

SCOPING REVIEW ARTICLE

## Social Determinants and Health Inequalities in the Americas And the Caribbean: Scoping Review

Determinantes Sociais e Desigualdades em Saúde nas Américas e no Caribe:

Scoping Review

Determinantes Sociales y Desigualdades en Salud en las Américas y el Caribe:

Scoping Review

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### Abstract

**Background:** Health inequalities in the Americas and the Caribbean are strongly influenced by Social Determinants of Health (SDOH), reflecting structural disparities that directly affect population well-being.

**Objective:** To map the SDOH addressed in scientific literature from the region over the past decade, identifying patterns, challenges, and implications for health equity.

**Methodology:** A scoping review was conducted following the Joanna Briggs Institute framework and PRISMA 2024 checklist, with protocol registered in the Open Science Framework. A total of 30 studies published between 2015 and 2024 were analyzed, covering nine countries.

**Results:** The main SDOH identified were racial and residential segregation, food insecurity, mental health, access to healthcare, gender, education, immigration, and sanitation. The most represented countries were Brazil, the United States, and Canada.

**Conclusion:** The findings show that inequalities related to race, education, housing, and mental health are critical determinants of health inequities. The mapping highlights the urgency of intersectoral policies and professional training strategies aligned with these challenges, supporting the development of more equitable and responsive health systems.

**Keywords:** social determinants of health; public health; population health; Caribbean region; health inequalities

### Resumo

**Enquadramento:** As desigualdades em saúde nas Américas e no Caribe são fortemente influenciadas pelos Determinantes Sociais da Saúde (DSS), refletindo disparidades estruturais com impactos diretos no bem-estar das populações.

**Objetivo:** Mapear os DSS abordados na produção científica da região na última década, identificando padrões, desafios e implicações para a equidade em saúde.

**Metodologia:** Revisão de escopo conforme o referencial do Joanna Briggs Institute e checklist PRISMA 2024, com protocolo registrado no Open Science Framework. Foram analisados 30 estudos publicados entre 2015 e 2024, provenientes de nove países.

**Resultados:** Os principais DSS identificados foram: segregação racial e residencial, insegurança alimentar, saúde mental, acesso aos serviços de saúde, gênero, escolaridade, imigração e saneamento. Os países mais representados foram Brasil, Estados Unidos e Canadá.

**Conclusão:** Os achados demonstram que desigualdades ligadas à raça, escolaridade, moradia e saúde mental são determinantes críticos da iniquidade em saúde. O mapeamento reforça a necessidade de políticas intersectoriais e formação profissional alinhada aos desafios identificados, promovendo sistemas de saúde mais equitativos e responsivos.

**Palavras-chave:** determinantes sociais da saúde; saúde pública; saúde da população; região do Caribe; desigualdades em saúde

### Resumen

**Marco contextual:** Las desigualdades en materia de salud en las Américas y el Caribe están fuertemente influenciadas por los determinantes sociales de la salud (DSS), lo que refleja disparidades estructurales con repercusiones directas en el bienestar de las poblaciones.

**Objetivo:** Mapear los DSS abordados en la producción científica de la región en la última década e identificar patrones, desafíos e implicaciones para la equidad en salud.

**Metodología:** Revisión de alcance según el marco de referencia del Instituto Joanna Briggs y la lista de verificación PRISMA 2024, con protocolo registrado en el Open Science Framework. Se analizaron 30 estudios publicados entre 2015 y 2024, procedentes de nueve países.

**Resultados:** Los principales DSS identificados fueron: segregación racial y residencial, inseguridad alimentaria, salud mental, acceso a los servicios de salud, género, escolaridad, inmigración y saneamiento. Los países más representados fueron Brasil, Estados Unidos y Canadá.

**Conclusión:** Los hallazgos demuestran que las desigualdades relacionadas con la raza, la educación, la vivienda y la salud mental son factores determinantes críticos de la inequidad en la salud. El mapeo refuerza la necesidad de políticas intersectoriales y formación profesional alineadas con los desafíos identificados, que promuevan sistemas de salud más equitativos y con mayor capacidad de respuesta.

