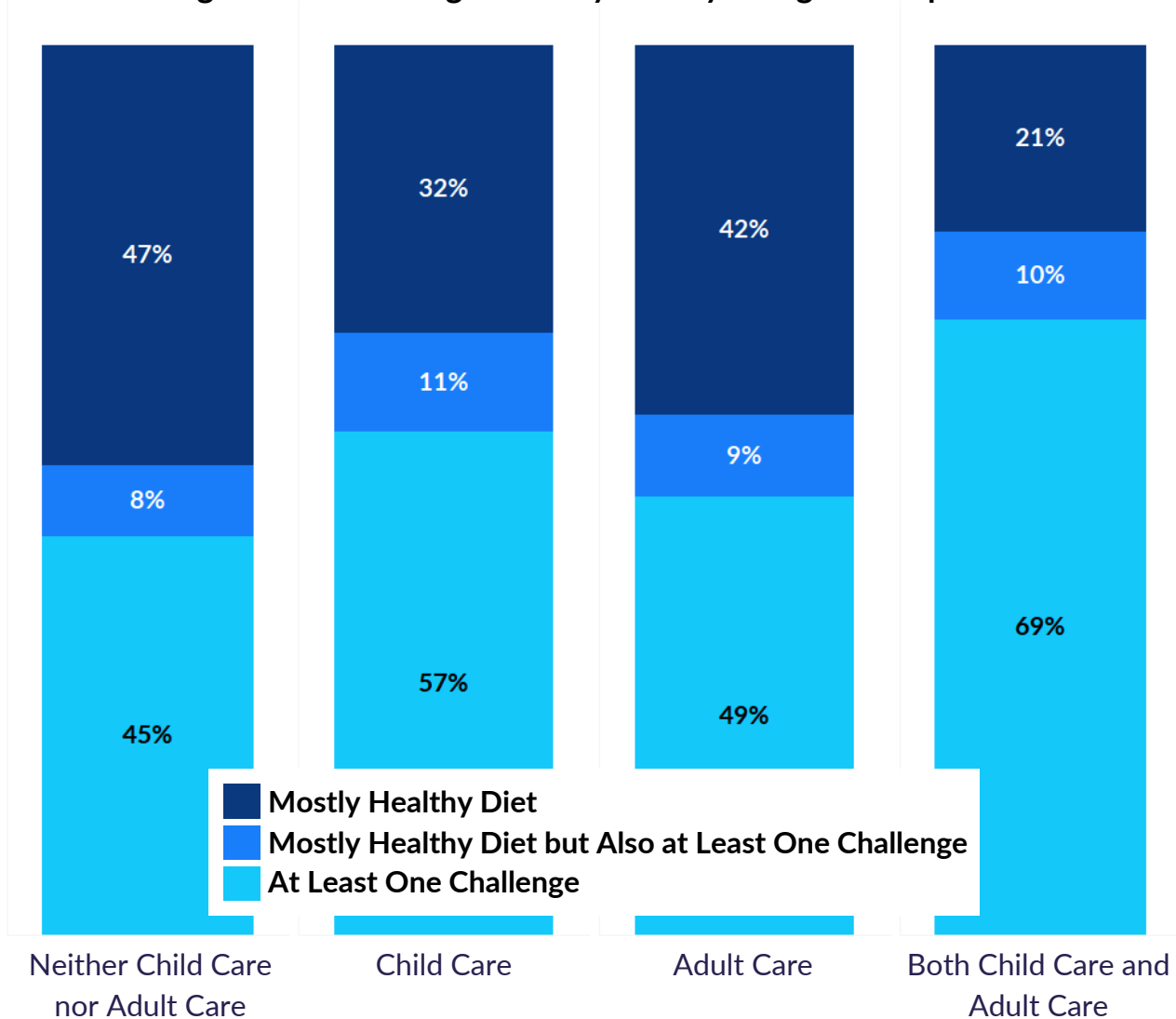
2.3
Is the value of the 3 types of social supports averaged among respondents with *Adult Care* responsibilities.

