



SR0201

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SENATE RESOLUTION

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WHEREAS, Pharmacoequity, a term introduced by Dr. Utibe Essien, is defined as eliminating treatment disparities in healthcare and ensuring that all individuals, regardless of race, ethnicity, and socioeconomic status, have access to the highest-quality medications required to manage their health needs; and

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WHEREAS, Pharmacoequity has eluded our healthcare system for decades; to eliminate this barrier to healthcare access and treatment, we must place equity at the center of the therapeutic continuum; and

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WHEREAS, The therapeutic continuum refers to the process through which a prescription drug makes its way to a patient; this process is made up of five steps, including drug development, drug trials and testing, drug prescription, drug receipt, and drug adherence, and each step offers a chance to advance equity; and

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WHEREAS, Improving access to care is important in creating policy to eliminate treatment disparities; this can be addressed by decreasing the dearth of pharmacies in communities of color, now referred to as pharmacy deserts, and by advocating for improved health and language literacy, such

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1 as engaging patient pharmacy navigators who can aid with
2 dosing instructions, managing multiple prescriptions, and
3 more; and

4 WHEREAS, Although implicit bias training now fills medical
5 curricula across the country, systemic solutions are also
6 needed to address bias in care; conducting data audits of
7 provider prescribing practices through health equity
8 dashboards and creating electronic, medical record-based
9 innovations that make the right choice the easy choice for
10 physicians to prescribe therapies are two system-level
11 strategies to reduce the harm of health care bias; and

12 WHEREAS, Additionally, the cost of care needs to be
13 studied and addressed as prescription drug costs can be as
14 much as three times higher in the U.S. than anywhere else in
15 the world; therefore, be it

16 RESOLVED, BY THE SENATE OF THE ONE HUNDRED FOURTH GENERAL
17 ASSEMBLY OF THE STATE OF ILLINOIS, that to eliminate alarming
18 racial disparities in healthcare, we must strive to create
19 policies that have a broad approach and encompass access,
20 bias, and cost in order to move healthcare closer to achieving
21 pharmacoequity to pave the way for better health outcomes.