**Palabras clave:** determinantes sociales de la salud; salud pública; salud de la población; región del Caribe; desigualdades en salud

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## Introduction

Social determinants of health (SDOH) are key indicators for achieving population well-being, as they enable the identification of the underlying causes of inequalities and support the development of effective solutions to build a more equitable and healthier society (Alhalel et al., 2022; Cavalcanti et al., 2022). For instance, countries in the Americas and the Caribbean, despite their rich biodiversity and abundance of natural and cultural resources, continue to experience profound social inequalities, which have a significant impact on both individual and collective health (Gerk et al., 2024). In academia, the most widespread definition of SDOH argues that the living and working conditions of individuals and populations are directly linked to their health status. The World Health Organization (WHO) adopts a concept that extends beyond biological effects, encompassing the social conditions in which people live and work. Similarly, the Pan American Health Organization (PAHO) recognizes the impact of social, economic, and environmental factors on health, with particular emphasis on the role of Primary Health Care (PHC) and health promotion (Kasper et al., 2024; Lopes et al., 2024; Lebrón et al., 2024). In Latin America, Mossadeghi et al. (2023) highlighted the need to distinguish between the concepts of *Social Determinants* and *Social Determination* of Health, which are often used interchangeably in the literature. Social determination is regarded as a more complex process, involving a structural analysis of the social and political conditions that influence health, while social determinants are understood more narrowly as isolated factors affecting health. Although this broader perspective is recognized, the present review adopts the approach proposed by the WHO and PAHO, as it constitutes the official reference for health institutions addressing this issue. In recent decades, research on the organization and development of communities and their health conditions has multiplied. This advancement is linked to studies on health inequities, which emphasize that health inequalities are preventable, unfair, and systematic (Mendes et al., 2023; Ortega et al., 2022). The epidemiological transition in the Americas and the Caribbean has led to a predominance of noncommunicable diseases and trauma, which have surpassed infectious diseases and maternal and neonatal complications. Moreover, recent public health emergencies, such as the 2009 influenza pandemic and the 2020 COVID-19 pandemic, have highlighted the vulnerability of SDOH in the region and the impact of social inequalities on the resilience of health systems (Sierra et al., 2023). Given this context, the choice of a scoping review as the methodological approach is justified by the need to map the existing literature, identifying patterns, knowledge gaps, and trends in scientific production over the last decade. Unlike systematic reviews, which aim to answer specific research questions through strict inclusion and exclusion criteria, scoping reviews allow for a more comprehensive approach, particularly useful for emerging and evolving topics such as SDOH. A preliminary search was conducted in April 2024 on

the MEDLINE (via PubMed), Cochrane Database of Systematic Reviews, JBI Evidence Synthesis, PROSPERO, and Open Science Framework databases. No published or ongoing systematic or scoping reviews on this topic were identified, which highlights the originality and relevance of the present study. The search aimed to map the SDOH addressed in the scientific literature of the Americas and the Caribbean over the last decade, identifying patterns, challenges, and their implications for health equity. The PCC framework (Population, Concept, and Context) was used to formulate the guiding research question: "How are contemporary Social Determinants of Health being addressed in the scientific literature in the Americas and the Caribbean?" Specifically, the components were defined as follows: Population – Public Health; Concept – SDOH; and Context – Socioeconomic factors. This review aims to systematize existing evidence and support future research and public policies aimed at promoting health equity.

## Methodology

This scoping review was conducted in accordance with the methodology proposed by the Joanna Briggs Institute (JBI). The results were reported following the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) 2024 checklist. To ensure transparency in the process and minimize bias, the review was registered on the Open Science Framework (OSF) platform, enabling verification of the other strategies in the review protocol: (<https://osf.io/dznts/>).

### Search strategy and identification of information sources

As a search strategy, studies conducted in countries across the Americas and the Caribbean were included, addressing SDOH in any population group and field of knowledge. The context considered involved socioeconomic factors affecting communities within the region. Primary studies, reports, and case studies using quantitative and/or qualitative approaches were included, as well as publications from the gray literature, such as theses, dissertations, and final course projects. The publication time frame was from January 2015 to May 2024. This interval was defined to capture significant changes over the last decade, such as the adoption of the Sustainable Development Goals (SDGs) in 2015, the intensification of social inequalities following the global economic crisis, and, more recently, the impacts of the COVID-19 pandemic on SDOH. These milestones underscore the need to understand how SDOH have been addressed in contemporary scientific production in the region.

