



PhRMA awards nearly \$500,000 to community-based projects to address inequities in diagnosis, treatment, and adherence

2022

The COVID-19 pandemic deepened health disparities, including the gap in average life expectancy and outcomes for many chronic diseases across race, gender, and geographic location. But, health disparities have deep roots in the U.S. where it is well documented that communities of color have a higher prevalence of preventable, chronic disease ⁱ and tend to be diagnosed and treated later than white Americans. ^{ii, iii, iv}

Because medications play a fundamental role in health management, equal access to needed medicines is a key component to ensuring equal opportunities for good health. Yet, disparities in medicine use among communities of color are well-documented. ^{v, vi, vii, viii}

Inequities in health status and outcomes among racial and ethnic groups often are rooted in community level factors like where and how we live, work, and play; inherent bias; lack of adequate coverage and access to providers; and unfortunately, systemic racism and discrimination. ^{x, xi, xii}

PhRMA is committed to doing our part to address the many interwoven factors that allow health inequities to arise and persist. ^{xiii} Moreover, we believe addressing inequities in a rapid and effective way requires connecting with and learning from affected communities directly.

PhRMA believes that diversity, equity and inclusion are essential to the discovery of new medicines and that people of all ethnic and racial backgrounds should have equitable access to treatment. ^{ix}

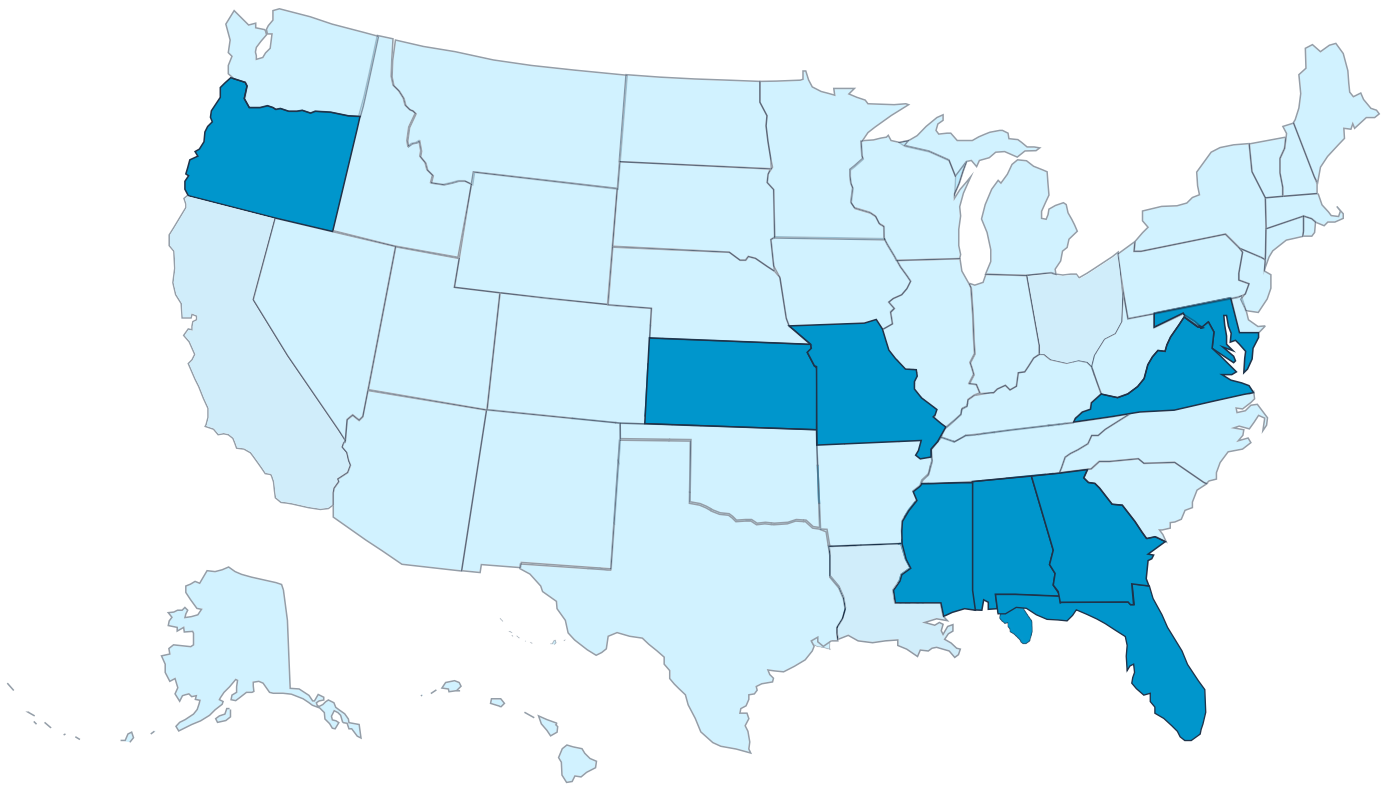
Recognizing that each community faces unique barriers, **PhRMA established the Collaborative Actions to Reach Equity (CAREs) grant program in April 2020.** The CAREs grant program aims to support community-centered solutions to address health inequities through partnership with community-led organizations. These awards support local and national activities and research to drive meaningful change on-the-ground to advance health equity. The CAREs grant program not only supports the efforts of grantees to advance equity, it also helps support the identification of community-led best practices toward scalable, practical interventions that can be applied to other communities, disease states, or public health concerns to advance health equity.

