

## **Background**

Inequities that characterize child health outcomes are influenced by fragmented medical and social care systems. More integrated medical-social care systems could help fill gaps in care and equitably improve outcomes.

## **Objective**

To generate qualitative insights from, and with, patients, families, and community members about how to create a more integrated medical-social care system.

## **Methods**

We used qualitative human-centered design (HCD) methods. The research team, inclusive of four peer researchers trained in HCD, co-designed an interview guide assessing beliefs and attitudes toward the intersection of health care, human services, and communities. Interviews were conducted in English or Spanish, recorded, transcribed, and reviewed by experts in HCD, peer researchers, and pediatric clinicians. This multidisciplinary team then identified themes and intervention opportunities.

## **Results**

Peer researchers conducted 19 interviews, 14 in English and 5 in Spanish. Interviewees included previous patients and patients' parents or grandparents, at Cincinnati Children's. Most identified as Black or Hispanic/Latino and lived in structurally-disadvantaged Cincinnati neighborhoods. Themes related to structural factors included: 1) difficulty navigating medical and social services; 2) need for more proactive medical and social care; and 3) poorly integrated medical and social care. Themes related to human factors included: 1) untrustworthiness of care institutions; 2) diversified care teams improve care delivery; and 3) optimal care requires empathy, clear communication, and partnership. Identified intervention opportunities across themes included: 1) proactive inclusion of community health workers or navigators in clinical settings; 2) "opt out" policies to destigmatize use of social care resources; 3) inviting community partners into waiting rooms to engage with patients and families; and 4) enhancing diversity in care teams.

## **Conclusion**

Collaboration with community partners and families is necessary for the development of concrete interventions capable of addressing systemic inequities. Incorporating social services into medical care plans could help overcome barriers and achieve better outcomes.