Canadian Food Studies

La Revue canadienne des études sur l'alimentation

Review Article

Intersections of race, the COVID-19 pandemic, and food security in Black identifying households in Canada: A scoping review

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Abstract

Although studies have identified food insecurity as a racialized inequity issue disproportionately affecting Black identifying Canadians, research exploring how anti-Black racism across multiple systems create inequities including increased risk for food insecurity among African Caribbean Black identifying households in Canada, is limited. Using an intersectionality lens, this scoping review addresses this knowledge gap by elucidating the intersectionality of race with multiple social determinants of health that directly and indirectly impedes Black people (both of African and Caribbean descent) from accessing adequate and appropriate food, resulting in disproportionate health and social outcomes. Critical analyses of twelve journal articles identified systematically and the review of government and organizational reports and websites reveal that food security in Black identifying individuals in Canada is a

racialized emergent public health issue rooted in structural and systemic racism that intersects with multiple determinants of health to produce grave social and economic inequities. The recent COVID-19 pandemic intensified these inequities by increasing food insecurity in Black identifying households in Canada. Cultural food security, referring to the ability to acquire and access culturally appropriate foods to one's ethnic origins as fulfilment to cultural identity, is an interrelated and foundational pillar to food security yet one that is grossly unacknowledged in current actions. National policies are thus needed that recognize cultural food security, and address root causes through increased social support and sustainable food systems. A reasonable first step to ensure the cultural relevance of policies and initiatives is the active engagement of Black communities.

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DOI: 10.15353/cfs-rcea.v10i3.630

ISSN: 2292-3071

Keywords: Food (in)security; Black identifying individuals in Canada; Intersection of race; intersectionality; Canada

Résumé

Bien que des études aient reconnu l'insécurité alimentaire comme un problème d'inégalité raciale affectant de manière disproportionnée les personnes canadiennes qui s'identifient comme Noires, la recherche est limitée à propos de la manière dont le racisme anti-Noir dans de multiples systèmes crée des inégalités, y compris un risque accru d'insécurité alimentaire, parmi les ménages canadiens s'identifiant comme Noirs, d'origine africaine et caribéenne. Par une optique intersectionnelle, cette revue exploratoire comble cette lacune : elle met en lumière l'intersection entre la race et de multiples déterminants sociaux de la santé qui empêchent directement ou indirectement les Noirs (d'origine africaine et caribéenne) d'avoir accès à une alimentation adéquate, ce qui a des conséquences disproportionnées sur les plans sanitaire et social. L'analyse critique de douze articles de journaux sélectionnés de manière systématique et l'examen de rapports et de sites Web gouvernementaux et organisationnels révèlent que la sécurité alimentaire des personnes s'identifiant comme Noires au Canada est un problème émergent de santé publique d'ordre racial. Ce problème est enraciné dans le racisme structurel et systémique à la croisée de multiples déterminants de la santé et il produit de graves iniquités sociales et économiques. La récente pandémie de COVID-19 a intensifié ces inégalités en augmentant l'insécurité alimentaire dans les ménages canadiens s'identifiant comme Noirs. La sécurité alimentaire culturelle, qui désigne la capacité d'acquérir des aliments culturellement appropriés à ses origines ethniques de façon à satisfaire son identité culturelle, est un pilier interdépendant et fondamental de la sécurité alimentaire, mais qui n'est absolument pas pris en compte dans les actions actuelles. Il faut donc des politiques nationales qui reconnaissent la sécurité alimentaire culturelle et s'attaquent aux causes profondes en renforçant le soutien social et les systèmes alimentaires durables. L'implication active des communautés noires constitue une première étape raisonnable pour garantir la pertinence culturelle des politiques et des actions.

Introduction

Food security, as defined in 1996 by the Food and Agriculture Organization (FAO) refers to a state whereby *"all individuals, at all times, have access to safe, nutritious, adequate, and appropriate food"* (World Food Summit, 1996). In its comprehensive definition, food security was identified as encompassing the following four fundamental pillars: food accessibility, availability, utilization, and stability (Food and Agriculture Organization of the United Nations [FAO], 2006). In contrast, Canadian definitions of food insecurity are rooted in understandings of food insecurity being a household-level issue due to financial constraints (Tarasuk et al., 2022). As a result, the metrics to assess food insecurity in Canada are assessed at the household level and centrally focus on the concept of availability or food supply, with little attention directed towards other FAO parameters (Deaton & Scholz, 2022). In Canada, the specific instrument used to measure food security is the Household Food Security Survey Module (HFSSM), which is a validated tool consisting of eighteen questions designed to measure a household's food security over the past twelve months (Statistics Canada, 2023). Questions in the HFSSM are targeted to the food security status of both adults and children within a household and include questions about the amount of food in the house, ability to afford food, worry in not having enough food, and changes in the quality and/or quantities of foods eaten (Statistics Canada, 2023). While these questions are important, what is missing from the HFSSM are details about what is meant by the changing quality of the foods one eats, including the cultural appropriateness of foods and the ability of one to maintain the practice of cultural food traditions. As such, the FAO parameter of 'accessibility,' which would entail assessments into the cultural relevance of foods, remain unaddressed in current household food security metrics in Canada (Deaton & Scholz, 2022).

Food insecurity is a prevalent issue in Canada that disproportionately affects visible minorities including immigrants of African descent (Tarasuk et al., 2022). Attention here is given to the term people who identity as *Black* (of African and Caribbean descent), in contrast to *Africans*, because race, as socially constructed (Bowleg, 2012) and defined by many traits particularly skin colour (Government of Canada, 2023), has effects on income and corresponding food security risk. Only recently has food security been examined through a sociodemographic lens; up until 2020 national racebased data remained absent (Tarasuk et al., 2023; Tarasuk et al., 2022) and no race-based COVID-19 data was collected in Canada (Ahmed et al., 2021). Data including health information on immigrants and refugees remains absent from Canadian Community Health Survey data collection cycles, contributing to a misinformed understanding of food insecurity among Black immigrant communities that inhibits effective actions needed to address root causes (Quintanilha et al., 2019). In light of these gaps, recent Canadian reports have found staggering differences in food security risk from a sociodemographic lens, with 39.2 percent of Black households living in food insecurity in contrast to 15.3 percent of White people or non-visible minority households (Tarasuk et al., 2023). Risks among Black Canadians to marginal, moderate, or severe food insecurity relative to White people has also been shown to be higher (Dhunna & Tarasuk, 2021). Due to the absence of race-based COVID-19 health data, the extent to which food insecurity among Black people in Canada was intensified by the pandemic remains unknown, however it is plausible to suggest effects were major given the pre-existing racial inequities Black people face.

Risk factors to food insecurity in Canada include low income, low education, unstable housing, being a single mother, immigration status, and social assistance reliance (Liu et al., 2023; Tarasuk et al., 2022). Emerging evidence has shown that even after these variables are controlled for, risks of food insecurity remain significantly higher for racialized individuals and households compared to White people of comparable sociodemographic status (Dhunna & Tarasuk, 2021; Tarraf et al., 2018). These findings reveal the underlying structural and systemic nature of the determining factors (Dhunna & Tarasuk, 2021). The intersectionality of anti-Black racism with social determinants of health where there are pre-existing Black inequities, further increases the risk of food insecurity (Regnier-Davies et al., 2022). For example, anti-Black racism in hiring intersects with the lack of acknowledgement of previous

educational training, the greater likelihood in correspondingly filling lower paying jobs, living in unstable housing, and facing increased food insecurity risk (Dhunna & Tarasuk, 2021; Tarraf et al., 2018). A clear example of these intersectionality's at work was gravely illustrated during the COVID-19 pandemic, where there was a staggeringly higher number of racialized groups, specifically, Black identifying individuals infected than the dominant majority; vulnerabilities which are tied to structural discrimination (Mensah & Williams, 2022; Public Health Agency of Canada [PHAC], 2021). This is explained by Black identifying people in Canada living in overcrowded and unstable housing; having limited access to health and social services; working in vulnerable frontline healthcare, sales, and service sector positions; and having high rates of unemployment and lower wages relative to the dominant majority even with equivalent education and training (Dhunna & Tarasuk, 2021; Tarraf et al., 2018).