There are many community-based organizations, including some of those supported by the PhRMA CAREs grant program, working in geographic areas across the country with persistent health inequities that have been hit hard by the COVID-19 pandemic. The PhRMA CAREs grant program will continue to look for solutions through key partnerships to make progress towards solutions to address inequities.

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Snapshot of Grantees



Using Community Health Workers to Prevent COVID-19 in Low-Income Black Communities

Sisters in Birth, Inc. in Madison, Hinds, and Rankin Counties, Mississippi

More babies die in Mississippi than any other state in the nation. Sisters in Birth, Inc. is a women's health community-based clinic that predominantly serves the Black female Mississippi Medicaid population in counties with the highest share of female-headed households. Sisters in Birth plans to expand their efforts to provide counseling to pregnant women and new mothers with education on COVID-19 prevention and vaccinations, COVID-19 testing, and free masks within women's homes, places of employment, and community events. Using the CAREs grant funding, Sisters in Birth will hire several additional staff to expand its reach and impact, particularly in Hinds County. It will provide COVID-19 education and assessment within the clinic, during home visits, and during some community events such as diaper giveaways.



NAESM COVID-19 Outreach Project

NAESM, Inc. in Atlanta, Georgia

NAESM is a nonprofit community-based safety net provider with more than 30 years of commitment to providing health services, particularly for HIV, to Black gay/bi/same gender loving men and women of transgender experience in the Metro Atlanta area. NAESM proposes a large-scale communication campaign utilizing social media programming, street and community outreach, and information provided at its national conference to address vaccine hesitancy in the Black gay/bi/same gender loving and the Black transgender communities in the metro Atlanta area and nation-wide.



Supporting Access to COVID-19 Vaccines among Teens, Young Adults, and American Indian/Alaska Native Communities

National Association of Councils on Developmental Disabilities (National)

The National Association of Councils on Developmental Disabilities (NACDD) is a nationwide network of Developmental Disabilities Councils with connections, partnerships, and engagement with communities in every state and U.S. territory. In response to the COVID-19 pandemic, NACDD launched the GetOutTheVaccine campaign to provide streamlined access to trusted resources on COVID-19 vaccines. NACDD will expand promotion of the GetOutTheVaccine Campaign to reach American Indian/Alaskan Native (AI/AN) populations, as well as teens and young adults.



Breaking Down Barriers to COVID-19 Vaccination for African and African Americans

Bridge-Pamoja in Portland, Oregon

Bridge-Pamoja is a network of faith leaders and culturally specific organizations dedicated to addressing unique needs of African and African American communities in the Portland, Oregon area through grassroots and community-based efforts. Bridge aims to break down barriers to the uptake of COVID-19 vaccines by local African and African American communities using a three-pronged approach: 1) partner with state officials to track how many Africans and African Americans successfully complete doses of COVID-19 vaccines, 2) monitor how the state government partners with Black-led organizations (including houses of worship) for outreach to the African and African American communities regarding 3 COVID-19 vaccination, and 3) host virtual forums with Black community and faith leaders to address the successes and challenges of the state's COVID-19 vaccination outreach process.



