

# Structural interventions implemented in OECD countries that report on racial inequities in population health outcomes: a systematic review

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## Background

- Racism acts as a system through which individuals are ranked as superior or inferior, which allows for the explicit and implicit maltreatment and disenfranchisement of racial and/or ethnic groups.
- Structural racism involves means by which individuals are further disadvantaged due to discriminatory systems and inequitable distribution of resources within society, ultimately creating a pathway between racism and health through proximal outcomes such as social deprivation and economic injustices.
- Although structural racism has become increasingly acknowledged and discussed via the news, social media, and other platforms, structural racism is not adequately researched within the field of public health.

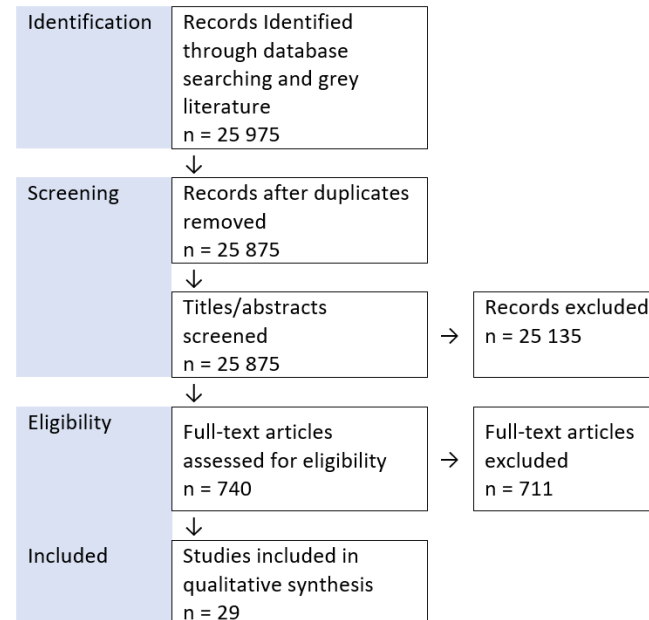
## Objectives

- The aim of this systematic review is to determine what is known about structural interventions implemented in OECD countries that report on racial inequities in population health outcomes.

## Methods

- EBSCO Medline, the Campbell Library of Systematic Reviews, Google Scholar and grey literature were searched using terms related to race and racism (Figure 1).
- Studies on structural level interventions implemented in OECD countries that reported an effect on racial inequities in population health outcomes were included.
- Two independent reviewers appraised each article for quality and extracted data on policy sector, population, intervention, and outcomes.
- A narrative synthesis grouped by intervention type guided by the WHO Conceptual SDH framework was conducted.

Figure 1. PRISMA Flow Chart



## Results

- Most studies were quasi-experimental or natural experiments.
- Nineteen of the included studies explicitly stated their objectives were to evaluate differential effects of interventions by race, while the remaining 10 only conducted sub-group analyses by race as part of an evaluation of the general population.
- Evaluated interventions included supplemental income programs, minimum wage policies, nutrition safeguard programs, immigration-related policies, and reproductive and family-based policies.
- Study findings were mixed within each intervention policy domain.
- Financial and nutrition safeguard interventions saw statistically significant improvements for some behavioral, gestational, and long-term health outcomes for some populations of interest.
- Studies of restrictive immigration policies found statistically significant associations with poor mental health and food insecurity for affected populations.

## Conclusions

- There was limited focus on structural interventions as they differentially affect health outcomes by race.
- The effects of the interventions studied were challenging to determine as racism affects outcomes for included populations beyond the scope of the intervention.
- Further research is needed to guide policy development to build racial health equity.