Higher rates of COVID-19 transmission are inherently tied to the structural and living conditions of African Canadians, which are more broadly tied to systemic racial inequities (Mensah & Williams, 2022). For instance, Black identifying individuals generally have lower incomes and are often overrepresented in precarious jobs with lower wage pay. Furthermore, such jobs tend to be hands-on and requires the physical presence of an individual in the workplace, making the luxury in adapting work conditions to stay home during the pandemic void (Mensah & Williams, 2022; PHAC, 2021). Overrepresentation of Black identifying and African individuals in Canada in frontline jobs deemed 'essential' during the pandemic further increased risk of infection, which heightened transmission risk to family members due to crowded living spaces (Mensah & Williams, 2022; Public Health Agency of Canada, 2021). For example, due to the long-standing history of racial

power dynamics towards Black identifying individuals in Canada, which has contributed to occupational segregation, a large proportion of healthcare workers in long-term care facilities and in agriculture and food production sectors, are persons of colour, most of whom are racialized women (PHAC, 2021).

Increased COVID-19 exposure risk based on higher risk to inequitable living conditions is poignantly illustrated with joint surveillance data from Toronto and Ottawa where racialized populations were found to experience a 1.5 to 5 times higher COVID-19 infection rate than non-racialized populations (PHAC, 2021). In Toronto (one of the few Canadian cities that collected race-based COVID-19 data), Black people compose 9.3 percent of the city's population yet accounted for 24 percent of COVID-19 infections (Mensah & Williams, 2022). In contrast, 49.6 percent of the Toronto population are White people, where infection rates were 21.7 percent (Mensah & Williams, 2022). Collectively, these inequities in health outcomes and living conditions position racialized communities to be in a lack of control and power over their situation, reinforcing marginalization by increasing the difficulty in meeting basic needs (Regnier-Davies et al., 2022).

Using an intersectionality framework, our scoping review adds to existing literature through examination of the experiences of the disproportionate effects the COVID-19 pandemic had on the food security of Black identifying households in Canada. Specifically, this review provides a critical analysis of existing literature on the effects of the COVID-19 pandemic on Black identifying individuals in Canada and the barriers faced by these communities in meeting their food needs. Research examining food security among Black people in Canada is limited, and there remains knowledge gaps regarding how Black people differentially experience food insecurity across multiple social health determinants as illustrated through an intersectionality framework. The purpose of this review was therefore to explore how anti-Black racism across multiple systems create inequities leading to disproportionate health and social outcomes, including increased risk for food insecurity and poor health and wellbeing.

Theoretical framework

Intersectionality is a theoretical framework originally coined by Kimberlé Crenshaw through her work in Black feminism to reveal how the intersections of race and gender among Black women produce inequities (Crenshaw, 1991). Since this time, intersectionality has been applied to understanding the health and social inequities faced among historically marginalized and oppressed people (Bowleg, 2012). As described by Bowleg (2012), intersectionality can help to explain how "multiple social categories intersect at the microlevel to reveal multiple interlocking systems of privilege and oppression at the macro level". Importantly, intersectionality does not simply refer to having multiple social identities but also considers the intersection of multiple powerful interlocking systems, and the interactions between intersecting marginalized identities with macro-systems (Bowleg, 2012). In this manner, intersectionality enables understanding into how inequities at the individual level are a manifestation of dominant structures, and how a focus on intersecting structural factors can begin to address and respond to the fundamental causes of these inequities more comprehensively (Bowleg, 2012).

In the context of food security among Black people in Canada, intersectionality lends an insightful framework to provide understanding of synergistic mechanisms at play. For instance, the framework helps to explain how structural and systemic Black racism across multiple areas including education, employment, housing, and immigration create grave inequities that

directly and indirectly impede Black people from acquiring adequate and culturally appropriate food (Regnier-Davies et al., 2022). For example, systemic and structural racism leads to challenges in finding sustainable employment, acquiring higher education, having previous education, and training recognized amongst immigrants, living in secure housing, participating in civil society, and in adapting to Canadian life as an immigrant (Etowa & Hyman, 2021; Ndumbe-Eyoh et al., 2021). Having multiple marginalized identities (e.g., being a Black immigrant with language barriers) on top of bearing the risk factors to food insecurity in Canada (e.g., being a lone mother on government assistance in unstable housing) can therefore drastically compound the challenges in being food secure due to the multiple challenge faced across many systems. The synergy of these intersecting inequities in social determinants of health, particularly income, education, immigration status, racism, and housing, perpetuate the status quo, inhibiting Black people from changing their situation and making it incredibly difficult to do so. One of the results of this is heightened food insecurity risk among Black people and racialized groups. In this scoping review, we adopted an intersectionality framework to critically synthesize academic and non-academic literature on the experiences of Black people in Canada with the COVID-19 pandemic, food insecurity and the associated health and wellbeing effects.

Methods

The five-stage framework for conducting scoping reviews by Arksey and O'Malley (2005) guided this scoping review. This included the first stage of developing a research question; for this study, our question was: *"how does anti-Black-racism across multiple systems create inequities leading to disproportionate health and social outcomes, including increased risk for food insecurity and poor health and wellbeing?"* Elements of our research question deemed most important were those pertaining to the population (i.e., Black identifying people in Canada) and outcome (i.e., poor health and social outcomes related to food insecurity).

Search strategy

In line with stage two of the Arksey and O'Malley (2005) framework, we began our search by identifying literature from both published and unpublished sources. Our search, done in October to November 2022, began by creating index terms from our review question (See Appendix I. for the detailed search strategy). Current published literature relevant to our review question is limited, as revealed in a recent scoping review by Jefferies et al., (2022). Therefore, to expand our findings of work in this area, both published and unpublished literature were included. Studies published in English in 2005 or later were included; this time range was selected based on the emergence of notable Canadian immigration legislation (i.e., Ontario-Canada Immigration Agreement), which in part led to a large influx of immigrants, particularly Black people coming to Canada post millennium (Government of Canada, 2017). Based on previous findings, it is estimated that Africans accounted for 4 to 5 percent of Canadian immigrants in the early 1980s,

whereas between 2005 and 2007 rates increased to 10 to 12 percent (Statistics Canada, 2009). Published literature was retrieved through searching on the following health databases: Medline, Scopus, CINAHL, Embase, PsychInfo, and PubMed. These research databases were used due to the focus in health and social sciences which was thought to fulfill the purpose of this scoping review. Sources of unpublished grey literature that were searched included: Public Health Agency of Canada, Canadian Public Health Association, Health Canada, PROOF, Dietitians of Canada, Google Scholar, and Canadian provincial and territorial public health professionals and public health organizations' websites (City of Toronto, 2021; Food Bank of Canada, 2022; Food Secure Canada, 2023; Multicultural Health Brokers Co-op, 2022). Potentially qualifying papers were also sought via ancestry searching of the reference lists of published and unpublished studies.

Our research team consisted of two main investigators who led the search by developing search terms, and a librarian who assisted in scoping additional literature relevant to the review question. Both study authors assessed the full text of selected citations in detail against the inclusion criteria. Our search began by reviewing literature from a recent scoping review and identifying any additional studies since this time on food security in Black identifying households (Jefferies et al., 2022). We then scoped grey literature to identify and locate any reports from research, community, and/or health organizations that were centred on or included exploration into food security in Black identifying households in Canada.

