

Prioritizing Public Benefit Means Healing for All

Announcing MAPS' Health Equity Plan

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“Of all the forms of inequality, injustice in health is the most shocking and most inhumane because it often results in death.”

— Dr. Martin Luther King, Jr. (1966)

COMMUNITIES EXPERIENCING THE HIGHEST RATES of trauma usually access mental health services at the lowest rates. Social marginalization is a primary determinant for poor health, and marginalization and historical trauma often compound post-traumatic stress disorder (PTSD). Years of neglect and underinvestment have limited access to affordable healthcare services, and created inadequacy in culturally competent and effective care. Conversely, programs designed to serve those who are most marginalized by society end up benefiting the widest net of people, often described as the "curb-cutting effect" (Blackwell, 2017). With potential U.S. Food and Drug Administration (FDA) approval of MDMA-assisted psychotherapy on the horizon, MAPS has developed a Health Equity Plan to work to safely and effectively deliver this potentially life-saving care to as many people as possible.

Our initial plan includes fundraising and allocating \$5.5 million to four main initiatives over the next three years: 1) developing scholarships for training therapists from historically marginalized communities, 2) supporting clinics and patients in the expanded access program with a treatment access fund,

3) building inclusive and equitable community, outreach, and education, and 4) hiring new team members at MAPS and MAPS Public Benefit Corporation (MAPS PBC) dedicated to implementing the health equity plan and integrating health equity into all parts of MAPS and MAPS PBC's work. We have already raised \$675,000 from a number of foundations including Libra Foundation, Riverstyx Foundation, Open Society Foundations, Dr. Bronner's, the Psychedelic Science Funders Collaborative (PSFC), and individuals including Gwyneth Paltrow, Bob Parsons, Craig Nurenberg, and Rachel Ratliff.

The backbone of our Health Equity Plan is expanding the therapist training to include, uplift, and train therapists, supervisors, and trainers from communities who experience high rates of trauma and insufficient access to care. In therapy, and especially in psychedelic therapy, a leading determinant of outcome is the establishment of a safe container through a trusting therapeutic alliance. Research shows that racial and ethnic alignment among healthcare providers and their patients can improve survival, safety, and trust for patients. We are committed to developing a network of MDMA therapists, supervisors,

and trainers who are reflective of the diverse demographics of the countries where we expect MDMA to be approved as a medicine.

Achieving health equity requires creating access to PTSD treatment for communities who experience the most trauma. In the United States, Indigenous, Black, and Latinx Americans experience some of the highest rates of trauma (Alegría et al., 2013; Roberts et al., 2011). Sexual orientation and gender identity also influence vulnerability to trauma; transgender and gender non-conforming people in the United States experience particularly high rates of PTSD (Mizock & Lewis, 2008; Roberts et al., 2012). MAPS will prioritize training therapists who are Indigenous, Black, Latinx, trans and gender non-conforming, queer, and therapists who are not able-bodied, who come from refugee or immigrant communities, who have been formerly incarcerated, who work in rural communities, and/or who are economically marginalized. We especially value people's perspectives with multiple intersecting marginalized identities, as they experience even higher barriers to effective care, as well as access to therapist training.

MAPS' Health Equity Plan creates an expanded access patient access fund and allocates funding to support the start-up costs of expanded access clinics. This plan will provide subsidization for MDMA-assisted psychotherapy treatment costs for expanded access patients who need financial assistance. This plan also supports expanded access clinics in the many costs required to get started, ranging from preparing and designing treatment rooms to purchasing and installing drug storage equipment. Expanded access will also allow more therapists to gain experience in MDMA-assisted psychotherapy, providing more opportunities for therapists from underrepresented communities to develop into MDMA therapy trainers and supervisors.

Additionally, our Health Equity Plan allocates ongoing resources, including staff, to community building, outreach, and education. This includes content creation, social media outreach, educational and community-building events, and workshops that will all include a broad understanding of cultural and historical trauma, psychedelic education, and harm reduction. Currently, MAPS is hosting a workshop series for therapists who attended MAPS' MDMA Therapy Training for Communities of Color, which will culminate in the creation of an organizer toolkit to support therapists and organizers building in communities of color.

The outcome disparities that result from "healthcare as usual" are unconscionable, and we are ready to do our part to reverse them. In one egregious example, a 2020 study documented that Black newborns are three times more likely to die in the hospital than white newborns if they are cared for by white physicians; when Black newborns are treated by Black physicians, this disparity drops significantly (Greenwood et al., 2020). These are newborns—imagine the health disparity in therapy for adults with lifetimes of different experiences.

We will be releasing more information soon about how to apply for therapist scholarships and the patient access fund, and we are excited to be in the process of onboarding more staff to dedicate resources to the core work of health equity. As COVID-19 has tragically demonstrated, no one is healthy if we are not all healthy, and the same applies for mental health. Equity and parity in access to mental health care is fundamental for collective human flourishing.

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The Washington Post Magazine features an article about access to psychedelic medicine and MAPS' Health Equity Plan as the cover story in September 2020.

NATALIE LYLA GINSBERG, M.S.W., is Director of Policy and Advocacy at MAPS, where she works to disentangle science from political partisanship, and to create safe, equitable and regulated access to psychedelics, and all criminalized substances. She is also partnering with Israeli and Palestinian colleagues to develop a psychedelic peace-building study. Natalie is particularly inspired by psychedelics' potential to assist in healing intergenerational trauma, for building empathy and community, and for inspiring creative and innovative solutions. Natalie received her B.A. in history from Yale, and her master's of social work (M.S.W.) from Columbia.

ISMAIL LOURIDO ALI, J.D., is Policy and Advocacy Counsel for MAPS, where he advocates to eliminate barriers to psychedelic therapy and research, develops and implements legal and policy strategy, and coordinates support for clinical research in Latin America. Ismail earned his J.D. at the University of California, Berkeley School of Law in 2016, where he served as co-lead of Berkeley Law's chapter of Students for Sensible Drug Policy and worked for the ACLU of Northern California's Criminal Justice and Drug Policy Project, and the International Human Rights Law Clinic at Berkeley Law.

RITIKA AGGARWAL, M.F.T. CANDIDATE, is Executive Support and Operations Coordinator at MAPS Public Benefit Corporation (MAPS PBC). Ritika earned her B.A. in feminist studies and psychology from the University of California, Santa Cruz. While in Santa Cruz, she founded and co-directed the local chapter of NORML/Students for Sensible Drug Policy and worked with the Wo/Men's Alliance for Medical Marijuana. For the past ten years, she has been a legal advocate for people incarcerated in California prisons, helping to secure the release of over 100 people with life sentences.

FEDE MENAPACE, M.B.A., serves as Director of Strategy for MAPS. In his role at MAPS, Fede aims to build bridges across different organizations in the psychedelic medicine field to further MAPS' cause of providing broad and safe access to mental health treatments for those who are most in need. Fede also works on internal strategy projects to identify and execute growth opportunities for MAPS and its subsidiaries. Fede received his M.B.A. from the Stanford Graduate School of Business and his M.S. in structural engineering from the University of Michigan, Ann Arbor.

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