CAREGIVERS

Respondents were asked to describe their diet, including what would help them eat healthier. One option was *I feel that my diet is mostly healthy*. Other answer choices explored possible barriers and challenges to a healthy diet, including *Knowledge* of healthy foods, not liking the *Taste* of healthy foods, not having *Time* to cook healthy foods, *Availability* of healthy foods in their community, not having adequate *Transportation* to access healthy foods, and not having the *Interest* to improve their diet. Respondents could select as many responses as they felt applied to them. The chart below shows the responses based on caregiver responsibilities grouped into the categories displayed in the key.
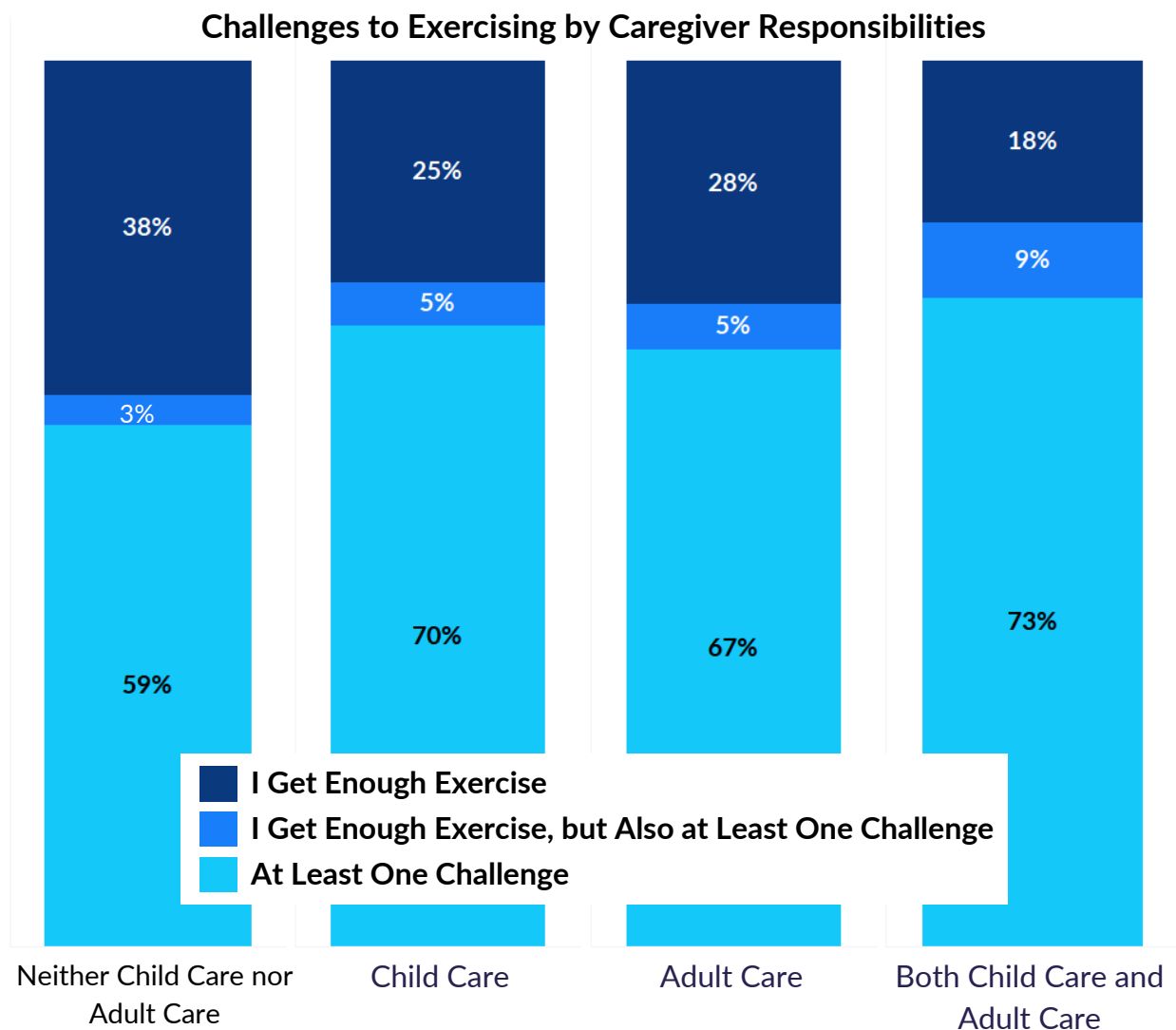
Challenges to Maintaining a Healthy Diet by Caregiver Responsibilities

47%	32%	42%	21%
8%	11%	9%	10%
45%	57%	49%	69%

Key:
- Mostly Healthy Diet
- Mostly Healthy Diet but Also at Least One Challenge
- At Least One Challenge

Neither Child Care nor Adult Care	Child Care	Adult Care	Both Child Care and Adult Care

Not having enough *Time* to cook and *Affordability* of healthy eating were the most reported challenges across the board. Respondents who reported caring for young children or living with an adult who requires constant care reported more overall challenges to maintaining a healthy diet. See Appendix D for a further breakdown of the types of diet challenges reported by respondents with caregiver responsibilities.