Barriers to COVID-19 Vaccination in the Black Belt Region

Auburn University in Auburn, Alabama

The Black Belt region is one of the most impoverished and rural regions in the U.S, represented by a string of counties in 11 states, including Alabama, Arkansas, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, Texas, and Virginia. These Black Belt states have some of the lowest COVID-19 vaccination rates. This project will compare and contrast state vaccine policies across the Black Belt region and conduct surveys among African Americans living in the Black Belt region to document critical barriers to vaccination.





Exploring Patient and Caregiver Beliefs on Remote Patient Monitoring to Decrease Disparities in Medication Adherence among Children with Asthma

Children's Mercy Kansas City

in Kansas City, Missouri

African American children are more likely to be hospitalized and more likely to die from asthma than White children due in part to socioeconomic and environmental factors that frequently lead to suboptimal medication adherence. Electronic medication monitoring is the gold standard for assessing inhaler adherence and has been shown in research studies to improve outcomes, but one challenge to uptake of this remote patient monitoring technology in real life is concern relating to data privacy and security. As part of upstream work to improve adherence and outcomes in high-risk populations, the Advanced Asthma Interdisciplinary Respiratory Clinic at Children's Mercy Kansas City, which serves children with severe asthma who are primarily African American and/or covered by Medicaid, will undertake research to better understand patient and caregiver attitudes and concerns regarding the use of this technology, as well as anticipated barriers.



Addressing Racial Disparities in Medication Utilization and Adherence

Florida A&M University and University of Florida

in Tallahassee and Gainesville, Florida

Racial and ethnic disparities in health outcomes may be attributed to several factors, including low utilization of and poor adherence to evidence-based and curative therapies, as well as lack of health insurance. The current COVID-19 pandemic is an example of the pervasiveness of racial health disparities in the U.S. Researchers at Florida A&M University and the University of Florida aim to review current approaches to address racial and ethnic disparities in medication utilization/adherence and identify a targeted set of recommendations to decrease those disparities in Florida.



Community Pharmacists and Medication Therapy Management: A Roadmap for Equitable Access to Medicines

HealthHIV in Washington D.C., Maryland, and Virginia

Pharmacists can serve as a trusted source of information about medications for patients living with HIV; however, pharmacists are not always trained in how to provide culturally sensitive care for patients with HIV, who also experience stigma associated with the disease. HealthHIV is a national non-profit working to advance effective prevention, care, and support for people living with, or at risk for HIV. With funding from the PhRMA CAREs grant program, HealthHIV will provide training to pharmacists and pharmacy students at Historically Black Colleges and Universities (HBCUs) in Washington, D.C., Virginia, and Maryland on culturally relevant approaches to engage with patients who live with HIV and how to address social and economic factors that impact medication access. HealthHIV will also develop a paper on the best practices piloted in this training program so that it can be scaled to other HBCUs and among pharmacists to advance health equity in HIV care.



Providing Accessible Medication Information for Visually Impaired Patients Using Assistive Technology

University of Kansas Drug Information Center in Lawrence, Kansas

Written medication information distributed by community pharmacies is typically not available in an accessible format for patients with visual impairment and blindness, which can be a barrier to their receiving patient-friendly information about medicines they are taking. Using the PhRMA CAREs grant funding, the University of Kansas Drug Information Center will offer a free service to patients through conversion of written medication information (e.g., medication guides or patient leaflets) to an accessible format for use with a screen reader. In addition, the project will study the needs of this patient population with respect to obtaining accessible drug information in the pharmacy or other healthcare settings. Lessons from the study will be disseminated with the hope of offering scalable recommended practices for other providers, relevant stakeholders, and developers of written medication information to improve equitable access for individuals with visual disabilities.



Addressing Health Inequities and Ensuring Access to Care after Hospital Discharge in Patients with Post-Intensive Care Syndrome due to COVID-19 through Community Health Worker Engagement

Center for Health Outcomes Research and Education at the University of Health Sciences and Pharmacy in St. Louis in St. Louis, Missouri

Post-intensive care syndrome (PICS) is a serious health condition that can develop following hospital discharge from the intensive care unit. The timeline for recovery from PICS can be extended in socially disadvantaged patient populations who may not receive appropriate follow-up care. With CAREs funding, researchers at the Center for Health Outcomes Research and Education will support patients with PICS in the transition to home care following discharge from the hospital by connecting patients with community health workers and pharmacy support. These efforts will aim to provide equitable access to nutrition, health education, and medication management. The findings and methods implemented in this project can be generalized to multidisciplinary teams who provide care for PICS patients across the country.



