

# Social Determinants of Health

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*In the past month, how often do you experience the following?*

**Always**  
**Often**  
**Sometimes**  
**Rarely**  
**Never**

## **My Health**

- My physical health needs are being met.
- My mental health needs are being met.
- My nutritional needs are being met.
- I find time for recreation/leisure activities.

## **My Physical Environment**

- I feel safe.
- My housing *needs* are being met.
- My housing *goals* are being met.
- I have reliable transportation.

## **My Economic Stability**

- I feel satisfied with my employment.
- I can meet my financial obligations.
- My dependent (child or elder) care needs are being met.

## **My Social Connections**

- I have family support.
- I have social support.
- I have community/cultural/spiritual support.

## **My Education**

- My educational goals are being met.
- I have access to educational, training, and development opportunities.

## **My Legal Needs**

- I have the legal support I need.

## **Other:**

- Have you applied for military/veteran benefits? **Yes/No**
- Have you enrolled in the Veterans Health Administration? **Yes/No**