### Inclusion/exclusion criteria

Studies that did not address the research question were excluded, as well as duplicates and publications that were only partially available or unavailable. Studies published between January 2015 and May 2024 that explicitly addressed SDOH in the context of countries in the Americas

and the Caribbean were included. Original articles using quantitative, qualitative, or mixed methods were considered, as well as case reports and gray literature (theses, dissertations, and final course projects), provided that they were published in Portuguese, Spanish, or English and the full text was accessible. The exclusion criteria applied were as follows: studies that did not focus on SDOH; duplicate publications; articles not available in full; and studies addressing regions outside the Americas and the Caribbean.

### Source of evidence selection

The search was conducted across eight electronic databases: Virtual Health Library (VHL), Scientific Electronic Library Online (SciELO), National Library of Medicine

(PubMed), Web of Science, Embase, CINAHL, Scopus, and the Redalyc Scientific Information System. The search terms were defined based on the Health Sciences Descriptors (DeCS) and the Medical Subject Headings (MeSH), together with keywords relevant to the research.

### Data extraction

Controlled Boolean operators AND and OR were used to combine the selected keywords. The search strategy was developed by the first author, with support from a librarian at the Federal University of Paraná (Brazil), to identify the best combinations of descriptors. Table 1 shows the search strategy, descriptors/keywords, and Boolean operators applied in the high-sensitivity search conducted in the MEDLINE/NCBI/PubMed database.

**Table 1**

*Search strategy, descriptors/keywords, and Boolean operators used in the MEDLINE/NCBI/PubMed database, 2015-2024*

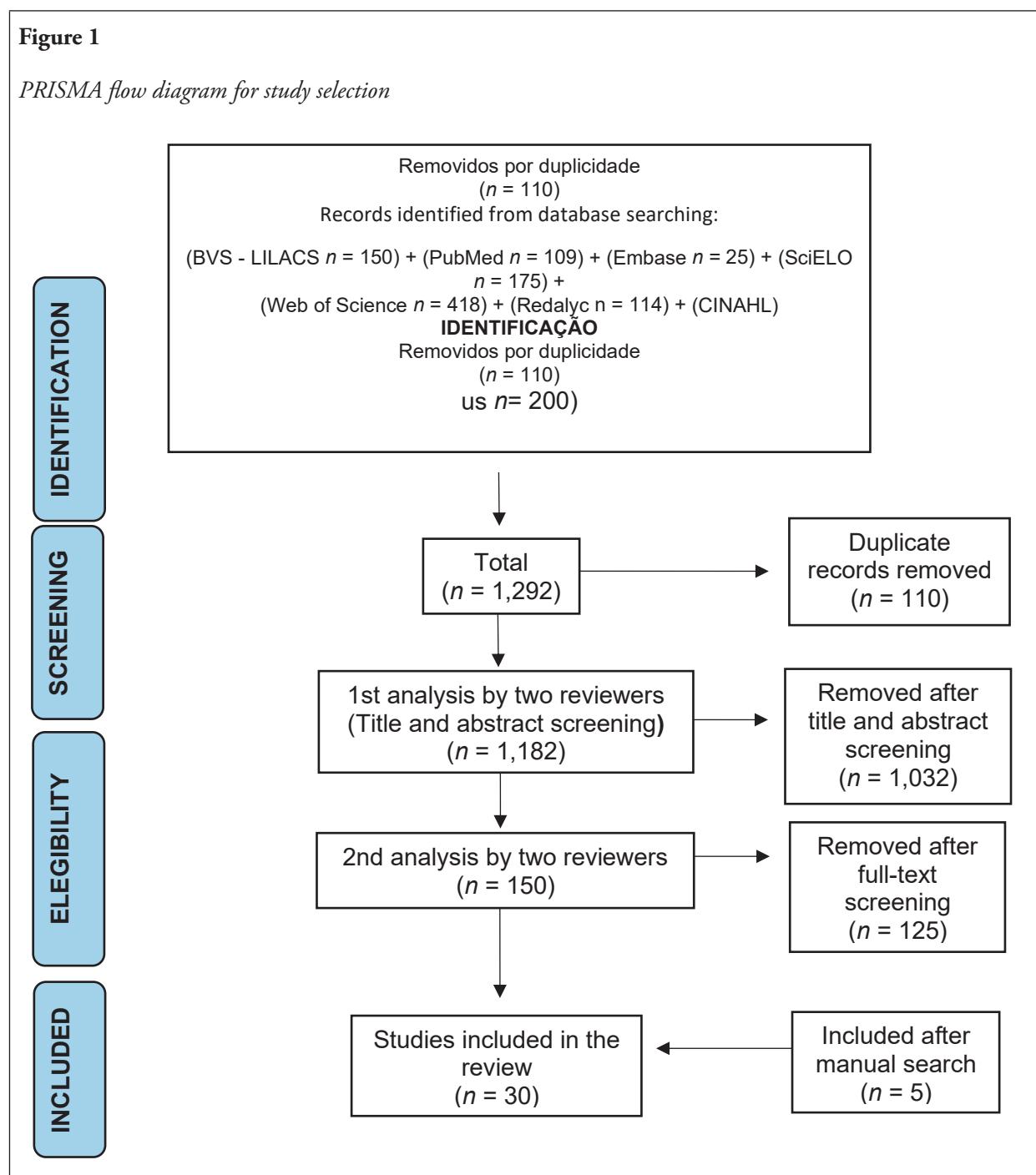
Database	Search strategy
<b>PubMed/MEDLINE</b>  <b>N = 109</b>	(“public health”[Title/Abstract] OR “community health”[Title/Abstract] OR “community health programme”[Title/Abstract] OR “community health programme”[Title/Abstract] OR “international health”[Title/Abstract] OR “national health”[Title/Abstract] OR “national health programmes”[Title/Abstract] OR “national health programs”[Title/Abstract] OR “national health project”[Title/Abstract]) AND (“social determinants of health”[Title/Abstract] OR “social determinant”[Title/Abstract] OR “social determinants”[Title/Abstract] OR “social determinants of health”[Title/Abstract] OR “social determining factor”[Title/Abstract] OR “social health determinant”[Title/Abstract]) AND (socioeconomics[Title/Abstract] OR “socioeconomic factor”[Title/Abstract] OR “socioeconomic factors”[Title/Abstract])

