Implementing and Advancing Health Equity in Overdose Prevention Campaigns



USING BEST PRACTICES TO DEVELOP CULTURALLY RESPONSIVE AND INCLUSIVE COMMUNICATIONS

Health inequities can contribute to increased overdose deaths and other negative health outcomes, especially among groups that have been disproportionately affected¹.

Tailored communication efforts that address racial injustices, overcome economic, social, and other determinants of health, and eliminate preventable health disparities can help your response to the drug overdose crisis. This means intentionally looking at the potential positive and negative impacts of messages in overdose prevention campaigns. Applying a health equity lens in communication planning, development, and dissemination ensures messaging is inclusive, avoids biases and stigmatization, and reaches the intended audiences.

WHAT IS HEALTH EQUITY?

Health equity is the state in which everyone has a fair and just opportunity to attain their highest level of health².

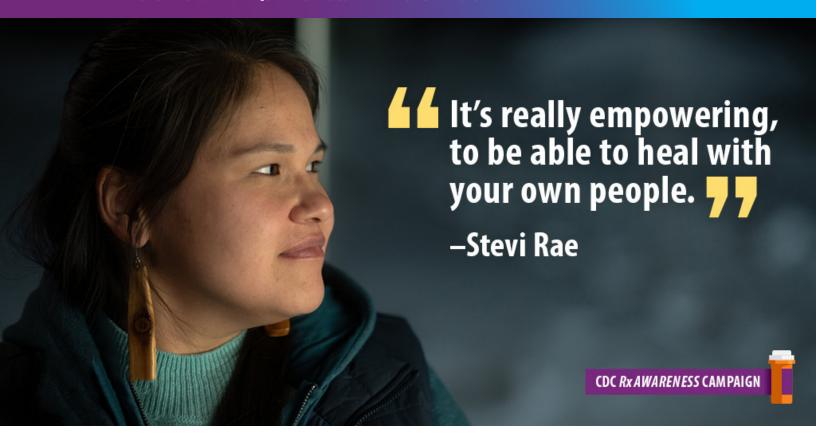
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Applying Health Equity When Developing Campaigns and Products

- 1. Identify the campaign's primary audiences and subpopulations who may be disproportionately affected by drug overdose.
 - Understand that there is diversity within communities and that members of population groups are not all the same. People may belong to multiple groups/populations with overlapping health and social inequities. Audiences may include but are not limited to those:
 - i. Disadvantaged by reduced economic stability
 - ii. Experiencing disabilities, homelessness, mental health conditions, or incarceration
 - iii. Experiencing limited educational attainment, limited access to healthcare, limited health literacy, and/or limited access to substance use treatment
 - iv. From non-English speaking populations, tribal populations, or rural communities and other geographically underserved areas
 - v. From racial and ethnic minority groups
 - vi. From sexual and gender minority groups
 - Tailor communications based on the unique circumstances and experiences of different populations.
 - Emphasize positive actions and ensure community strengths and solutions are highlighted, driving local public health efforts.

²CDC Health Equity



- 2. Engage organizations, agencies, and people who represent the intended audiences to participate during the various stages of development.
 - Consult community members on concepts and message development to better understand what messages resonate with intended audiences.
 - Invite people who represent your intended audiences to review materials before finalizing and disseminating.
 - Apply feedback and recommendations that best align with audience-specific situations, communities, or cultures.
- 3. Use language that reflects and speaks to the needs of the intended audience.
 - Humanize the audiences being referred to and lead with people-first language, which describes people as having/experiencing a condition or circumstance, not being the condition.
 - i. Avoid the use of adjectives such as vulnerable, marginalized, and high-risk.
 - ii. Avoid unintentional blaming (e.g., victim-blaming, language that evokes shame).
 - Recognize that not all members of the intended audiences have the same level of literacy.
 - i. Use preferred terms and wording for select population groups, recognizing that there isn't always agreement on these terms.
 - ii. Use active verbs, plain language, and accessible channels and formats (e.g., to assist those who may be vision or hearing impaired).
 - Consider the context and the audiences to determine if the language used could potentially lead to negative assumptions, stereotyping, stigmatization, or blame.
 - i. Avoid metaphors such as target, tackle, combat, or other terms with violent connotations when referring to engaging people, groups, or communities.

- **4.** Select imagery that is culturally appropriate, clear, and inclusive.
 - Avoid using images that could perpetuate negative stereotypes, including inequities in status or caricatures.
 - Choose images that reflect diverse audiences and that show people in ordinary settings wearing modern, typical, and common clothing.
 - Limit using traditional or cultural dress images unless the message is specific and appropriate to those customs,traditions, or cultural practices for the intended audience.
 - Ensure images are accessible to people with disabilities and people with limited English proficiency. Provide alternative (alt) text that clearly describes the image.
- **5.** Create campaign products that are culturally responsive, accessible, and available.
 - Ensure information represents people in the communities for whom the information is intended.
 - Make communications available in appropriate formats (e.g., audio, video, braille or large print formats, visual/graphic).
 - Translate materials into the preferred language of the intended audience, and a native speaker should review once the material has been translated.





Resources and Tools

Use the links below to reference fact sheets, style guides, and other resources when framing health disparities and cultural and population-driven nuances.

- Drug Overdose: Promoting Health Equity
- 8 Things We Can Do to Achieve Health Equity Around Overdoses
- American Indian and Alaska Native Audiences
 - Drug Overdose Prevention in Tribal Communities
- Spanish-language Audiences
 - Rx Awareness: Spanish Language Materials
 - Stop Overdose Campaigns
 - Drug Overdose website
- Health Equity in the Response to Drug Overdose (NACCHO)