Context and eligibility criteria

In stage three of the Arksey and O'Malley (2005) framework, we developed criterion for study inclusion and exclusion. Eligible studies for inclusion in this scoping review (from both published and unpublished sources) were those with a primary focus on food security in Canada among African or Black people (i.e., people of African or Caribbean descent, and/or who self-identify as Black), that were published in English. Race, including being Black is socially constructed (Bowleg, 2012), meaning it is based in markers that seek to classify people by social difference including nationality, ethnicity, and physical traits including skin colour (Dryden & Nnorom, 2021; Government of Canada, 2023). As Black people have differential access to power and resources originating from a deep-rooted history of inequities (Dryden & Nnorom, 2021), Black identifying individuals were examined as opposed to exclusively Africans. In this manner, our search would better meet the aim of this review to examine the intersectionality between race and food insecurity. A focus on Black populations (i.e., those of African or Caribbean descent) provides a deeper lens to examine the impacts of racial discrimination across various Canadian social systems faced by people of colour.

We acknowledge that there are additional marginalized groups in Canada including Indigenous peoples and people of non-White visible minorities who experience racial discrimination affecting food security status among other health outcomes, however, these groups were not the focus of this review. Additionally, the experiences of food insecurity are differentially experienced among marginalized individuals (e.g., the experience of an Indigenous person living in food insecurity is different to the experience of a person of the Black race). This review aimed to begin to illustrate

this, through the exclusive focus on Black people living in Canada. Papers were included if exclusively conducted in Canada (i.e., papers done in multiple countries such as Canada-U.S. were not included due to the non-exclusive Canadian context that would have impeded analyses in synthesizing implications to Canada specifically). Our search began with studies done in multiple countries that included Canada provided results were reported separately, however this criterion was later excluded as these studies had diverse populations of marginalized peoples with limited Black participants and/or did not assess the ethnicity of participants (Ramsahoi et al. 2022). Lastly, papers were included if published in 2005 or later, due to the emergence of notable Canadian immigration legislation at this time that resulted in a large influx of people immigrating to Canada from Africa (Government of Canada, 2017). Papers were excluded if there was not a primary focus on food security, Black and/or African populations, or were not Canadian-centred.

Types of sources

This scoping review considered for inclusion published peer-reviewed quantitative, , and mixed method studies, as well as unpublished grey literature. Systematic reviews and opinion papers were also considered for inclusion in this review.

Following the search of all published literature, identified citations were uploaded into Covidence; duplicates and articles that did not meet the eligibility criteria were removed.

Data extraction

In stage four of the Arksey and O'Malley (2005) framework, each qualifying paper was analysed in full with key details extracted in a tabulated chart. The two researchers independently extracted data from the papers included in this scoping review. To identify key aspects and emergent themes from eligible studies, the researchers extracted information about the study population, study design, Canadian region, purpose, methods, results, strengths, limitations, and main conclusions. (See Table 1 for the extracted information from each of the included articles). Data extraction of these fields enabled a comprehensive and objective analysis of studies, while providing the necessary details to answer our review question. For example, details about the study population (e.g., Black immigrants) in connection to the Canadian region (with consideration to relevant social, political, and economic factors) enabled the examination of inequities towards Black people from an intersectionality framework. Study

authors regularly met to ensure consistency with the review question and scoping review purpose, and manually determined major intersectionality is addressed in articles. In the event of disagreements in analyses of articles, study authors both re-read articles and reached consensus after further discussions. Similar procedures were adopted for the extraction of data from grey literature.

Lastly, and as part of the final fifth stage of the Arksey and O'Malley framework (2005), we collated the study results through a narrative and analytical summary. As this paper adopted an intersectionality framework, main results from studies were presented with consideration to the multiple intersecting social identities of Black people that are intensified by anti-Black racism across oppressive systems and structures Figure 1: Search and selection flow chart.



Synthesis of results

Study description

Our search produced 419 published articles; following removal of duplicates, abstract and full text screening, twelve studies met inclusion criteria. Eligible studies are detailed more thoroughly in the PRISMA flow chart diagram (Figure 1). While our inclusion criteria for study publication was 2005 or later, all eligible studies were published between 2017 and 2022. Studies included a combination of qualitative (n=2), quantitative (n=6), and mixed methods (n=2) research designs, including 1 scoping review (Jefferies et al., 2022) and 1 commentary (Regnier-Davies et al., 2022). Five studies (Bhawra et al., 2021; Blanchet et al., 2018; Kengneson et al., 2021; Moffat et al., 2017; Regnier-Davies et al., 2022; Tarraf et al., 2018) were done in Ontario. Half of the studies (n=6) included data from large metropolitan cities in multiple provinces (Bhawra et al., 2021; Dhunna & Tarasuk, 2021; Doan et al., 2022; Jefferies et al., 2022; Logie et al., 2018; Pepetone et al., 2021) and 1 was based in Edmonton (Quintanilha et al., 2019). All studies examined food security explicitly, with the exception of one by Doan and colleague (Doan et al., 2022). This paper (Doan et al., 2022) was still included as it focussed on perceived income adequacy, diet quality, and inequalities in food access for Black identifying individuals; interrelated concepts under the construct of food insecurity.

Our search of grey literature led to the identification and review of 59 articles. Of these, 56 were excluded and 3 were included (Figure 1). These included the following reports: PROOF (Tarasuk et al., 2022), Toronto Black Food Sovereignty Plan (City of Toronto, 2021), and the Alternative Federal Budget Recovery Plan (CCPA, 2020). These reports were included as there was reference or connections to food security in Black indiciduals or households in Canada.

Results

Published studies

Pre-COVID-19 food security in Black identifying individuals in Canada

With the exception of one article (Regnier-Davies et al., 2022), data collection from the remaining eligible studies (n=12) were conducted pre-COVID-19. Recurrent themes identified regarding food security of Black identifying populations included health concerns (i.e., physical, mental, and social), cultural concerns (e.g., difficulty in maintaining cultural eating habits due to financial and geographical constraints), and nutrition concerns (e.g., compromised dietary quality). Multiple studies identified food insecurity to be a racialized issue (Bhawra et al., 2021; Dhunna & Tarasuk, 2021). Black identifying households had higher rates of marginal, moderate, and severe food insecurity with 1.88 greater odds of living in food insecurity relative to White households (Dhunna & Tarasuk, 2021; Tarasuk et al., 2022). Risk remained higher even after controlling for socioeconomic risk factors of food insecurity (e.g.,

education and immigration status), suggesting the implications of racial discrimination (Dhunna & Tarasuk, 2021; Tarasuk et al., 2023; Tarasuk et al., 2022; Tarraf et al., 2018). Further analyses identified differences in accessing social assistance between Black and White people living in Quebec. While Quebec has greater social support systems relative to other Canadian regions given a more liberal platform, being a Black person in Quebec was found to not be a protective factor to food insecurity in comparison to the protective effects seen for White people living in Quebec (Dhunna & Tarasuk, 2021). From a sociodemographic lens, Black Canadian youth were found to be at higher risk of moderate and severe food insecurity compared to White people or non-visible minority youth (Bhawra et al., 2021).

Intersection of race, education, employment, and income

Regarding education status, Tarraf et al. (2018) found language barriers among Black people, particularly Black migrants, inevitably preclude stable employment conditions. Similarly, young Canadian adults that selfidentified as a Black or Indigenous person, with selfreported financial difficulty and who had a low (i.e., less than university) education, were found to be at a two or more times increased risk of food security compared to adults who did not identify as Black or Indigenous (Pepetone et al. 2021). These pronounced effects are suggested to be due to powerful interwoven systems that create positive feedback loops of intergenerational poverty, compromising health and food security risk of those marginalized, including racialized people (Pepetone et al. 2021).