CAREGIVERS

Respondents were asked to describe their level of physical activity, including what would help them exercise more if they don't feel they exercise enough. One option was *I feel that I get enough exercise.* Other answer choices explored possible barriers to exercising, including lack of *Gym Access*, lack of *Time*, lack of *Knowledge* about exercise, lack of neighborhood *Safety*, *Pain or Illness*, and not having the *Interest* to exercise more. Respondents could select as many responses as they felt applied to them. The chart below shows the responses based on caregiver responsibilities grouped into the categories displayed in the key.

Challenges to Exercising by Caregiver Responsibilities

	Neither Child Care nor Adult Care	Child Care	Adult Care	Both Child Care and Adult Care
I Get Enough Exercise	38%	25%	28%	18%
I Get Enough Exercise, but Also at Least One Challenge	3%	5%	5%	9%
At Least One Challenge	59%	70%	67%	73%

Key:
- I Get Enough Exercise
- I Get Enough Exercise, but Also at Least One Challenge
- At Least One Challenge

Lack of *Time* was the challenge to exercise reported the most across the board. Lack of *Gym Access* was the second most selected response from respondents who are responsible for young children or live with an adult requiring care. The second most common challenge reported by people in neither of those categories was *Pain or Illness.* See Appendix D for a further breakdown of the types of challenges to exercise reported by respondents with caregiver responsibilities.
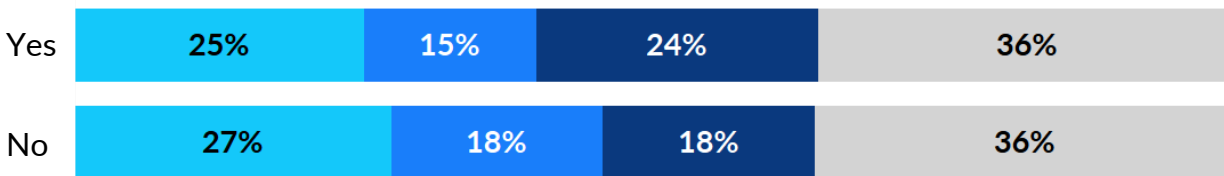
CAREGIVERS

On this page, the general health of respondents who reported being responsible for young children or living with an adult requiring care compared to those without caregiver responsibilities are explored by examining answers to the question, "Do you experience any of the following health conditions?" Responses other than *Anxiety/Depression* were categorized into the aggregate category *Physical Illnesses* and were then compared to responses including *Anxiety/Depression Alone* and responses that included both *Mental and Physical Illnesses.*

■ Physical Illnesses Only   ■ Anxiety/Depression Alone   ■ Mental and Physical Illnesses   ■ None of These
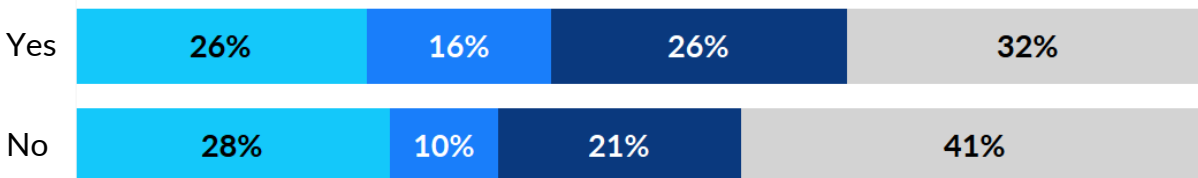
Reported Health Conditions Among Respondents Ages 20-49 by Child Caregiver Status

Responsible for young children:

	Physical Illnesses Only	Anxiety/Depression Alone	Mental and Physical Illnesses	None of These
Yes	25%	15%	24%	36%
No	27%	18%	18%	36%

Reported Health Conditions Among Respondents Ages 20-49 Who Have Young Children

Challenges finding child care:

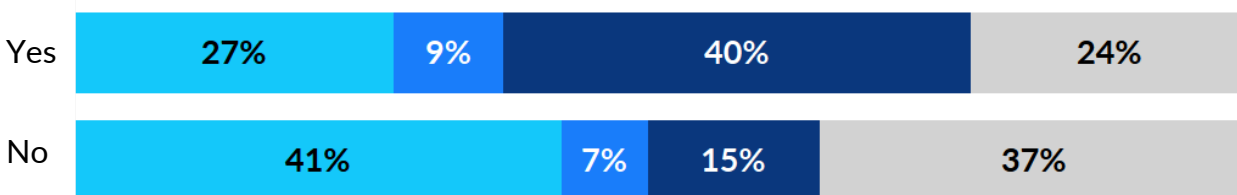|	Physical Illnesses Only	Anxiety/Depression Alone	Mental and Physical Illnesses	None of These
Yes	26%	16%	26%	32%
No	28%	10%	21%	41%

Reported Health Conditions by Adult Caregiver Status

Lives with adult requiring care:

	Physical Illnesses Only	Anxiety/Depression Alone	Mental and Physical Illnesses	None of These
Yes	34%	7%	30%	28%
No	37%	12%	19%	32%
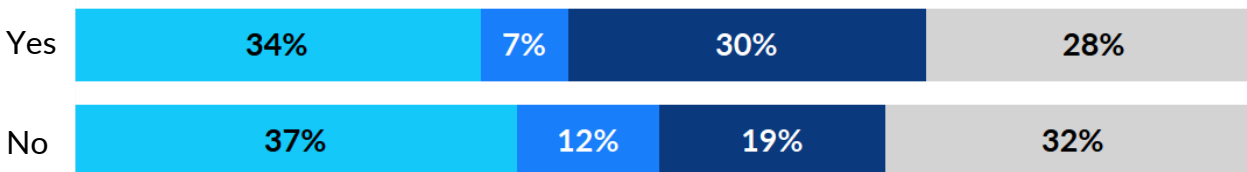
Reported Health Conditions Among Respondents Who Live with an Adult Requiring Care

Challenges finding care for this adult:

	Physical Illnesses Only	Anxiety/Depression Alone	Mental and Physical Illnesses	None of These
Yes	27%	9%	40%	24%
No	41%	7%	15%	37%

Caregivers of children or adults were less likely to report *Physical Illnesses* than non-caregivers. However, caregivers had higher reported rates of *Anxiety/Depression,* especially if they experienced challenges finding child care.
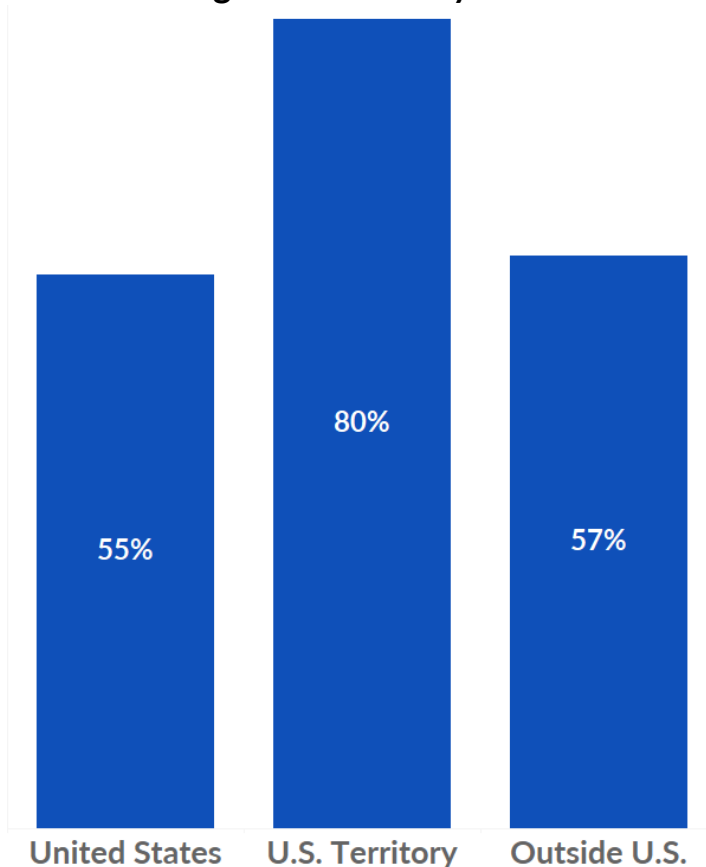
IMMIGRATION