The search was conducted by a single researcher, following the stages of identification, retrieval, screening, eligibility, and inclusion of articles. Data were stored in Mendeley, where duplicates were removed, and then exported to Rayyan for further verification and exclusion of remaining duplicates. Study selection was performed independently by two reviewers, who screened titles, abstracts, and descriptors, followed by full-text reading of the selected studies. In cases of disagreement, a third reviewer was consulted; if the disagreement persisted, the decision was made by consensus. Data were extracted using a standardized form that included information such as country of origin, year of publication, authors, title, study design,

target population, and the SDOH addressed. The extracted data were organized in a Microsoft Excel spreadsheet.

### Data synthesis

For data synthesis, a qualitative approach was applied using thematic analysis, in which the SDOH were grouped into categories according to their frequency and similarity across the included studies. This categorization enabled the identification of the most recurrent determinants and their interrelationships in different regional contexts. The study selection process is represented in the flow diagram (Figure 1), developed in accordance with the JBI guidelines and the checklist adapted from PRISMA 2024.

**Figure 1***PRISMA flow diagram for study selection*

**Table 2***Distribution of social determinants of health in the mapped studies (n = 30)*

Country	Author/year	Search topic	Study design	Addressed SDOH
Brazil	Nogueira et al. (2022)	Association between racial residential segregation and homicide mortality in Brazilian municipalities	Quantitative study	residential and racial segregation
	Piza et al. (2024)	Epidemiological profile of congenital syphilis in the state of Rio de Janeiro	Quantitative study	Education and access to health services
	Cavalcanti et al. (2022)	Social inequalities and complementary feeding in latin America and the Caribbean.	Descriptive study	Food insecurity
	Gerk et al. (2024)	Social determinants of gastrointestinal malformation mortality in Brazil	Quantitative study	Gender
	Lopes et al. (2024)	Prematurity: Identification of maternal risk factors	Analytical study	Residential segregation
	Moura et al. (2022)	Factors associated with inequalities in the social conditions of white, brown, and black elderly people in Brazil	Cross-sectional study	Racial segregation, education, and access to health services
	Paulino et al. (2022)	Pregnant women admitted to psychiatric hospitals	Observational study	Gender and education
	Varga et al. (2024)	Racism and food insecurity: the misfortunes of a Brazilian quilombo community	Descriptive, multivariate study	Racial segregation and food insecurity
	Guimarães et al. (2023)	Association between education and dengue mortality rates in Brazil	Retrospective ecological study	Education and access to health services
	Jackson et al. (2024)	Racial inequalities in hypertension control and residential segregation	Decomposition analysis	Residential and racial segregation
Canada	Mendes et al. (2023)	Social determinants of health and mental health of Brazilian pregnant women	Mixed-methods study	Mental health and education
	Silva & Gebera et al. (2024)	Mental health and adolescence: social determinants of health	Documental research	Gender and mental health
Colombia	Anderson et al. (2023)	Food insecurity and use of health services for mental disorders	Scoping review	Food insecurity and mental health
Cuba	Pineda et al. (2024)	Social determinants: a gender perspective in Venezuelan immigrants	Case study	Sanitation and access to health services
El Salvador	Ortega et al. (2022)	Residential segregation as a social determinant of health	Qualitative study	Residential segregation
	Miranda et al. (2024)	Central America and the Dominican Republic at crossroads	Documental analysis	Residential segregation