Lighthouse Community Health Services Primary Care Service-Learning Clinic: A Community-Based Model of Care to Improve Equitable Access to Treatment and Medication Management

FARRR Foundation in Lynchburg, Virginia

Individuals who have a mental health condition and experience poverty often face numerous social and economic barriers to receiving treatment. The 24501 zip code (in Lynchburg, VA) has a high concentration of poverty and racial inequities due to a history of redlining, a practice of denying home loans to Black and other non-white individuals, and other barriers rooted in institutional racism. Patients living in the 24501 zip code also face barriers to care due to a limited number of primary and mental health care providers. The FARRR Foundation is a faith- and community-based, trauma-informed care organization that is committed to providing social, educational, and clinical support to individuals who are impacted by poverty and mental illness. Using the PhRMA CAREs grant funding, the FARRR Foundation will expand their on-site community-based care services to include primary care, medication referrals, and medication management to individuals experiencing the effects of poverty and mental illness living in the 24501 zip code. Findings from this effort will be used to design a roadmap for other initiatives to improve health equity among patients with mental health conditions in communities with high rates of poverty.





References

i Minority Health Profiles. Office of Minority Health. Available at: <https://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=26>

ii Kim G, Ford KL, Chiriboga DA, Sorkin DH. Racial and Ethnic Disparities in Healthcare Use, Delayed Care, and Management of Diabetes Mellitus in Older Adults in California. *J. Am. Geriatr. Soc.*; 2012; 60 (12). <https://doi.org/10.1111/jgs.12003>

iii Artiga S and Orgera K. Key Facts on Health and Health Care by Race and Ethnicity. Kaiser Family Foundation. 2019; <https://www.kff.org/report-section/key-facts-on-health-and-health-care-by-race-and-ethnicity-coverage-access-to-and-use-of-care/>

iv Kim EJ, Kim T, Conigliaro J, Liebschutz JM, Paasche-Orlow MK, Hanchate AD. Racial and Ethnic Disparities in Diagnosis of Chronic Medical Conditions in the USA. *J Gen Intern Med.* 2018 Jul;33(7):1116-1123. doi: 10.1007/s11606-018-4471-1. Epub 2018 May 7. PMID: 29736755; PMCID: PMC6025658.

v McQuaid EL, Landier W. Cultural Issues in Medication Adherence: Disparities and Directions. *J Gen Intern Med* 33, 200-206 (2018). <https://doi.org/10.1007/s11606-017-4199-3>

vi Holmes HM, Luo R, Hanlon JT, Elting LS, Suarez-Almazor M, Goodwin JS. Ethnic disparities in adherence to antihypertensive medications of Medicare Part D beneficiaries. *J Am Geriatr Soc.* 2012;60:1298-1303.

vii Essien UR, Kim N, Hausmann LRM, et al. Disparities in Anticoagulant Therapy Initiation for Incident Atrial Fibrillation by Race/Ethnicity Among Patients in the Veterans Health Administration System. *JAMA Netw Open.* 2021;4(7):e2114234.

viii Zhang Y, Baik SH. Race/Ethnicity, disability, and medication adherence among Medicare beneficiaries with heart failure. *J Gen Intern Med.* 2014;29(4):602-7.

ix PhRMA, "Building a Better Health Care System: PhRMA's Patient-Centered Agenda" <https://phrma.org/report/Building-a-Better-Health-Care-System-PhRMAs-Patient-Centered-Agenda>

x National Institute on Minority Health and Health Disparities (2017). NIMHD Research Framework. Retrieved from <https://www.nimhd.nih.gov/about/overview/research-framework.html>. Accessed on September 17, 2021.

xi Yin Paradies, A systematic review of empirical research on self-reported racism and health, *International Journal of Epidemiology*, Volume 35, Issue 4, August 2006, Pages 888-901, <https://doi.org/10.1093/ije/dyl056>

xii Health Equity Considerations and Racial and Ethnic Minority Groups. Centers for Disease and Control. <https://www.cdc.gov/coronavirus/2019-ncov/community/health-equity/race-ethnicity.html#fn8>

xiii PhRMA, "Building a Better Health Care System: PhRMA's Patient-Centered Agenda" <https://phrma.org/report/Building-a-Better-Health-Care-System-PhRMAs-Patient-Centered-Agenda>

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