Strategies Towards Health Equity & Inclusion in the HEALing Communities Study (HCS)

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Strategies Towards Racial/Ethnic Health Equity & Inclusion in HCS

This presentation covers:

- Introduction to the HEALing Communities Study (HCS)
- Definition of health equity & inclusion endorsed by HCS
- Implementation strategies towards health equity & inclusion in HCS
- Concluding remarks
HEALing Communities Study:

Multisite parallel-arm cluster randomized waitlist-controlled trial evaluating the impact of Communities That Heal (CTH) intervention

Implemented in 4 states, 67 communities

**Goal:** Reduce opioid-related overdose deaths by 40% in 3 years

**Secondary outcomes:**
- Increase naloxone distribution
- Increase access/utilization of MOUD
- Decrease high risk opioid prescribing
# HCS Communities

<table>
<thead>
<tr>
<th></th>
<th>Overall</th>
<th>KY</th>
<th>MA</th>
<th>NY</th>
<th>OH</th>
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<tbody>
<tr>
<td>Total HCS community population</td>
<td>10,144,261</td>
<td>1,823,027</td>
<td>875,086</td>
<td>2,357,192</td>
<td>5,088,956</td>
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<tr>
<td>Opioid overdose death rate (per 100,000)</td>
<td>33.4</td>
<td>38.2</td>
<td>40.6</td>
<td>28.3</td>
<td>27.5</td>
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<tr>
<td>Number of communities by rural vs urban</td>
<td>29 rural 38 urban</td>
<td>7 rural 9 urban</td>
<td>5 rural 11 urban</td>
<td>8 rural 8 urban</td>
<td>9 rural 10 urban</td>
</tr>
<tr>
<td>Medicaid expansion?</td>
<td>--</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
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20% Black & Latinx
Health & Racial Equity Definitions endorsed by HCS

• Health care & addiction treatment -- like other systems in the US -- are steeped in a history of racism resulting in inequitable health outcomes among Black, Brown, Indigenous, & other people of color (BIPOC).

• *Health equity* is the provision of a fair & just **opportunity for every person** to be as healthy as possible. This requires addressing stigma, discrimination, racism, & their consequences (Braverman, 2017).
National Data: Opioid-Related Overdose Death Trends by Race/Ethnicity

- 2010-2019, the overdose death rates increased by 5-fold, (3.4 to 17.3 overdose deaths per 100,000) among Non-Hispanic Black population
- Tripled in the Latinx population (2.9 to 8.8 per 100,000)
- 2017-2019, the overdose death rates remained steady among Non-Hispanic White populations
Opioid overdose deaths increased among Non-Hispanic Blacks in the 67 HCS communities from 2018-2019, & remained almost the same for White & Hispanic populations.
Racial Inequities in Opioid Treatment

• Health care providers are more likely to prescribe Buprenorphine to a White patient who uses drugs than a Black or Latinx patient who uses drugs.

• Buprenorphine is more available in non-Hispanic White neighborhoods, whereas methadone clinics are concentrated in non-Hispanic Black & Hispanic neighborhoods.

• Among PWUD treated for a non-fatal overdose in an ED, Black & Latinx patients are less likely to obtain a follow-up appointment for OUD care post-discharge.

Health Equity

Full participation

Inclusivity & representativeness of coalitions and CAB

Training on cultural humility for researchers, coalitions and CAB

Sustainability: Co-create sustainability plans with government officials that emphasize health equity & inclusiveness

Data driven approach: On an ongoing basis, coalitions are provided with data to inform their decisions on deployment of EBPs through the portal, dashboard & data visualization

Principles of Community-Based Participatory Research (CBPR) to guide our health equity mission
A Practical, Robust, Implementation & Sustainability Model (PRISM)

**CONTEXTUAL FACTORS**

**EXTERNAL CONTEXT**
- Social Determinants of Health
  - Poverty
  - Racialized Drug Laws and Policing

**INTERNAL CONTEXT**
- Diversity of stakeholders
- Integrate feedback of people with lived experience
- Shared transparent decision-making

**Fit & Interactions among:**

| CTH INTERVENTION & CARE CONTINUUM & COMMUNICATION COMPONENTS ON HEALTH EQUITY |
| IMPLEMENTATION STRATEGIES & SYSTEM SCIENCE TOOLS FOCUSED ON HEALTH EQUITY |
| INNER & OUTER CONTEXT ON HEALTH EQUITY DIMENSIONS |

**RE-AIM(S) OUTCOMES**
- REACH
- EFFECTIVENESS
- ADOPTION
- IMPLEMENTATION
- MAINTENANCE/SUSTAINABILITY

**CULTURAL TAILORED implementation of EBPs to BIPOC & other marginalized communities?**

**Fit & Interaction Issues:**
- Shared agenda that actively promotes health equity?
- Enablers & barriers to achieving health equity?
- Culturally tailored implementation of EBPs to BIPOC & other marginalized communities?

**Overarching Issues:**
- Common measurement on health equity indicators?
- Who benefits from the interventions?
Examples of Strategies on Health Equity in CTH

• Expand MOUD & clinical services for non-English speaking patients

• Increase number of Spanish-speaking counselors & MOUD prescribers from Black, Brown, Indigenous, & other people of color (BIPOC) communities

• Increase the distribution of naloxone in communities of color & rural neighborhoods & settings

• Expand MOUD in rural communities by addressing the unique barriers they experience (i.e., transportation & lack of MOUD providers)
Communication Activities Focused on Racial Equity

Campaign Materials

- Bilingual (English/Spanish)

Tailored to their culture & language

Coalitions are encouraged to tailor their own images

Coalitions develop distribution plans taking into account their knowledge of the demographics (including racial/ethnic composition)
## Consortium-wide & Site-specific Efforts on Health Equity

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<tr>
<th>Consortium-wide Workgroups</th>
<th>Site-specific Efforts</th>
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<tr>
<td><strong>Policy</strong></td>
<td><strong>Social Determinants of Health (SDoH)</strong></td>
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<tr>
<td>Federal &amp; State Policy scan 2018/2019-present</td>
<td>Collect SDoH data that could impact implementation of CTH &amp; outcomes</td>
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Dissemination of Findings on Health Equity

- Publications in peer review journals focused on health equity
- Presentations at conferences & for CABs, coalitions & stakeholders
- Dissemination of a monthly RESJ newsletter that highlights resources & best practices related to advancing health equity (MA)

On November 19, 2020, the MA-HCS Racial Equity & Social Justice Committee was joined by Hill Wolfe, PhD candidate at Boston University School of Public Health. Hill delivered a powerful presentation about the history, evolution of terminology, and experience of transgender people with substance use disorders accessing mental health services. You can watch the recording of this event [here](link).
Concluding Remarks

- Racial/ethnic health equity & inclusion are integrated into the scientific process, implementation, & data of the HCS
- The process of advancing health, racial/ethnic equity & inclusion is evolving with multi-level collaborators
- The impact on health, racial/ethnic equity & inclusion are measured & monitored by HCS over time through primary & secondary outcomes & other measures