



PhRMA Collaborative Actions to Reach Equity (CAREs) Grant: Addressing Racial Disparities in Medication Utilization and Adherence

Request for Proposals

In 2019, PhRMA established the Health Equity Roundtable with the goal of improving health outcomes by addressing inequities in care. As part of the Health Equity Roundtable, PhRMA is offering funding opportunities to spur ideas for practical interventions to address the alarming health inequities highlighted by COVID-19.

Racial and ethnic health disparities¹ and inequities remain pervasive in the United States health care system due to the effects of structural and institutional racism.^{2,3} These disparities are evident in both medical and pharmaceutical care. Numerous studies have demonstrated that African American and Hispanic individuals have lower medication utilization and adherence than their White counterparts, contributing to disparities in disease prevalence and complications.^{4,5} A significant body of research has also shown that racial/ethnic health disparities are dependent on not only individual, but also community-level factors, such as where we live, work, and play.^{6,7} Thus, closing the gap on racial/ethnic disparities in medication utilization through community-relevant research and policies is critical.

Advancing equitable utilization of medicines in diverse populations is an urgent need to help *all* communities reach their highest health potential.

PhRMA is seeking innovative, conceptual papers that respond to the following question:

“What are practical, scalable, and community-focused approaches to address and ultimately close the gap on racial/ethnic disparities in medication utilization and adherence?”

Examples of relevant topics include:

- Proposing clinical and/or non-clinical interventions aimed at eliminating racial/ethnic disparities in medication utilization and/or adherence
- Proposing foundational research studies to design or evaluate interventions that aim to reduce medication disparities
- Proposing community-centered approaches to address racial/ethnic medication adherence disparities

- Providing commentary on how your organization is addressing racial/ethnic inequities in medication access
- Describing deficiencies in data and research methods as they relate to race/ ethnicity, social determinants of health, and medication utilization

Eligibility:

- All individuals/organizations representing or affiliated with research and/or community-oriented work are eligible to apply. Preference will be given to applicants from historically black colleges and universities (HBCUs), community organizations, faith-based organizations, businesses, and academic institutions with a history of providing resources and/or services to communities of color
- Collaboration across stakeholder groups and fields of discipline is encouraged
- Graduate students (Master's and Doctoral students) under mentorship are also eligible to apply

How to Apply:

To apply for the PhRMA CAREs Grant, *Addressing Racial Disparities and Inequities in Medication Utilization* program, applicants must submit a letter of intent by **December 14, 2020 @ 11:59 PM EST**.

Letter of Intent:

1. Proposed response to award question. The response should not exceed 500 words excluding the title, citations, and any additional application material.
2. Title, primary application name, and affiliated organization should be included in header.
3. Name, email, and affiliated organization(s) of award applicants and collaborators. Please note the name of the Project Lead. Graduate students should also submit the contact information for their mentor(s).
4. Append the Project Lead's curriculum vitae or resume to the end of the proposal.
5. Please submit all documentation in a single PDF file.

Submit the letter of intent to CAREs@phrma.org

Award Notification:

The selected submission will be notified by **December 17, 2020**.

Funding:

Selected letters of intent will receive an unrestricted grant from PhRMA for \$25,000. The funding should be used to support the development of the concept paper as proposed in the LOI. The funds may also be used towards additional activities focused on reducing health disparities, research equipment, conference attendance, salaries, or other related expenses. Indirect costs are limited to 20%.

Requirements of Funding:

Awardees will be required to submit a final paper expounding upon the concepts presented in the letter of intent by **February 15, 2021**. The paper should be appropriate for submission as a commentary or letter to the editor to a peer-reviewed journal.

Contact Information:

For any questions regarding the CAREs Grant, please email Jacquelyn McRae, Director of Policy, Research, and Membership at CAREs@phrma.org

References

1. 2017 National Healthcare Quality and Disparities Report. Content last reviewed July 2019. Agency for Healthcare Research and Quality, Rockville, MD. 2017 National Healthcare Quality and Disparities Report. Content last reviewed July 2019. Agency for Healthcare Research and Quality, Rockville, MD.
2. Gee GC and Ford CL. Structural Racism and Health Inequities. *Du Bois Rev.* 2011 Apr; 8(1): 115–132. doi: 10.1017/S1742058X11000130
3. Ford CL, Griffith DM, Bruce MA, Gilbert KL. Racism: Science & Tools for the Public Health Professional. 2019. <https://doi.org/10.2105/9780875533049>
4. Wang J, Zuckerman IH, Miller NA et al. Utilizing New Prescription Drugs: Disparities among Non-Hispanic Whites, Non-Hispanic Blacks, and Hispanic Whites. *Health Serv Res.* 2007; 42 (4):1499 – 1519.
5. Xie Z, St. Clair P, Goldman DP, Joyce G (2019) Racial and ethnic disparities in medication adherence among privately insured patients in the United States. *PLoS ONE* 14(2): e0212117. <https://doi.org/10.1371/journal.pone.0212117>
6. Gaskin DJ, Dinwiddie GY, Chan KS, McCleary R. Residential Segregation and Disparities in Health Care Services Utilization. *Med Care Res Rev.* 2012; 69 (2): 158 – 175. doi: 10.1177/1077558711420263
7. LaVeist T, Pollack K, Thorpe R, Fesahazion R, Gaskin DJ. Place, Not Race: Disparities Dissipate in Southwest Baltimore When Blacks and Whites Live Under Similar Conditions. *Health Affairs.* 2011; 30 (10). <https://doi.org/10.1377/hlthaff.2011.0640>