Intersection of race, stable housing, and safe neighbourhoods

With respect to housing, it was identified that COVID-19 has had worsened housing financial impacts among Black identifying individuals in Canada, relative to the dominant majority (Dhunna & Tarasuk, 2021; Etowa & Hyman, 2021; Logie et al., 2018; Tarraf et al., 2018). Living in stable housing was found to exert powerful effects on household food security, due to its close links to poverty (Dhunna & Tarasuk, 2021). Depending on the severity of food security, this can for instance include changes to the quality and/or quantity of foods purchased and consumed as well as the utilization of emergency food services (Kengneson et al., 2021).

Intersection of race, immigration status, and social inclusion

Although research has demonstrated a reversed interaction between household food security and duration of stay in destination countries and cities, Dhunna et al. (2021) found that higher household food insecurity among African immigrants in Canada persisted even after controlling for immigration status. Beyond accessing food, is the question of whether that food is culturally appropriate (Quintanilha et al., 2019). Ramifications of inadequate finances among Black immigrants included heightened household food insecurity risk due to effects in hastening dietary acculturation (Blanchet et al., 2018; Tarraf et al., 2018). Specifically, limited resources and inflated food prices influenced the type of foods accessed, leading to the acquisition of lower nutrient dense processed foods and fast-food meals due to lower costs (Blanchet et al., 2018; Tarraf et al., 2018).

With consideration to the notable role food plays in Black culture, associated challenges in accessing and eating cultural foods among Black immigrants was found to lead to the disruption of social networks (Blanchet et al., 2018; Quintanilha et al., 2019). These effects were plausibly amplified during the COVID-19 pandemic, when stay at home orders to isolate or quarantine were in full effect worldwide. For example, inabilities to practice food traditions (e.g., sharing meals and eating fresh traditional foods daily) due to low incomes and high food prices, geographical constraints impairing access, and cultural changes in adapting to Canadian life, were found to aggravate the loss of cultural identity and social isolation (Blanchet et al., 2018; Quintanilha et al., 2019).

Effects on health of black identifying individuals in Canada

The cumulative effects of Black inequities affecting food insecurity were found to be far-reaching with adverse outcomes to physical, mental, and social health (Quintanilha et al., 2019). Food insecurity adversely compromised nutrition by impeding the ability to acquire nutrient dense foods, which are paradoxically more expensive. In its severe forms, it impeded the ability to prioritize the nutritional value of food, as detailed among food-insecure Black Canadian young adults (Pepetone et al., 2021). Likewise, racial identity and perceived income adequacy adversely influenced dietary quality of Black people relative to White people (Doan et al., 2022). Similar effects were found among Black immigrant women and their children and youth in food insecure households, where there was additionally higher risk of obesity due to lower socioeconomic status that led to diets with high proportions of highly processed foods (Bhawra et al., 2021; Kengneson et al., 2021). Further, Quintanilha et al. (2019) found that among Somalian immigrant women living in food insecurity, limited income to purchase adequate quantities of food, and the lack of control over the types of foods to offer their families particularly those culturally appropriate due to dependence on community supports and inability to change their situation, was a cause of substantial stress.

Grey literature

Tarasuk et al. (2022) similarly found heightened risks to food insecurity among Black peoples relative to nonracialized peoples in the latest PROOF report. Within this report, Black people were found to be at increased risk for food insecurity, with 22.4 percent of Black households living in food insecurity in contrast to 13.2

percent of White people or non-visible minority households, and that nearly 1 in 5 (17.2 percent) Black households are living in moderate or severe food insecurity (Tarasuk et al., 2022). Likewise, in the Alternative Federal Budget Recovery Plan (CCPA, 2020), which includes metrics examining the effects of COVID on food security, Black households were found to be 3.5 times more likely to be living in food insecurity relative to White households. Notably, this report explicitly outlined the need for all people in Canada to have access to good, healthy, and *culturally* appropriate food, which is highlighted to be possible through the acknowledgement of health inqueties towards Black people, and the dedicated allocation of funds to support the development of culturally tailored health and well-being supports (CCPA, 2020). Further, it reveals there is a vital urgency to have Black, racialized, and Indigenous voices represented within policy decision making, in order to create more equitable and sustainable food systems for all (CCPA, 2020). At a community level, the Black Food Sovereignty Working Group (2022) found that 63 percent of organizations that support food needs of Black individuals in Canada were found to be at increased risk of running out of funding within six months or shorter. A "systems approach" to address food insecurity in Black identifying households, i.e., addressing the underlying structural roots of anti-Black racism pervasive across powerful systems, are the main goals behind the Black Food Sovereignty Working Group (2022) which runs a community co-leadership model under their mandate to be "Black-led, Blackserving, and Black run." Through their work, five key pillars to address food in security in Black households in Canada that have been identified include to: 1. Create sustainable funding and community capacity building; 2. Provide access to growing space; 3. Create accessible infrastructure; 4. Strengthen food hubs that support

food needs of Black individuals in Canada and cultural markets; and **5**. Foster culturally rooted community health and nutrition programs.

Discussion

Food security of Black identifying individuals in Canada Post-COVID-19

Increased vulnerabilities among marginalized groups to COVID-19's financial impacts are inherently tied to the high engagement in precarious work that visible minorities occupy (Statistics Canada, 2021). Such work confers less protection from income losses incurred from COVID-19 related work interruptions including job losses and reduced work hours (Statistics Canada, 2020). The intersectionality between race, education, employment, and income elucidates why Black identifying individuals in Canada faced disproportionate COVID-19 economic shortfalls. The protective effects education confers to higher income and stable employment traditionally, are not seen with Black communities, with recent Canadian findings showing 7/10 Black people are highly educated (postsecondary degree or diploma) yet faced unemployment rates nearly double that of White people (9.2 percent, versus 5.3 percent, respectively) (Statistics Canada, 2020). As detailed in pre-COVID research among Black migrant households, this is in part due to 'professional downgrading' in which previous skills and education obtained in one's home country are not recognized (Tarraf et al., 2018). The direct aftermath of this in conjunction with occupational segregation rooted in a longstanding history of racial power dynamics, leads Black people to fill lower-paying jobs, often involving large physical tolls, long laborious shifts, and limited job

security (PHAC, 2021). Anti-Black sentiments rooted in White supremacy are captured in, for example, employer's 'lack of fit' claims (such as accents) as rationale for not hiring or promoting skilled minority candidates (Decent Work and Health Network, 2020). Amid an already scarce labour market that predominated during the COVID-19 pandemic, these inequities among Black people in seeking employment placed additional pressures on financial stability (Mensah & Williams, 2022), which has resultant effects on one's food security status.

Housing and food insecurity in Black identifying households in Canada

Etowa and Hyman (2021) showed that nearly 50 percent of African Canadians struggled to pay mortgage or rent on time and faced increased (45 percent relative to the national average of 36 percent) anxieties about being able to pay rent. As housing is the largest Canadian family expense, during financial constraints food tends to be less prioritized (Tarasuk et al., 2022). Further challenges in seeking stable housing have been attributed to landlord discrimination towards tenants who were Black people; inequities stemming from landlords imposing exclusionary screening, refusal to rent, or financial barriers such as increases to first and last month's rent (PHAC, 2021). Furthermore, evidence also shows that African immigrants tend to be segregated in more disadvantaged neighbourhoods due to lower housing costs (Afri-Can FoodBasket, 2023). Such neighbourhoods have a characteristic preponderance of convenience and fast-food stores selling an overabundance of highly processed foods, a considerably lower number of stores selling culturally familiar foods and are greater distances away from fresh foods offered at mainstream grocery stores (Engler-Stringer et al., 2014; Luo, 2020; Yang et al., 2020). These differences in the physical spaces Black peoples occupy highlight inequities in the built environment, whereby the duality of food deserts (lack of healthy foods) and food swamps (overabundance of unhealthy foods) among Black peoples heighten risks to food insecurity, cultural food insecurity, and chronic diseases (Kengneson et al., 2021) such as obesity.

