



**To:** Robert Kent, General Counsel, Office of National Drug Control Policy  
**From:** Community Catalyst  
**Date:** August 6, 2021  
**Re:** Response to Request for Information: Application of Equity in U.S. National Drug Control Policy - FR Doc. 2021-14365

Dear Mr. Kent,

Community Catalyst appreciates this opportunity to respond to the Office of National Drug Control Policy's (ONDCP) *Request for Information: Application of Equity in U.S. National Drug Control Policy*. We support ONDCP's efforts to follow Executive Order 13985 through this RFI to "help ONDCP develop an approach to advance equity in drug policy."

[Community Catalyst](#) is a leading non-profit national health advocacy organization dedicated to advancing a movement for health equity and justice. We partner with local, state and national advocates to leverage and build power so all people can influence decisions that affect their health. Health systems will not be accountable to people without a fully engaged and organized community voice. That's why we work every day to ensure people's interests are represented wherever important decisions about health and health care are made: in communities, state houses and on Capitol Hill. Our Program on Substance Use Disorders and Justice-Involved Populations works to advance racial justice by centering community needs, particularly of those most marginalized, and advocating for policy and practice changes to ensure addiction is treated as a health issue and not a criminal one.

We are pleased to see that advancing racial equity has already been named an ONDCP priority through [The Biden-Harris Administration's Statement of Drug Policy Priorities for Year One](#), and the emphasis from President Biden "*to eradicate racial inequities in the criminal justice system*" and that "*people should not be incarcerated for drug use but should be offered treatment instead.*" Also important is that ONDCP has already acknowledged in the [Year One Priorities](#) that there are known racial inequities in substance use disorders treatment access and health outcomes, making this RFI particularly relevant.

**Recommendations on how the agency can broaden its formal consultations to gain broader perspectives earlier in the policy development process, including from people who use drugs:**

- We recommend ONDCP meaningfully engage people with lived experience of substance use disorders, current drug users and formerly incarcerated people, in every stage of

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assessment of inequities and development of solutions. This is the most crucial step government can take to advance equity. Meaningful community engagement requires officials to genuinely [commit to listening, reflecting and working together with individuals and communities](#) directly affected by racism, discrimination, cultural incompetency and other inequities. This is especially important for drug policy, given the over criminalization of substance use in communities of color. Strategies for engagement with the populations we recommend include: working with community, state and national organizations focused on these individuals, such as peer recovery organizations, harm reduction organizations, drug user unions, and groups supporting formally incarcerated individuals reentering the community. Other strategies are working through trusted community leaders (especially unofficial leaders) and working through service providers. We would be happy to assist in these efforts.

- ONDCP should require health equity assessments when issuing regulations, guidance or other forms of policymaking. A health equity assessment could require the agency to assess the impact of the proposed policy on populations marginalized, discriminated against and/or excluded from justice. The equity assessments should be conducted at the outset of any agency decision or process, and should be made public to facilitate transparency and accountability. Equity assessments are crucial for drug policy, given the [disproportionately punitive](#) approaches to substance use in communities of color through the “War on Drugs.”
- Particularly in developing policy based on the performance or effectiveness of programs, we recommend that ONDCP use metrics that individuals/communities impacted by the program or policy have identified as important. Without this approach, research or policy proposals are unlikely to focus on what matters most to people, resulting in programs that aren’t always responsive to individuals’ needs and don’t achieve the best results. Community Catalyst recently conducted the first national examination of treatment and recovery services outcomes prioritized by people with substance use disorders, which provides input ONDCP can build on. Based on responses from nearly 900 people across the country, top desired outcomes include staying alive, improving quality of life, and reducing harmful substance use. Please see our [Peers Speak Out](#) report for more details and recommendations.

### **Recommendations for short-term and long-term goals:**

- To enhance equity, we recommend ONDCP **prioritize major expansion of investments in community services** for prevention, harm reduction, treatment, and recovery, as well as initiatives to address social and economic factors underlying drug use and substance use disorders. Investment should target communities facing the greatest inequities, especially those harmed by the War on Drugs, and should be directed by those communities. Investment should deprioritize services run by law enforcement.
- We urge ONDCP to examine and act to **change federal policies that block access to these community services**, such as restrictions on [Medication Assisted Treatment](#), including those that contribute to [disparities](#), and policies that [bar](#) those with criminal convictions from access to essential community services.
- We also recommend that ONDCP **reduce investment in enforcement**, which has disproportionately harmed people of color. This includes reducing support of drug courts,

which perpetuate inequities and give the criminal legal system control over health decisions that should remain with the individual and their health providers.

- We urge ONDCP to build on its [Year One Priorities](#) to expand access to services, and to set short-term and long-term metrics to measure our recommended shift in resources from enforcement to public health and the extent that community engagement affected that shift.

We thank you for considering these recommendations, and for your commitment to advancing equity in drug policy. Please contact me by phone (617-275-2814) or email ([estewart@communitycatalyst.org](mailto:estewart@communitycatalyst.org)) if you have any questions or would like to discuss further.

Sincerely,

Emily Stewart

A handwritten signature in black ink that reads "Emily Stewart". The signature is written in a cursive style with a long horizontal flourish extending to the right.

Executive Director  
Community Catalyst