

## **Racial disparities in a community-based addiction reduction (CARE) program for women of reproductive age with substance use disorder**

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**Background and Objective:** In 2018, 51% of the 63 pregnancy-associated deaths of women in Indiana were attributed to substance use disorder (SUD), with Black women being disproportionately affected. To address the need for more effective SUD treatment interventions, the community-based addiction reduction (CARE) program connects women of child-bearing ages with SUD with addiction recovery coaches (ARCs) to provide personalized supports throughout recovery. To identify program characteristics that influence the retention of women of color in the program, quantitative analysis of CARE survey data and qualitative analysis of CARE ARC narrative entries of participant encounters were performed.

**Project Methods:** 251 women were enrolled in the CARE program. Chi-square/T-tests compared survey responses by race for treatment status, treatment motivation scales, and retention in the program at intake, 2-, 6-, 9-, and 12-month follow ups. Qualitative analysis of ARC narrative entries was conducted following thematic analysis and crystallization immersion analytic methods based on the grounded theory.

**Results:** Statistical analyses revealed White compared with Black women in the CARE program were significantly more likely to be in treatment at intake ( $p < .001$ ) and more motivated to engage in recovery treatment ( $p < .001$ ). Despite these differences, Black women were retained longer in the CARE Program at 2- ( $p < .006$ ), 6- ( $p < .011$ ) and 9- ( $p < .004$ ) months. The ARC narrative entries were initially coded and emergent themes mapped well to the four types of supports provided by peer recovery coaches as outlined by the Substance Abuse and Mental Health Services Administration: emotional, instrumental, informational, and affiliational. Qualitative analysis of ARC narrative entries by race are currently underway.

**Conclusion and Potential Impact:** The inclusion of ARCs as integral members of SUD recovery programs may preferentially provide Black women with SUD the opportunity to build more trusting relationships with these peer coaches, thereby increasing their participation and retention in SUD-related treatment.