Food security and immigration status of Black identifying individuals in Canada

Gaps in meeting cultural food needs are revealed in the prominence of many unfamiliar Western, mostly nonperishable foods offered at conventional food banks (Food Bank of Canada, 2022), which were unable to effectively meet the needs of Black immigrants due to the lack of cultural foods available, particularly those fresh (Moffat et al., 2017). In consideration to food security in Canada being principally addressed through the large focus on short-term food provisions, the lack of representation of cultural foods can be incredibly disheartening, especially in context to food serving purposes beyond sustenance. As detailed by Blanchet et al. (2018), Moffat et al. (2017), and Quintanilha et al. (2019), the inability to access or receive culturally appropriate foods disrupts cultural practices by disacknowledgeing one's cultural identity. In this manner, cultural food insecuirty can have many cascading negative effects on one's social and mental health.

Food security and health effects of Black identifying individuals in Canada

With consideration to the higher rates of chronic diseases including Type II diabetes, obesity, chronic stress and hypertension afflicting Black communities, the lack of fresh foods offered at traditional community organization food programs and services has the detrimental potential to aggravate worsening health outcomes (Etowa & Hyman, 2021). Pressures to household food insecurity amid the pandemic adversely affecting mental and physical health are revealed in figures indicating Black people experienced an estimated 61 percent decrease in income, and 50 percent higher economic vulnerabilities relative to mainstream society including a nearly doubled risk to financial difficulties in meeting basic necessities than non-visible minorities (Etowa & Hyman, 2021; Statistics Canada, 2021). As revealed in previous research (Tarasuk et al., 2022), income constraints particularly those acute often leads to one's food intake being modified, which comes at the expense of nutrition.

Effects of COVID-19 on food security of Black identifying individuals in Canada

Previous research has revealed the disproportionate effects of COVID-19 on the Black community, described illustratively with the statement *"we're not all in this together"* (Bowleg, 2020; O'Connell & Brannen, 2020). This is explained by the notable intersectionality of social determinants of health including racism, income, employment, unstable housing, and social exclusion. Further, despite the absence of race-based COVID-19 data in Canada, a large portion of marginalized peoples including Black people were plausibly affected given the high prevalence of Black people in low-pay frontline and service sector jobs who faced increased risks of being laid off, having reduced work hours, and being denied paid sick leave (Etowa & Hyman, 2021; Statistics Canada, 2021).

Higher rates of unemployment among the Black community (5.3 percent vs 3.7 percent among nonvisible minorities) have been found during COVID-19 (i.e., January 2020 to January 2021). Similarly, between November and December 2021, unemployment among Black Canadians was found to be 13.1 percent, 70 percent higher than rates among non-visible minorities (7.7 percent). Stratified by age, rates of unemployment were also higher among Black identifying Canadians of 25 to 54 years old (9.4 percent versus 6.1 percent), and youth 15 to 24 years old (30.6 percent versus 15.6 percent) as compared to the mainstream Canadian population of similar ages (Statistics Canada, 2021). Given the inextricable links stable employment and subsequent income has on food insecurity status, high unemployment rates among Black peoples during COVID-19 likely exerted pronounced negative effects on one's food security.

For instance, in the face of financial strain to meet basic amenities, marginalized Canadian populations experienced dilemmas of either going to work sick or

being unable to put food on the table (Decent Work and Health Network, 2020). This is evidently connected to the large prevailing paid sick leave gap in Canada, which predominates low-income jobs disproportionately composed of racialized workers. In Canada, creation of the Canada Emergency Response Benefit (i.e., CERB) provided short-term assistance for people financially impacted by COVID-19 (Government of Canada, 2022), and arguably an additional aid to help those who were food insecure. While beneficial to those eligible, CERB was a temporary (i.e., 4 months) federal support program (Government of Canada, 2022) that has yet to be replaced with any form of long-term permanent support. Currently among Canadian jurisdictions, only Quebec, Prince Edward Island, and federally regulated workers mandate employers to provide employees paid sick leave for short-term illness, situating Canada to fall grossly behind other wealthy developed countries (Decent Work and Health Network, 2020). While all remaining provinces and territories created emergency leaves for COVID-19 related illness, lack of federal mandates to ensure they are paid, in full, results in employee income protection being at the discretion of individual employers (Statistics Canada, 2021). The additional uncertainties from long wait times to receive federal support such as CERB, led racialized workers particularly racialized women to bear already low incomes and the resulting financial pressures (Decent Work and Health Network, 2020), including finding the means to meet basic needs such as those for food.

These social inequities are largely driven by capitalism; whereby African Canadians who are traditionally lower income earners are expected to participate in and stimulate the economy for capital gains at the hands of the few and powerful White people that comprise the dominant majority. In this manner, capitalism has inarguable ties to racism and upholding White supremacy as it serves to privilege those who are better off through competition and oppressive systems (Mensah & Williams, 2022). These systems create conditions that disadvantage racialized groups; disproportionate economic constraints faced among marginalized groups including African Canadians relative to mainstream society impede the ability to meet basic needs. With the wide range of social and economic inequalities among racialized communities revealed by the COVID-19 pandemic (Mensah & Williams, 2022), and record inflation including escalating food prices (Tarasuk et al., 2022), the pandemic has intensified the state and severity of food insecurity in Black identifying households in Canada.

Strength and limitations

A major strength of this review was the novel contribution to unpacking the specific, interrelated, and complex effects that the pervasiveness of anti-Black racism has on the food insecurity risk of Black people living in Canada, including the effects from the recent COVID-19 pandemic. Additionally, our review was guided by the methodological framework for scoping reviews created by Arksey and O'Malley (2005) and

Conclusion

While there is urgency in policy developments to address food insecurity in Canada, addressing food insecurity in minority households such as those headed by Black identifying individuals will require an intersectoral approach and policies informed by an intersectionality framework to address underlying structural and systemic inequities rooted in anti-Black racism.

This has been explored in this review through examination into the intersectionality of race with multiple social determinants of health across powerful systems facing Black people in Canada. included a range of study designs. Despite the original contributions of this work, weaknesses of this research include the inherent limitations of a scoping review in that the robustness and quality of studies was not assessed. Further, while Canadian research in this topic area is quite limited, it is possible that some relevant research were excluded due to the time when the search was conducted.

At the community level, proposed changes in community settings can help individuals connect to appropriate supports while promoting social health through fostered relations (Logie et al., 2018). With respect to migrant health, policies need to account for cultural diversity and fully recognize migration as a social determinant of health to facilitate successful integration into the Canadian economy (Quintanilha et al., 2019).

Similarly, as economic constraints and food availability impose dietary acculturation on immigrants, targeted strategies are needed (Blanchet et al., 2018). This includes the provision of culturally appropriate food at food banks and the provision of a guaranteed basic income (Blanchet et al., 2018), including greater income support to immigrants (Moffat et al., 2017). National food and social policies need to also account for these inequities (Tarasuk et al., 2022) through policies that are culturally inclusive and representative (Quintanilha et al., 2019; Tarasuk et al., 2023; Tarasuk et al., 2022).

Amongst government and non-government organizations, policies are needed that produce food system changes to provide healthier, sustainable food for all, as integral pillars to one's overall physical, social, and mental health (Moffat et al., 2017). A commitment to collect race-based data disaggregated by race is imperative, as racial disparities can only be fully addressed with acknowledged data that confronts the issue. Furthermore, engagement with the Black community will be a vital first step to affect meaningful systemic change. The CERB payment, while temporary and provisional to few vulnerable populations including racialized peoples engaged in precarious work, needs to be replaced with longer term support to assist individuals in economically bouncing back post-COVID-19 including individuals who experienced job loss or reduced work hours. Likewise, the lack of federally mandated sick leave paid in full, needs to be acknowledged as a serious public health threat with immediate steps taken to implement support nationwide. Such measures are critical in applying COVID-19 learnings in planning for a foreseeable pandemic in the future.

