Impact of Racism on Patient Experiences of Social Care—Implications for Health-Care Based Social Care Interventions

Background/Objective

There is little research on racisms' impact on healthcare-based social care (HCBSC). We sought to understand Black and Latino/e/x patients' experiences with social care and how racism and marginalization may impact these experiences.

Methods

Semi-structured interviews were conducted with 30 patients who experienced HCBSC in the prior 12 months. Participants were recruited using convenience and snowball sampling. Interviews were transcribed and entered into qualitative analysis software Dedoose and two study team members conducted thematic analysis using deductive and inductive coding. This sub-analysis focuses on 25 of the 30 participants in the original sample, all of whom identified as Latinx and/or Black or African American. The impact of race, racism, and bias on participants' experiences of social care was analyzed. We defined "social care providers" (SCPs) as physicians, community health workers, and other personnel involved in HCBSC delivery.

Results

Of the 25 participants included in this analysis, 14 (56%) self-identified as Latino/e/x and 9 (36%) as Black or African American. 11 (44%) interviews were conducted in English and 14 (56%) in Spanish. Racism and bias deeply impacted participant experiences with social care. Perceptions of racism and bias from SCPs led participants to (1) withhold social needs during screening; (2) decline offered services; and (3) distrust social care. Participants reported experiencing shame accessing healthcare-based social care arising from societal narratives around poverty and race. Distrust in HCBSC resulted from patients' accumulated experiences with both health care and social care. SCP-level factors that promoted trust included: cultural/race concordance, language concordance, cultural sensitivity, and making patients feel cared for.

Conclusions

Experiences of racism and bias strongly shape minoritized patients' experiences of social care. Social care quality metrics focusing on the *quantity* of social care provided may inadequately capture important data. Social care metrics and practice should focus on patient experiences with care.