	Alhalel et al. (2022)	Racial disparities in perinatal care for African Americans health environment	Qualitative study	Racial segregation
	Pudrovska et al. (2023)	Gender, education, and mental health: do the associations persist across the life course?	Qualitative study	Mental health, education, and gender
	Li et al. (2024)	COVID-19 vaccine booster among Asian Americans	Cross-sectional study	Racial segregation
	Reddy et al. (2023)	Association between racial residential segregation and Black-White disparities in cardiovascular disease mortality	Qualitative study	Racial segregation
	Kasper et al. (2023)	Effect of neighborhood and individual-level socioeconomic factors on breast cancer screening adherence in a multi-ethnic study	Univariate regression	Food insecurity
USA	Wisner et al. (2024)	Maternal mental health in addressing morbidity and mortality	Qualitative study	Mental health and education
	Lebrón et al. (2024)	Immigration and immigrant policies, health, and health equity in the United States	Documental study	Immigration and access to health services
	Mossadeghi et al. (2023)	Multimorbidity and social determinants of health in the US prior to the COVID-19 pandemic	Quantitative study	Racial segregation
	Madera et al. (2023)	The intersections of socioeconomic position, gender, race/ethnicity, and nationality among American adults	Field study with multi-level analysis	Education
	Samuel et al. (2022)	The effect of COVID-19 pandemic-related financial challenges on mental health and well-being among US older adults	Trends and cohort study	Mental health
	Riley et al. (2024)	Structural gendered racism and preterm birth inequities in the United States	Qualitative study	Racial segregation, education, and gender
Venezuela	Sierra et al. (2023)	Underlying conditions on the southern border between Colombia and Venezuela to face the COVID-19 pandemic	Case study	Immigration and environmental sanitation
Peru	Santos et al. (2022)	Determinants of food insecurity among households with children in Villa el Salvador, Lima, and Peru: gender and employment	Cross-sectional study	Food insecurity
Mexico	Llamas et al. (2023)	Residential segregation and access to health services in Mexico	Cross-sectional descriptive study	Residential segregation

## Discussion

The data extracted from the 30 studies analyzed in this review enabled the categorization of the main SDOH identified in the scientific literature of the last decade in the Americas and the Caribbean. The following sections discuss how each group of SDOH contributes to health inequalities, based on the mapped evidence (Jackson et al., 2024; Moura et al., 2022; Nogueira et al., 2022; Varga et al., 2024). In this context, Li et al. (2024) reported data on COVID-19 vaccination among Asian Americans and the influence of racial discrimination on vaccine uptake. It was found that Black people were 1.8 times less likely to have access to the vaccine. It is important to note that skin color partially explains the social and health conditions of people in the Americas and the Caribbean

(Mossadeghi et al., 2023; Reddy et al., 2023). However, other inequalities, such as education, have a strong impact on the population's access to and use of health services. Low educational attainment (Guimarães et al., 2023; Moura et al., 2022; Piza et al., 2024) is associated with poorer health outcomes and reduced access to services. These findings reinforce the need for intersectoral policies that integrate education and health, particularly in areas with high social vulnerability. Children and young people from low-income backgrounds, especially those belonging to Indigenous and Afro-descendant populations, face reduced access to quality education and higher school dropout rates (Moura et al., 2022; Guimarães et al., 2023; Piza et al., 2024). Moreover, four studies included identified mental health as a contemporary SDOH, highlighting its multiple effects and the fact that it is the

