

# BSN Students' Perceptions of Social Determinants of Health

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April 21, 2018

Nursing Education Research Conference 2018

# Disclosure

- Conflict of interest statement: The authors certify they have no affiliations with any organization with any financial interest (such as honoraria and educational grants), or non-financial interest (such as personal or professional relationships) in the subject matter discussed in this presentation.

# Learner Objectives

- At the conclusion of this presentation, the learner will:
  - Gain a better understanding of how BSN students' perceptions of Social Determinants of Health (SDOH) evolve
  - Define SDOH that may be incorporated into nursing care
  - Identify and raise awareness of SDOH

# Background

- The Culture of Health calls for improving population health to improve Social Determinants of Health.



# Purpose/ Aims

- Purpose of this study: To explore BSN students' knowledge of SDOH.
- The aims of this study were:
  - To discover students' role perceptions of SDOH, and
  - To determine what learning occurred between baseline and at completion of the BSN education program

# Methods

- IRB approval
- Scholarly inquiry, longitudinal, qualitative research
- Two surveys with assessment times at baseline (beginning of junior year of a 4-year program) and at completion of the BSN program

# Participants

- One nursing program's entire cohort for 2015-2017 (N=100)
- 90 voluntary participants
- Enrolled in BSN education program





# Survey #1 (at baseline)

- What social determinants are you aware of that contribute to poor health?
- What do you imagine is the nurse's responsibility, if any, to identify and address change in social determinants of health for clients?
- What have you already done to change social determinants of health?



# Survey #2 (at program completion)

- What social determinants are you aware of that contribute to poor health?
- What do you imagine is the nurse's responsibility, if any, to identify and address change in social determinants of health for clients?
- How has your perception of the nurse's responsibility in addressing social determinants that contribute to poor health changed over the last year?

# Data Analysis

- Line-by-line analysis to identify common themes and categories, and identifying differences.
- This process was repeated after the second data collection.
- Findings between the data analyses of both surveys were used to determine when change in awareness occurred and if this change was related to learning that occurred through the nursing education curriculum.



# Results

- A majority of the students initially equated social conditions with lifestyle choices and individual behaviors, (e.g., smoking, lack of exercise, diet).
  - The nurse's responsibility was to educate and display virtues (e.g., optimism, kindness, open-mindedness, helpfulness).
  - Prior activities to change SDOH focused on personal choices, rather than advocating for others, (e.g., moving to a new town, stopped associating with bad influences).
- A small number of participants identified social determinants that contribute to poor health, (e.g., poverty, lack of education).
  - The nurse's responsibility was patient support, (e.g., encouraging patients to further education).

# Implications

- Prior activities of this cohort included
  - serving in the military,
  - going to war,
  - working with community outreach,
  - volunteering,
  - fund-raising,
  - donating money, and
  - raising awareness with social events.
- These activities raised awareness of the impact of SDOH

# Conclusion

- Participants' responses evolved over time to incorporate a broader definition of SDOH
- Participants' acknowledged an expanded role in SDOH
- Nursing education curriculum needs modifications regarding SDOH

# Future Research

- Develop quantitative questionnaire
- Expand research to nursing schools across Texas and later to a national survey
- Include post-licensure programs

Questions?



Thank  
You





## Contact Us

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