Search strategy

| Medline | |
|--|-----|
| (Food* and Black* and Canad*).mp. [mp=title, book title, abstract, original title, name of substance word, subject heading word, floating sub-heading word, keyword heading word, organism supplementary concept word, protocol supplementary concept word, rare disease supplementary concept word, unique identifier, synonyms] | 120 |

| Scopus | |
|--|----|
| (food AND secur* AND canad* AND africa*) | 49 |

CINAHL

| Food sec* AND Africa* AND Canad* | 19 |
|----------------------------------|----|
| food sec* AND Black AND Canada | 35 |

| Embase | |
|-----------------------------------|----|
| (black* and food sec* and Canad*) | 12 |

| PsychInfo | |
|--|----|
| (Canada and food and immigrant).mp. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures, mesh word] | 27 |
| (Canada and food and black).mp. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures, mesh word] | 24 |
| (Canada and food and Africa*).mp. [mp=title, abstract, heading word, table of contents, key concepts, original title, tests & measures, mesh word] | 24 |

| (Canada and food sec* and Africa*).mp. [mp=title, abstract, heading word, table of contents, key | 3 |
|--|---|
| concepts, original title, tests & measures, mesh word] | |

| PubMed | |
|------------------------------------|----|
| food secur* AND Black* AND Canad* | 10 |
| food secur* AND Africa* AND Canad* | 50 |

| Google Scholar | |
|--|---------|
| Black* AND food security* AND Canada* [Filtered for Year: 2005-2022] | 147,000 |

| Table 1. | able 1. List of Included Studies and Key Findings | | | | | | | | | |
|----------|---|---------------|-------------|------------------|---------------------------|-----------------------------------|--------------------------------|----------------------------|--|--|
| Autho | Study | Study Design | Canadian | Purpose | Methods | Results | Limitations | Key Messages | | |
| r, Year | Population | | Location | | | | | | | |
| Jefferi | African | Scoping | Canada. | Examine the | Scope of food security in | All studies were in adults | Small sample size (n=5), | Food insecurity | | |
| es et | Canadians | Review | Of n=5 | current state of | Black identifying | identifying as a migrant, | though reflective of the lack | disproportionately affects | | |
| al, | | | included | food security | individuals in Canada, | immigrant, or refugee. Factors | of research in this topic, | African Canadians. A | | |
| 2022 | | | studies, 1 | in African | no publishing date | increasing risk of African | majority in urban settings; | greater focus on diversity | | |
| | | | was | Canadian | restriction. Included if | Canadians to food insecurity | many provinces/territories | of diets and dietary | | |
| | | | national, 1 | communities, | based in Canada, | (FI) were: low education, | excluded. No examination | practices in Canada's Food | | |
| | | | AB, 3 ON. | to increase | examined African | reliance on social assistance, | of African Nova Scotians, | Guide is needed. Further | | |
| | | | | understanding | communities | single mother, recent | who are known to suffer | research examining the | | |
| | | | | and to aid in | (exclusively African | immigrant (< 5yrs), low | significant social justice and | intersectionality of sDOH | | |
| | | | | future research | population OR a | income. FI was more common | human rights violations. | among African Canadians | | |
| | | | | | broader population with | for Africans in ON and QB | | is needed to understand | | |
| | | | | | inclusion of African | (compared to BC), those with | | the effects of food | | |
| | | | | | people), and food | drug dependency, and those | | insecurity more | | |
| | | | | | security. | facing racial discrimination. | | comprehensively. | | |
| | | | | | | Accessing adequate amounts | | | | |
| | | | | | | of healthy food was a | | | | |
| | | | | | | challenge for families with | | | | |
| | | | | | | school children. African | | | | |
| | | | | | | mothers felt food from food | | | | |
| | | | | | | banks was poor quality, highly | | | | |
| | | | | | | processed or unfamiliar. | | | | |
| | | | | | | Cultural traditions were | | | | |
| | | | | | | believed to increase FI. | | | | |
| Kengn | Black | Cross- | Ottawa, | Examine | In-person interviews | Black immigrant women and | Cross-sectionality study so | Further research is needed | | |
| eson et | immigrant | sectional, | ON | factors | with a RD. | their children are at higher risk | cannot examine temporality, | on Black immigrant | | |
| al, | mothers of | mixed methods | | associated with | Socioeconomic data | of obesity. Children living in | self-reported data, not | feeding practices among | | |
| 2021 | African or | | | feeding | collected; household | household food insecurity | generalizable beyond | children. Longitudinal | | |
| | Caribbean | | | practices of | food security was | (HFI) are more likely to have a | Ottawa, relatively small | studies could determine | | |
| | descent with | | | Black | assessed using the | higher proportion of less | sample size. | broader effects. | | |
| | at least 1 | | | immigrant | Household Food Security | nutrient dense/more | | | | |

| Logie et al, 2018 | child 6-12yo. n=188 Women living with HIV, 16 yo+. n=1403. Women were part of the <i>Canadian</i> HIV Women's Sexual & Reproductive Health Cohort Study. | Cross- sectional, quantitative study | B.C., ON, QB | mothers with their kids, in Ottawa. Examine factors associated with separate and concurrent experiences of food insecurity and housing insecurity, among Canadian women living with HIV (WLHIV) | Module. Maternal feeding practices were assessed using the Child Feeding Questionnaire 5- point Likert scale. Study employed a community-based research method. Housing insecurity (HI) was assessed as 'insecure' or 'secure' based on questions regarding residence and difficulty in paying housing costs. Household Food insecurity (HFI) was assessed using an adapted form of the Household Food Security Survey Module. | processed and ultra-processed foods in their diet due to lower SES. Household income (<\$50K/yr) and HFI were significantly associated with maternal restrictive feeding practices with their children. Sociodemographic factors were associated with HFI and HI. Being African, Caribbean, or Indigenous was positively associated with HFI, HI, and living with both HFI/HI compared to risk among White people. Living in ON and QB was associated with increased odds of HFI, HI, and combined HFI/HI. Those injecting drugs were more likely to experience combined HFI/HI. Racial discrimination was associated with higher odds of HFI and combined HFI/HI (due to difficulty in finding adequate | Purposive non-random sampling limits generalizability of findings, cross-sectional study design, only examined ON/QB/BC, assessment of HI was not comprehensive. | HFI and HI were associated with visible minorities, social inequities, and substance use. Changes in community settings could help to promote health and connect WLHIV with appropriate support. |
|-------------------------|--|--|-------------------------------|---|---|--|--|--|
| Doan et al, 2022 | n=2540 adults (18y0+). Participants were part of the 2019 International | Cross- sectional, quantitative observational study | National (10 provinces) | Examine the relationship between racial identity and perceived income adequacy on dietary quality | The U.S. HEI-2015 was used to assess diet quality. Racial identity, perceived income and sociodemographics were assessed due to their influence on race and diet. | employment). Perceived income adequacy was independently associated with dietary quality (HEI scores). Racial identity was not. The interaction between perceived income adequacy and racial identity was positively associated with HEI | Self-reported data, measures used to assess dietary quality didn't account for cultural practices, sample size was not nationally representative (there were low populations of individuals identifying as racialized in this study). | Racial identity and perceived income adequacy seem to jointly influence dietary quality. The intersection of race and sociodemographic factors lead to health inequities that can have |

