

HEALING COMMUNITIES STUDY STATEMENT OF COMMITMENT TO RACIAL EQUITY

Health care and addiction treatment, like other systems in the United States, are steeped in a history of racism resulting in inequitable health outcomes among Black, Brown, and Indigenous people as well as other people of color.^{1–3} Indeed, access to life-saving medications for opioid use disorder is known to be unequally distributed by race and ethnicity in the United States,⁴ and emerging data on overdose deaths show worsening trends for Black and Latinx people compared with White people.^{5,6}

The goal of the HEALing Communities Study (HCS) is to reduce overdose deaths by 40% across 67 communities in four states.⁷ But interventions aimed at improving health might worsen race- and ethnicity-related inequities unless they explicitly prioritize equity.

Thus, going forward HCS will strive to promote equity in the implementation of the study, including taking the following steps:

1. Track the HCS primary outcome (40% reduction in mortality) by race and ethnicity, working with communities to adapt and implement the intervention to promote equitable HCS outcomes for Black, Brown, and Indigenous people as well as other people of color.
2. Provide more opportunities for Black, Brown, and Indigenous people as well as other people of color to:
 - a. serve on coalitions and community advisory boards, and
 - b. be involved with and serve as leaders on the HCS research team.
3. Collect data on policies that shape the landscape of addiction care, resource allocation, and outcomes to reduce racial inequities, advocate for policy changes through coalitions and community advisory boards, and provide ample opportunities for researchers of color to engage in that work within the study.

Signed,
HCS Steering Committee, on Behalf of the HCS Consortium
April 20, 2021

References

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