## The CAREs Grant Program

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

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. We are committed to addressing the many interwoven social determinants of health that allow health inequities to arise and persist. Moreover, we believe addressing inequities requires connecting with and learning from affected communities directly.

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.



## **CAREs Grant Recipient for Florida**



## 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.

To learn more about PhRMA's equity efforts please visit phrma.org/equity.

Nina Robinson/Getty Images/Images of Empowerment

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,

ii Kim G, Ford KL, Chiriboga DA, Sorkin DH. Racial and Ethnic Disparities in Healthcare Use, Delayed Care, and Management of Diobetes Mellitus in Older Adults in California. J. Am. Gertiatr. 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

III Artiga S and Urgera K.Key Facts on Health and Health Care by Race and Ethnicity. Kaise 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 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 vi 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