| Bhawr a <i>et al</i> , 2021 | Food Policy Study. Canadian young adults 16-30yo. Participants were from the Canada Food Study, sample n=2149. | Observational, quantitative study (online survey) | Toronto, Montreal, Vancouver , Edmonton , Halifax | (based on the <i>Healthy Eating</i> <i>Index</i> ; HEI, 2015). Examine the association between sociodemograp hic factors, self-reported health, and food insecurity in young Canadians. | Assessed data from the 2016 data collection cycle of the <i>Canada</i> <i>Food Study</i> . Randomized cluster in-person sampling used to select participants. Dietary intake was assessed with 2 Self-Administered 24hr dietary recalls. Household food security was assessed using the <i>Household Food Security</i> <i>Survey Module</i> . | scores. Self-identifying Black people with income inadequacy or adequacy had lower HEI scores, compared to White people reporting income adequacy. Young adults who were Black or Indigenous were more likely to live in moderate or severe household food insecurity (HFI) compared to Canadian youth identifying as part of another race. Respondents identifying as normal weight or overweight were less likely to report living in HFI, compared to Canadian youth identifying as obese. Severe HFI was associated with poor mental health, dietary quality, and overall health. | Cluster sampling used so may not be representative of the Canadian population; self-reported dietary intake, in-person sampling may have led to response bias, cross-sectional study, did not measure reliance on social assistance programs, didn't assess rural communities. | negative effects on dietary quality of racial groups. Food insecurity is a racialized issue, with Black and Indigenous peoples experiencing higher rates and risk of HFI relative to non-visible minorities. Beyond income, other sDoH intersect with racial inequities to compound the negative effects of HFI among marginalized groups. This includes structural racism in education, employment, and housing. HFI affects mental, physical, and social health, with more serious implications on |
|---|--|--|--|--|--|--|--|---|
| Pepeto ne <i>et</i> <i>al</i> , 2021 | Canadian young adults 16-30yo. Participants were from the <i>Canada</i> <i>Food Study</i> . Sample n=2729; | Observational, quantitative study (online survey) | Toronto, Montreal, Vancouver , Edmonton , Halifax | Examine the association between household food security status, food skills, health literacy, and home meal | Assessed data from the 2016 data collection cycle of the <i>Canada</i> <i>Food Study</i> . Household Food Security status assessed using the <i>Household</i> <i>Food Security Survey</i> <i>Module</i> . Food skills were | After adjusting for sociodemographic variables, there was no difference in food skills amongst men and women of similar household food security status. Black and Indigenous men and women who reported financial difficulty and had low | Cross-sectional data, self- reported data, did not account for rural communities. | youth. Men and women with lower health literacy were more likely to live in HFI, however this is likely due to the effects of other intersecting sDoH such as unstable housing, lower education, and lower income. Individuals living |

| | n=1389 men and n=1340 women. | | | preparation among Canadian young adults. | assessed with a question regarding cooking skills. Health literacy was assessed with an adapted version of the <i>Newest</i> <i>Vital Sign</i> . Race was assessed based on racial background and Indigenous identity. | education were 2 or more times more likely to live in household food insecurity (HFI). | | in HFI have strong food skills, however accessing food supersedes the ability to consider the nutritional quality of food. HFI can thereby negatively impede food preparation, resulting in adverse health effects. |
|--|---|--|---------------|--|---|---|--|--|
| Dhun na and Tarasu k, 2021 | Canadian Community Health Survey (CCHS) respondents. Total sample n=491,364. | Observational cross-sectional, quantitative study. Examined 2004-2014 CCHS health data. | Canada | Assess vulnerability of Black Canadians to food insecurity, relative to White Canadians. | This study used data from the 2005-2014 CCHS cycles. Household food security over the past 12 months was measured with the <i>Household Food Security</i> <i>Survey Module</i> (HFSSM). Household food insecurity (HFI) was measured in absolute terms (insecure/secure), and by level (marginal, moderate, or severe). | Black households had 1.88 greater odds of HFI than White households. Being a White immigrant was a protective factor against HFI; this was not found for Blacks. Higher HFI risks among Black people remained even after controlling for immigration status and education level. Black renters had almost a 3- fold greater probability of HFI compared to White homeowners. Living in QB was a protective factor against food insecurity for White people; this was not found for Black people in QB. | Data did not account for 2015 onwards due to changes in CCHS survey sample in 2015, cross- sectional data, self-reported data, sample size of Black people was relatively small, lack of data on: household income stability, subgroups of immigrants, nature of employment, and wealth/assets). Did not assess racial discrimination in depth. | HFI is a racialized issue that disproportionately affects Black Canadians. Effective policies addressing HFI are needed using an intersectional lens that accounts for anti- Black racism rooted in structural and systemic inequities. |
| Tarraf <i>et al</i> , 2018 | Mothers (n=182) from Sub-Saharan Africa or the Caribbean, living in Ottawa, who | Cross- sectional, observational study, quantitative | Ottawa, ON | Determine the prevalence and determinants of food insecurity among Sub- Saharan | In-person individual interviews with mothers. Household food insecurity (HFI) was assessed with the <i>Household Food Security</i> <i>Survey Module.</i> HFI was | 45% of families were living in HFI. Households ranged from 2-13 members. About 75% of mothers had post-secondary education. Household food insecurity (HFI) was more likely if the mother was: not | Convenience sampling, small sample size, only assessed migrants in Ottawa, self-reported data, cross- sectional study, non-English fluency could have impacted comprehension of | Education is not a protective factor against HFI among Black migrants due to prior education not being recognized (i.e., "professional |

| had a chil between o years old. | 5-12 | | African and Caribbean migrants in Ottawa. | assessed by 2 combined scales - the Adult Food Security Scale, and the Child Food Security Scale. Interviews were done by a RD and research assistant and were made culturally appropriate. | English-fluent, not working, lacked vehicle access, lived in subsidized, cooperative, or temporary housing, had lower education, was a lone mother, was a recent (=<5yrs) migrant, or was a refugee. ~1/3 of families were living in moderate or severe HFI. Reliance on social assistance was associated with higher risk for HFI. | questions, did not assess how lack of culturally appropriate food may have contributed to HFI. | downgrading"); this is heavily influenced by racialization. Lack of access/information to obtain culturally appropriate food is a barrier to HFI. Limited English (proxy for both employment and income) can heighten one's risk for HFI due to the effects on employment. |
|---|------|----------------|---|---|--|---|--|
| Regnie Black r- Toronton Davies s accessin et al, services fr 2022 Black Food Toronto | g | Toronto, ON | Provide arguments of the need for charitable food programs, as effective strategies that can collaboratively reduce Canadian household food insecurity (HFI). Arguments based on BlackFood Toronto (a recent Black food sovereignty initiative | N/A - Commentary | Charitable food programs should not be generalized as one overarching entity due to implications in local policies and practices, by failing to recognize the nuances among community-based programs that address food equity. In response to rising HFI among Black people in Toronto during COVID-19 and traditional food banks not serving the cultural needs of the African, Caribbean, and Black (ACB) community, <i>Afri-Can Food Basket</i> (AFB) created <i>Black Food Toronto</i> (BFT) with a focus on food sovereignty, under a 'Black- led, black-mandated, black- serving' mandate. Rooted in | Commentary, exclusive to Toronto (i.e., Toronto- based food program, 'case- study') | Higher rates of FI among Black people are rooted in structural inequities. This is due to social and physical environments that create and perpetuate continuing cycles of oppression and marginalization due to prevailing values of White supremacy, racial capitalism, and patriarchy. These inequities amongst Black people are visible in diverse power systems including education, health, the judicial system, and immigration - which are factors that make access to food more difficult for Black people. |

