



SOCIAL Clinician Handout

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“The power of community to create health is far greater than any physician, clinic or hospital.” – Mark Hyman



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WHAT IS SOCIAL SUPPORT?

Connection to a strong social support network impacts health outcomes in many ways. Research has examined how positive and negative social support results in changes in both health behaviors and physical health indicators. A widely used definition of the concept of social support was proposed by Cobb in 1976, “Social support... information leading the subject to believe that he is cared for and loved, esteemed, and a member of a network of mutual obligation”.¹ In short, the presence of positive social relationships increases the fundamental belief that one is cared for and safe. Additionally, social support is bi-directional in that it also involves giving to and caring for others, providing reinforcement of self worth, efficacy, and a connection with one’s identity and values. Multiple studies have shown that social relationships—both quantity and quality—affect mental health, health behavior, physical health, and mortality risk. Social relationships have short- and long-term effects on health, for better and for worse. These effects emerge in childhood and cascade throughout life to foster cumulative advantage or disadvantage in health.²

HEALTH IMPACTS OF ISOLATION AND NEGATIVE SOCIAL SUPPORT

The absence of positive social support has demonstrated significant detrimental health outcomes in multiple health and behavior studies. A large-scale Swedish study examined the effects of the social environment at a population health level and demonstrated that poor social connectivity was associated with multiple poor health outcomes. Individuals with low levels of social support had more than three times increased odds of being depressed, three times increased odds of having many psychosomatic symptoms, and double the odds of having musculoskeletal pain.³

Other studies have demonstrated that poor quality and low quantity of social supports are associated with inflammatory biomarkers and impaired immune function, resulting in higher rates of chronic pain.⁴ Isolation is not the only problematic factor. The CDC-Kaiser study on ACES (Adverse Childhood Experiences) and multiple subsequent related studies indicate that when there is a history of severely negative social relationships, such as in situations of abuse and trauma, the likelihood of developing chronic pain and other poor health outcomes is greater.⁵ Research indicates that both history of trauma and current presence of violent or abusive relationships results in higher rates of chronic pain.⁶

HEALTH BENEFITS OF STRONG SOCIAL CONNECTIONS

The good news is that when people develop healthy social relationships they are able to regain and improve positive health outcomes, including better management of pain. Multiple studies demonstrate that people engaged in pro-social activities and relationships are more likely to have positive health behaviors, such as exercise, nutritional balance, and lower rates of substance use. These behaviors are crucial in the successful management of most chronic pain-related syndromes. In addition to behavior changes, physical indicators are improved in the presence of positive social support. For example, one study found that a supportive social network leads to reduced blood pressure, heart rate, and stress hormones.² Even when pain and underlying conditions are still present, the impact of pain is reduced in individuals who perceive a greater sense of inclusion from and engagement with others. This can provide a sense of relief in that patients can begin to feel better even when cure or fixation of underlying conditions is not expected.



ASSESSMENT AND TREATMENT

Medical examinations and interventions alone, in which the patient is a passive recipient, are unlikely to result in effective management of pain over the long term. The individual's social environment plays a critical role as it can provide the informal support and care over time, beyond healthcare institutions. As such, the assessment of social support should become a routine and fundamental part of patient-clinician interactions. Utilizing a biopsychosocial model as a patient assessment tool provides a powerful framework to understand how biological, psychological and social processes interact and affect pain significantly. Developing a thorough understanding of a patient's unique social situation—as well as trauma history—will provide crucial information in determining treatment options. As the evidence suggests, helping a patient set goals related to increasing social connections is likely to result in improved management of pain and can be considered a first line of treatment for chronic pain conditions.⁷

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