only SDOH capable of affecting all social groups in a community (Anderson et al., 2023; Mendes et al., 2023; Silva & Gebera, 2024; Wisner et al., 2024). Regarding food insecurity, the evidence suggests that this condition is not only associated with food availability but also with socioeconomic and structural factors. A Canadian study described the situation of Indigenous peoples who, despite living in a region rich in natural resources, face significant challenges in acquiring adequate food (Anderson et al., 2023). In addition, a study conducted in the United States identified food insecurity as a key factor influencing women's adherence to breast cancer screening, indicating that economic instability can compromise preventive care (Kasper et al., 2023). Access to health services is therefore recognized as a key determinant of the community's quality of life. A health system with limited accessibility can generate many problems that negatively impact the population, increase social inequalities, reduce productivity, and impose costs on society. Investing in a universal, free, and high-quality health system is essential to ensuring the right to health for all and promoting the human, social, and economic development of a country (Guimarães et al., 2023; Lebrón et al., 2024; Moura et al., 2022; Pineda et al., 2024). Based on the studies mapped in this review, gender also emerged as a contemporary SDOH, alongside others such as race, education, and socioeconomic status (Gerk et al., 2024; Paulino et al., 2022; Pudrovska et al., 2023). With regard to immigration as an SDOH, findings from a study conducted in Colombia and Venezuela indicate that it represents a complex phenomenon with multiple impacts on the health of individuals, families, and communities (Sierra et al., 2023). Factors such as labor exploitation, precarious working conditions, and human rights violations contribute to the vulnerability of immigrant populations within competitive global labor markets. Immigrants face challenges that negatively affect their physical, mental, and social well-being, as well as unemployment, lack of social support, and irregular legal status (Lebrón et al., 2024). Understanding the dimensions of contemporary immigration is essential for the formulation of public policies, both sectoral and intersectoral, that can improve living, working, and health conditions. These initiatives can promote the empowerment of immigrant groups, aiming to protect their rights and interests (Sierra et al., 2023). Environmental sanitation was identified as an SDOH in two studies with a significant impact on the quality of life and well-being of the population. A clean and healthy environment is essential for preventing diseases, promoting physical and mental health, and contributing to a country's social and economic development (Pineda et al., 2024). Lack of access to safe drinking water, sanitation, and waste collection can lead to the spread of communicable diseases such as diarrhea, cholera, dengue, leptospirosis, and helminth infections. These diseases mainly affect children and other vulnerable populations and can lead to severe health consequences and death (Pineda et al., 2024; Sierra et al., 2023). It is alarming that deficiencies in basic sanitation still persist today. Surveys conducted in Latin American countries,

such as Venezuela and Colombia, indicate that a portion of the population still lacks access to basic sanitation and safe drinking water, suggesting that the persistence of certain diseases in these communities is directly related to this reality. Therefore, consistent investments in basic sanitation, particularly targeting vulnerable populations, are essential to reduce health inequalities and prevent avoidable deaths (Pineda et al., 2024; Sierra et al., 2023). A considerable part of this situation can be attributed to residential segregation, identified in two studies included in this review as a relevant SDOH (Nogueira et al., 2022; Jackson et al., 2024; Lopes et al., 2024; Ortega et al., 2022). The results of this review contribute to updating teaching and research tools in public health, promoting greater alignment between professional training and current challenges. This mapping also supports the development of intersectoral policies and strategies aimed at reducing inequalities and promoting equity in access to health. Although this review provides a comprehensive overview of the most frequently discussed SDOH over the past decade in the Americas and the Caribbean, some limitations should be acknowledged. The absence of a critical appraisal of the methodological quality of the included studies, which is an inherent feature of scoping reviews, may limit the analytical depth of the results. In addition, the exclusion of studies not available in Portuguese, Spanish, or English may have restricted the geographical and cultural diversity of the evidence analyzed. Nevertheless, the results presented here offer relevant insights to inform policy development and guide the reorientation of training strategies in the field of public health.

## Conclusion

This scoping review analyzed 30 studies (2015–2024) from nine countries in the Americas and the Caribbean. The findings reveal that social determinants such as race/skin color, education, housing, and mental health remain structural barriers to health equity. The evidence underscores the need for intersectoral policies, context-sensitive professional training, and the strengthening of primary health care, particularly in the post-pandemic context. Although this review is limited by the absence of a methodological quality appraisal and by language restrictions, it provides relevant evidence to guide future research, promote international cooperation, and update teaching and management practices in public health.

## Author contributions

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