People move to Erie County from all over the world. Individuals coming from different countries or U.S. territories leave their homes for a variety of reasons, arrive here under various circumstances, and have different experiences while living in Erie County which influence their health. To explore these different experiences, respondents were asked if they were born in the *United States*, a *U.S. Territory*, or another country (*Outside U.S.*) and compared them by SDOH factors. The term "immigration" here includes anyone who was born in a *U.S. Territory* or *Outside the United States.*

Respondents reported challenges to a healthy diet at a similar rate, regardless of place of birth. Of the challenges reported, respondents born *Outside the U.S.* or in a *U.S. Territory* were more likely to report a lack of *Availability* and *Knowledge* of healthy food as challenges than those born in the *United States*, who were more likely to report lack of *Time* for cooking as a challenge.

Respondents born in a *U.S. Territory* reported challenges to exercising at a slightly higher rate than those born in the *United States* or *Outside the U.S.* They were also the most likely to report lack *of Gym Access* as a challenge while those born in the *United States* were the <u>least</u> likely to report neighborhood *Safety* and the <u>most</u> likely to report *Pain or Illness* as a challenge to exercising.

Reported At Least One Challenge to Accessing Health Care by Place of Birth

Place of Birth	Percent
United States	55%
U.S. Territory	80%
Outside U.S.	57%

Health Conditions by Place of Birth

Immigration status compared with health conditions that were grouped into the following categories.

Health Conditions	U.S.	U.S. Territory	Outside U.S.
None of These	31%	29%	48%
Anxiety/Depression Alone	12%	15%	8%
Physical Illnesses Only	37%	45%	34%
Mental and Physical Illnesses	21%	11%	10%

24%

of respondents who moved to the United States *As a Child* reported *Anxiety/Depression*, while 15% of respondents who moved to the United States *As an Adult* reported *Anxiety/Depression.*

FOCUS GROUPS ON SOCIAL & COMMUNITY CONTEXT

Stigma, Discrimination, and Being Misunderstood
Every focus group shared experiences about being discriminated against or misunderstood. While the basis for discrimination varied, each group reported practical and emotional challenges as a result of it.

"We get grouped for one. There's no understanding that, you know, not all of us are Black community and not all of us come from the same area. Like I'm Puerto Rican, [other participant] is Dominican. Even though we both are Latinas, we both have different experiences just based on where we grew up, where our families are from and how we were raised. We were not all raised in the same learning."

-Hispanic/Latino Focus Group

"I am Black, and depending on who you ask, I either come across as male or come across as female or question mark, which makes people very uncomfortable. And when they're uncomfortable, that puts my safety at risk."

-Trans and Nonbinary Focus Group

"So we're all created differently, and I feel like there's a huge misunderstanding [...] that this life is a choice, and it's not a choice. This, this is who we are."

-LGBTQ+ Focus Group

"Sometimes people act like, you don't know what you're doing. [They act] like Black fathers don't exist and actually want to be a part of their child life and actually do they job."

-Black Fathers Focus Group
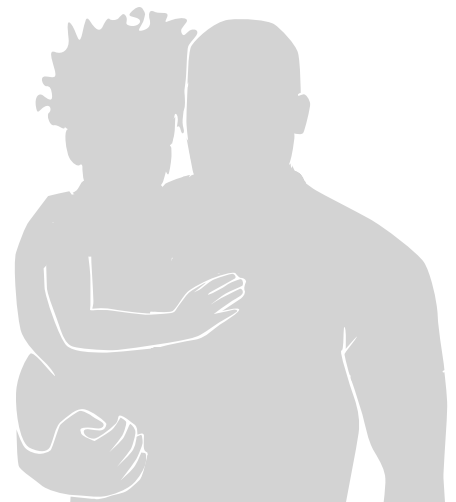
FOCUS GROUPS ON SOCIAL & COMMUNITY CONTEXT

Social Supports

Social supports were expressed as an asset. Some focus group participants shared how social supports have helped them while others discussed the need for more support and interaction with friends, family, and community members.

"And a lot of times, too, having to rely on like family and things like that as being part of this community, it comes very far and few for some folks. Some folks have literally no one, and they just rely on their friends—their LGBTQ+ friends—for that support, or for finances, for assistance, for guidance."