| Quint anilha et al, 2019 | n=213 immigrants in Edmonton. Included n=17 Somali immigrant women. | Mixed methods | Edmonton , AB | created in response to rising HFI among Blacks), as an illustrative example. Determine the prevalence and experiences of household food insecurity (HFI) among immigrant women connected to the Multicultural Health Brokers (MCHB) perinatal program. | HFI was assessed using the <i>Household Food</i> <i>Security Survey Module</i> . African and Middle Eastern women experiencing higher rates of HFI were invited to follow-up interviews to understand HFI more comprehensively, in relation to their pregnancies. This included a group of Somali women (n=17). | Black leadership and self- determination, this program exemplifies how community agency creates structures that support the ACB community by dismantling anti-Black racism in the food system and building autonomy by leveraging community resources. Key barriers to HFI included not having enough money to buy fresh vegetables, fruit, meat, and having a lack of foods to prepare for their families. A significant proportion of African and Middle Eastern women reported being severely FI (60%, n=118), compared to immigrant women from other countries. Lack of control was frequently noted in connection to the substantially different diet | Small sample size, small sample of individuals identifying as African (n= 17) of which were all Somali (i.e., did not account for other areas in Africa and/or Caribbean) | Given the higher rates of HFI among immigrant women, and the compounded vulnerabilities of HFI among immigrant prenatal/postnatal women, economic policies to provide income protection and greater social assistance are needed. This is integral for immigrants and refugees, in particular. Policies must account for cultural |
|-----------------------------------|--|------------------|------------------|---|--|--|---|---|
| | | | | program. | | quality of Somalian women back home and was a source | | diversity and help migrants integrate into the |
| | | | | | | of substantial stress. | | local economy. |
| Blanch | Immigrant | Qualitative | Ottawa, | Examine the | Semi-structured | All mothers interviewed | Small sample size, limited to | Economic constraints and |
| et <i>et</i> | mothers from | | ON | dietary | interviews were | reported a bicultural diet (i.e., | Ottawa, cross-cultural | food availability imposed |
| al, | Sub-Saharan | | | acculturation | conducted in English or | incorporation of traditional | which can limit | dietary acculturation on |
| 2018 | Africa or the | | | process of first- | French, depending on | and Western Canadian dietary | generalizability of findings, | immigrants. Strategies to |
| | Caribbean, | | | generation | mother's preference. | practices). Accelerating factors | interviews not done in the | address these impacts |
| | living in | | | immigrant | Household food | included: food access (cost | participants mother tongue. | include provision of |

| | Ottawa; | | | families from | insecurity (HFI) was | and availability, poor access to | | culturally appropriate |
|--------|----------------------|-------------|-----------|-------------------|------------------------------------|-----------------------------------|------------------------------|------------------------------|
| | n=12 | | | sub-Saharan | assessed using the | traditional foods, greater | | food at food banks, |
| | mothers. | | | Africa or the | Household Food Security | access to Western foods, | | provision of a guaranteed |
| | mouners. | | | Caribbean | Survey Module. | greater food insecurity and | | basic income, and |
| | | | | living in | Survey 1v10uute. | food bank use), convenience | | initiatives that enhance |
| | | | | Ottawa, to | | and shortcuts, and children's | | food and nutrition literacy |
| | | | | determine how | | influence. HFI was a large | | and nutrition-related |
| | | | | acculturation | | factor to dietary acculturation; | | parenting skills of |
| | | | | specifically | | most mothers living in HFI | | migrants. |
| | | | | affects the diets | | reported using food banks | | ingrants. |
| | | | | of Black | | which were considered poor | | |
| | | | | women and | | quality, eating what was | | |
| | | | | children. | | offered to them, with some | | |
| | | | | children. | | reporting refusing to eat foods | | |
| | | | | | | offered because it was | | |
| | | | | | | unfamiliar. | | |
| Moffat | n=24 | Qualitative | Hamilton, | Examine | D | Food availability: All | Small sample size, | Cultural dimensions of |
| et al, | n=24 immigrants/r | Qualitative | ON | cultural food | Participants were recruited via | participants reported lower | convenience sampling | HFI are prevalent issues |
| 2017 | efugees from | | ON | security among | convenience sampling | quality of foods in Canada | limiting generalizability of | among many Canadian |
| 2017 | Hamilton, | | | a group of | from low-income | compared to their home | findings, sample bias, | immigrants. When |
| | ON. Service | | | immigrants | neighbourhoods. All | countries. Food access: | disproportionate number of | traditional foodways are |
| | providers | | | and refugees | ethno-cultural groups | Service providers and | female participants. | lost, food security |
| | who work | | | from | were included due to the | immigrants reported income | remaie participants. | becomes more challenging |
| | with | | | Hamilton ON | multicultural nature of | and difficulty shopping to be | | for immigrants. Low |
| | immigrants | | | | immigrant services. | the largest barriers to accessing | | income and higher food |
| | were also | | | | Interviews were live | nutritious, culturally | | prices are key barriers to |
| | interviewed | | | | discussions about food, | appropriate foods. Key issues | | accessing nutritious and |
| | for their | | | | eating, household food | identified related to low | | culturally appropriate |
| | perspectives | | | | insecurity (HFI), and | income included: high food | | foods. Loss of foodways |
| | on cultural | | | | access to food and | prices, low paying jobs due to | | can negatively impede |
| | food security | | | | community support in | lack of recognition of their | | one's diet, health, cultural |
| | as it pertains | | | | the city. Data was | education back home, and a | | identity, and mental |
| | to their | | | | analysed based on 3 | higher unemployment rate | | health. |
| | clients. | | | | pillars of cultural food | among immigrants. Food use: | | |
| | | l | | 1 | 1 | 0 | l | |

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| | security: food availability, food access, and food use. | Most immigrants identified challenges in practicing food traditions (e.g., sharing meals), cultural change and disruption of social networks. | | |
|--|---|---|--|--|
|--|---|---|--|--|

| Table 2. Grey Literature Reports/Findings | | | | | |
|---|---|--|--|--|--|
| Source | Purpose | Key Details/Findings | | | |
| City of Toronto, 2021 | To address Black chronic food insecurity, anti-Black racism, and structural inequities in Toronto's local food systems, to improve the immediate and long-term health, wellness, and capacity of Black Torontonians. | Black Torontonians are at an increased (3.5 times) risk for food insecurity, relative to White people in Canada. There is a staggering high number (36.6%) of Black children living in food insecure households. Among organizations serving Black identifying individuals/households, 63% were found to be at risk for running out of funds and resources within a period of six months or shorter, increasing their challenges in effectively supporting the community. To effectively address food security in Black individuals in Toronto, it is recognized there needs to be targeted actions to the structural factors tied to anti-Black racism. Through the Toronto Black Food Sovereignty Plan, Black food security and sovereignty are recognized to be achieved through the following five thematic pillars: 1 . sustainable funding and community capacity building, 2 . access to growing space, 3 . accessible infrastructure, 4 . food hubs for Black people in Canada and cultural markets, and 5 . culturally rooted community health and nutrition programs. | | | |
| Tarasuk et al, 2022 | To examine household food insecurity (HFI) in Canada, including its patterns and trends among sociodemographic factors, and to identify evidence-based government policies to effectively respond to and address HFI. | Black households were found to be at increased risk for food insecurity relative to White households, with 22.4% of Black household living in food security relative to 13.2% of White households. Nearly 1 in 5 (i.e., 17.2%) of Black households were found to be living in moderate (11.5%) or severe (5.7%) food insecurity. | | | |
| CCPA, 2020 | To present short-, medium-, and long-term targeted action plans to improve Canada's economy post-COVID-19, through a lens of equity, justice, sustainability, resilience, solidarity, and well-being. (Includes particular action plans to improve the lives of Black Canadians, through the section "Recognition, justice, and development for Black Canadians." | Black households were found to be 3.5 times more likely to be living in food insecurity relative to White households in Canada. There is a critical need for all people in Canada to have access to good, healthy, and culturally appropriate food; this can be achieved through the acknowledgement of health inequities towards racialized peoples including Black people and allocating dedicated funds to support the development of culturally tailored health and well-being supports. The voices of Black, racialized, and Indigenous peoples need to be represented within policy decision making, to create more equitable and sustainable food systems for all. | | | |

Acknowledgements: Special acknowledgement goes to Killam Research Fund, University of Alberta for financially supporting parts of this scoping review.

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