

More evidence is urgently needed on opioid use in Black communities

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Although the prevalence of opioid use among Black people is comparatively low, the rate of opioid deaths has increased the sharpest and fastest among that population in recent years, according to an article

in the March/April issue of *Harvard Review of Psychiatry*.

The review by Ayana Jordan, MD, Ph.D., of Yale University School of Medicine and colleagues stresses how important it is to develop much better evidence on how the [opioid crisis](#) has affected Black communities. "Focusing on the unique needs of Black people who use opioids is warranted to increase treatment initiation and adherence among a population less likely to engage with the traditional health care system," according to the authors.

Key themes in understanding and responding to the opioid crisis in Black communities

As the [opioid](#) epidemic has unfolded, most studies have focused on white populations, with limited inclusion of Black individuals. "Over the past decade, opioid overdose rates among Black people have been rising, resulting in an increasing need to obtain timely information," Dr. Jordan and coauthors write.

Dr. Jordan and coauthors performed a comprehensive review of the research literature to identify evidence relevant to opioid use among Black people. The researchers analyzed 42 studies providing up-to-date information on key themes, including:

Opioid use rates. National studies have reported relatively low rates of opioid use, especially prescription opioids, by Black individuals, compared to white individuals. However, those studies have often excluded or under-represented people with low incomes, those experiencing homelessness or unstable housing, and those who are incarcerated. All of these populations include disproportionately high numbers of Black people, due to the effects of structural racism.

"Thus, the prevalence of opioid use among Black people may be underestimated," Dr. Jordan and coauthors write. "It is also likely that the absence of culturally informed interview techniques could lead to underreporting of prescription opioid misuse in the Black community."

Overdose risk. Even though Black people are less likely to use opioids, those who start using are at higher risk of dying from an overdose than those from other races. Evidence also suggests that deaths due to synthetic opioids—particularly fentanyl—are rising rapidly among Black people.

Treatment for opioid use disorder. Research finds that Black people are less likely than white people to have access to opioid and other substance treatment options in their geographic communities and care networks. In one study, 15.5 percent of Black patients diagnosed with opioid use disorder (OUD) received treatment, compared to 21 percent of white patients. Evidence suggests that even after they receive care, Black patients have lower treatment completion rates, likely due to [social determinants](#) such as unemployment, access to transportation, and absence of culturally informed care.

Prescription opioid use. Black patients are less likely than their white counterparts to receive prescription opioid medication for pain. For Black patients who do receive opioids for treatment of non-cancer pain, there are persistent disparities in ongoing pain management, including lower daily doses and fewer days' supply of opioids, compared to white patients.

Social determinants of health. A handful of studies are beginning to document that social determinants of health—a wide range of conditions affecting many different behavioral or health outcomes—are the key drivers of opioid use and overdose risks among Black people. The authors note that more investigation needs to be undertaken to determine

how social determinants of health, such as access to education, job training, food, transportation, and technology, can be harnessed to facilitate better access to opioid treatment for Black patients. The authors note that a better understanding of the social determinants of health affecting OUD among Black people is crucial for the development of "culturally acceptable treatment settings, where Black people are more likely to access care."

Dr. Jordan and colleagues see "great opportunity" for new research to understand and respond to the impact of the opioid crisis in Black communities. Priorities must include increased funding specifically earmarked by governmental agencies for research that addresses racial disparities in OUD. Dr. Jordan and colleagues conclude, "Building on the information presented here will promote better care of this population, with the hope of improving health outcomes."

More information: Ayana Jordan et al. An Evaluation of Opioid Use in Black Communities: A Rapid Review of the Literature, *Harvard Review of Psychiatry* (2021). [DOI: 10.1097/HRP.0000000000000285](https://doi.org/10.1097/HRP.0000000000000285)

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