Ending Unequal Treatment:
Strategies to Achieve Equitable Health
Care and Optimal Health for All

Role of Federal and Non-Federal Research Funders and Researchers

Racial and ethnic inequities in health and health care impact individual well-being, contribute to millions of premature deaths, and cost the United States hundreds of billions of dollars annually. Addressing these inequities is vital to improving the health of the nation's most disadvantaged communities and to helping to achieve optimal health for all. In its 2003 report *Unequal Treatment: Confronting Racial Bias and Ethnic Disparities in Health Care*, the Institute of Medicine examined the impacts of health care disparities and proposed ways to advance health care equity.

Because disparities persist, the National Academies of Sciences, Engineering, and Medicine convened an expert committee to revisit the topic with support from the Agency for Healthcare Research and Quality and the National Institutes of Health. The resulting report, *Ending Unequal Treatment: Strategies to Achieve Equitable Health Care and Optimal Health for All*, examines the major drivers of health care inequities, provides insights into successful and unsuccessful interventions, identifies gaps in the evidence base and strategies to close them, recommends ways to scale and spread effective interventions, and much more.

Ending Unequal Treatment finds that America has made little progress in advancing health care equity and that racial and ethnic inequity remain fundamental flaws in the health care system. The current system, by its very design, delivers different outcomes for different populations and is highly influenced by external societal forces inextricably linked to disparate individual and population outcomes. Comprehensive and sustained efforts to improve health across a continuum of care is essential because temporary and/or incremental reforms often do not improve health equity and may even introduce additional inequities. The report presents 8 overarching conclusions, 5 goals, and 17 recommendations to comprehensively and systematically intervene at every level of health and health care, thus fundamentally reimagining the system to achieve equitable health care and optimal health for all.

Outlined below are the overarching actions federal and non-federal research funders can take to advance health equity, along with priority areas for future research.

INVEST IN RESEARCH AND EVIDENCE GENERATION TO BETTER IDENTIFY AND WIDELY IMPLEMENT INTERVENTIONS THAT ELIMINATE HEALTH CARE INEQUITIES

Despite shifts in funding and increased attention to health and health care equity research since the 2003 *Unequal Treatment* report, progress has been slow due to a lack of sustained funding, exclusion of racially and ethnically minoritized researchers, inadequately diverse and representative data, as well as barriers to the types of studies that would translate into effective policies and practice. Given the magnitude of the problem and years of life lost due to inequities, the paucity of resources devoted to studying successful interventions and implementation strategies is profound. **The committee recommends that federal and non-federal**

research funders expand funding for research aimed at addressing health care inequities, structural racism, and health-related social needs and exploring the various approaches, strategies, and policies needed to eliminate health care inequities. Advancing health equity will require major investment in health equity research project funding, workforce, data, and infrastructure.

A. These expanded funding opportunities should invest in increasing the diversity of the pool of researchers in health and health care equity research and in the infrastructure needed to conduct community-based and community-engaged research, including addressing institutional barriers to community partnerships.

B. These efforts should be coordinated by the National Institute on Minority Health and Health Disparities, as mandated by Congress.

PRIORITY AREAS FOR FUTURE RESEARCH

The report also identified high-priority areas for future research including the following:

- Linking macro-level policies with the lived experiences of racially and ethnically minoritized populations to fully understand the various pathways that lead to inequitable outcomes.

- Integrating and sustaining interventions to address health-related social needs into the health care delivery system.

- Developing and testing new care models designed to improve equity in health care access and outcomes.

- Conducting implementation and health policy research to adopt and scale up effective new models.

- Continuing to advance Indigenous governance and self-determination using Indigenous and decolonial methodologies and Indigenous research ethics.

- Transitioning from interventions to change individual health behaviors to efforts targeting other levels of change and combining multiple levels (i.e., interventions at the community and societal levels).

- Identifying and delineating best practices for cross-organizational partnerships.

- Developing sustainable models and approaches that effectively build community empowerment and capacity.

- Expanding basic social science research, which focuses on understanding human behavior, to support the development of evidence-based interventions. (Although investment in applied social science research has incrementally increased, support for basic research has been limited.)

- Identifying appropriate comparators and studying effectiveness in racially and ethnically minoritized groups.

- Understanding health across the lifespan as vital to reducing inequities.

To access the full report and additional resources, visit www.nationalacademies.org/ending-unequal-treatment.

Health and Medicine Division

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