-LGBTQ+ Focus Group

"Socialization is one of the biggest things that affect your health. And people don't realize it if you can't get out, and just the idea of talking to somebody, how that uplifts your spirits. So you want to eat, you want to get out. You want to—you want to do things. We are very, very isolated here that way."

-Rural Older Adults Focus Group
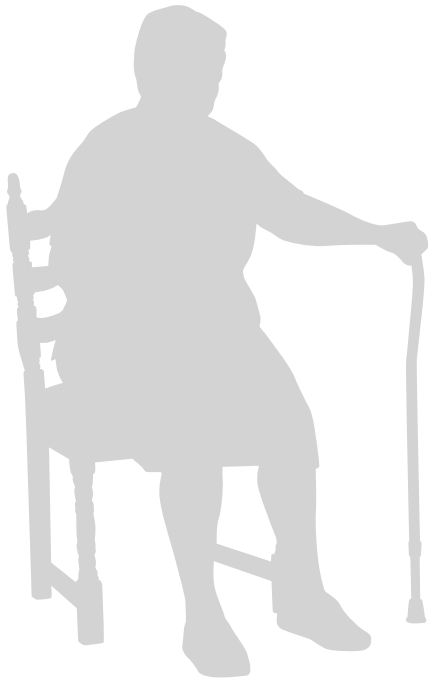
FOCUS GROUPS ON SOCIAL & COMMUNITY CONTEXT

Caregiving

The ECOHE Community Survey assessed challenges to healthy living by caregiving responsibilities. Respondents who indicated caregiving responsibilities tended to experience more challenges within SDOH factors and healthy living than those who did not indicate any caregiving responsibilities. Conversations with caregivers in various focus groups provided some insight to these challenges.

"We need more resources for senior citizens that are taking and raising their grandchildren, because that's not an easy job for a senior citizen. They find—we find ourselves being responsible for children, you know, for our grandchildren."

-Black Older Adults Focus Group
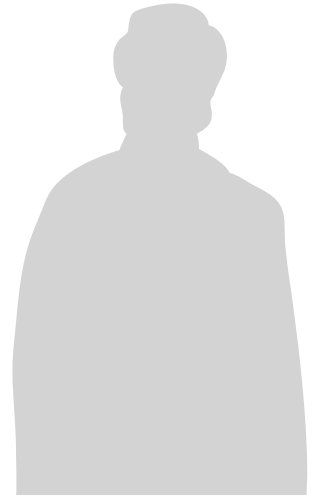
"We're juggling every task at every single moment. [...] You know, it can get very overwhelming and very lonely and isolating. [...] I am very busy. Very tired. Us caregivers need care."

- Rural Caregivers Focus Group
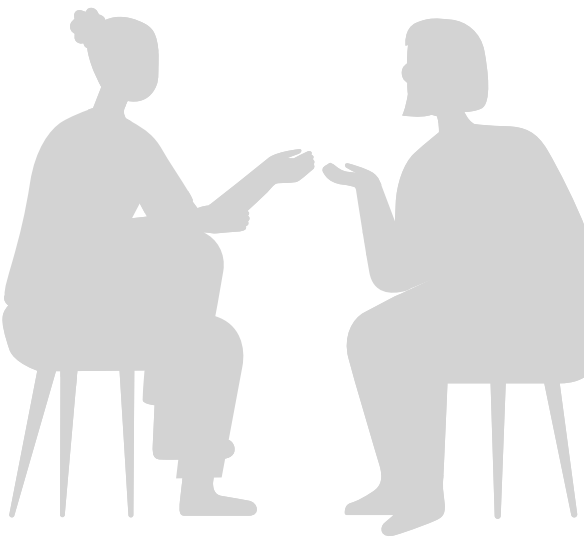
Systemic Challenges

Incarceration falls within the Social and Community Context domain of the SDOH factors. In speaking with incarcerated individuals, many of the challenges involving their incarceration and community reintegration occur at the systems level.

"And then you want to enroll your children in sports and do things like that to keep them occupied and out of the streets. But then, you know, sporting events and everything else costs a butt-load of money, so people that are single parents and working minimum wage jobs, they can't afford that. So then the kids are on the streets [...] and they're going to be the next ones incarcerated because it's just a slippery slope of fuckery."

-Incarcerated Women Focus Group