Study highlights racial inequity in health care access, quality

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A recent study finds states that exhibit higher levels of systemic racism also have pronounced racial disparities regarding access to health care. In short, the more racist a state was, the better access white people had—and the worse access Black people had.

"This study highlights the extent to which health care inequities are intertwined with other social inequities, such as employment and education," says Vanessa Volpe, corresponding author of the study and an assistant professor of psychology at North Carolina State University. "This helps explain why health inequities are so intractable. Tackling health care inequities will require us to address broader social systems that significantly benefit white people—and that makes them difficult to change."

Previous research has examined how people's individual experiences with racism affect the quality of their health care. There is also research that examines relationships between structural racism and health outcomes. The recent study from Volpe and her collaborators looks at structural racism at the state level, people's individual experiences with racism, the extent to which those things affected the ability of Black people to access health care, and the quality of that health care. The researchers also examined the ability of white people to access health care and the quality of their health care.

For their study, the researchers drew on the Association of American Medical Colleges' Consumer Survey of Health Care Access for the years

2014 to 2019. The survey, of adults who needed care within the previous year, included measures of self-reported health care access, quality, and provider racial discrimination. The survey included 2,110 Black adults and 18,920 white adults. The researchers also used publicly available state-level data from the Census Bureau and the U.S. Department of Justice to create an index of state-level racial disparities that serve as a proxy for structural racism. The researchers used the index to determine racism scores for all 50 states and the District of Columbia.

The researchers found that the higher the level of racism in a given state, the less access Black people in that state had to health care. There was no statistically significant relationship between a state's racism index score and quality of health care. However, Black people who reported experiencing racism with their health care providers also reported lower quality of care.

Meanwhile, the higher the level of racism in a given state, the more access white people had to health care. In addition, the worse the state's racism score, the higher the quality of care white people reported receiving.

"These state-level inequities are symptoms of racism baked into laws, policies and practices that ensure there is not a level playing field," Volpe says. "It underscores the need to address inequities in a meaningful, structural way, not just assume that racism is solely an interpersonal phenomenon. And it's important to use data-driven approaches like the ones we used here, so laws or regulations can be developed by policymakers to more effectively even the playing field."

The paper, "State- and Provider-Level Racism and HealthCare in the U.S.," is published in the *American Journal of Preventive Medicine*.

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