



How is universal access to the social determinants of health critical to the continuum of legal advocacy?

When social, economic, and political systems allow conditions such as lack of adequate housing, insufficient income, food insecurity, and inadequate quality schooling to exist, and especially when those conditions are manifestations of social oppression and racial injustice, the systems inflict stress and trauma on individuals, families, and communities and create unnecessary challenges in their efforts to survive and thrive.¹ Since not everyone has equitable access to the [social determinants of health](#), legal advocacy may be needed to secure resources and supports for families that need them. Emerging research documents the influential role of legal advocacy and access to justice in mitigating the negative impacts of inadequate housing, homelessness, education, employment, and other challenges on health and well-being.²

Healthy communities are essential for the health, vitality, and resilience of individuals and families. A lack of access to the social and structural determinants of health — and other stressors related to poverty — can undermine the well-being of children and families, increasing the likelihood that families will become involved in the child welfare system. Trauma from violence, [Adverse Childhood Experiences](#) (ACEs), discrimination, social oppression, and racial injustice impact the stability of families and communities. These issues often are compounded by a lack of access to public benefits, affordable housing, and safe and accessible childcare, as well as unemployment, intimate partner abuse, custody and immigration issues, and policies that promote white supremacy and systemic racism.

Resources that enhance quality of life can have a positive influence on health outcomes — research long has highlighted the connection between structural and societal conditions and exposure to childhood adversity and violence. Examples of resources and supports that improve social determinants of health include:

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- Safe and affordable housing.
- Access to high quality education.
- Public safety.
- Workplace safety.
- Availability of healthy foods.
- Local emergency/health services (including preventive healthcare).
- Clean water, food, and air.

The child welfare system is directly impacted by these determinants. A wide range of studies has addressed how social determinants of health influence the likelihood of being reported to child protective services.³ For example, the [relationship between housing and child welfare involvement](#) has been studied given the over-representation of unstably housed children in reports of child maltreatment,⁴ and a meta-analysis of 13 studies found that housing instability was associated with child welfare involvement.⁵ By promoting housing stability and other social determinants of

health, jurisdictions can help prevent the traumas associated with unnecessary involvement of child protective services.

Ultimately, all five sectors of society (public, business, nonprofit and faith-based, philanthropic, and community) share an important responsibility: promoting and supporting access to social determinants of health to ensure that existing and future generations are able to thrive and live free from harm, violence, and trauma. The federal [Office of Disease Prevention and Health Promotion](#) recommends systemic tools and strategies to address the social determinants of health. First, agencies and organizations — including the legal community — can utilize [Health Impact Assessments to review needed, proposed, and existing social policies](#) for their likely impact on health. Second, a “[health in all policies](#)” strategy can be adopted, which introduces improved health for all and the closing of health gaps as [goals to be shared](#) across all areas of government. To implement this strategy, communities must consider how legal advocacy can play a role in reducing health inequities and addressing gaps that do exist.

- 1 Content of this brief was informed by consultation with members of the KM Lived Experience Advisory Team on 5/11/21 and 5/25/21. This team includes youth, parents, kinship caregivers, and foster parents with lived experience of the child welfare system who serve as strategic partners with [Family Voices United](#), a collaboration between FosterClub, Generations United, the Children’s Trust Fund Alliance, and Casey Family Programs. Members who contributed to this brief include Keith Lowhome, Marquetta King, Roberto Partida, and Aliyah Zeien..
- 2 Genn, Hazel. (2019). When law is good for your health: mitigating the social determinants of health through access to justice. *Current Legal Problems*, 159-202 (2019).
- 3 Hunter, Amy A. and Flores, Glenn. (2021). Social Determinants of Health and Child Maltreatment: A Systematic Review, 89 *Pediatric Research*, 269-274.
- 4 Marcal, Katherine E., The Impact of Housing Instability on Child Maltreatment: A Causal Investigation, 21 *Journal of Family Social Work*, 331-347 (2018).
- 5 Hunter and Flores (2021).

This brief was developed by the National Preventive Legal Advocacy Partnership (NPLAP) – a multidisciplinary group of experts in child welfare practice, access to justice, and the legal system – convened by Casey Family Programs. The goal of the NPLAP is improving preventive legal advocacy efforts and contributing to an overall population-based, public health approach to community well-being. Visit [Preventive Legal Advocacy](#) for additional resources and information.

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