

Digital Health for Equitable Health (DHEH)





(202) 419-2515 | connect@DHEHalliance.org | DHEHalliance.org



A LETTER FROM THE BOARD

Dear Prospective Member,

We would like to thank you for your interest in the *Digital Health for Equitable Health (DHEH) Alliance*. There are many disparities that exist in our healthcare system today that prevent underserved populations from receiving adequate access to quality healthcare. These barriers often affect patients' health outcomes and wellbeing. The use of digital health technology has the unique potential to connect patients to care, information, and health services, while facilitating better education and support for underserved populations that are disproportionately impacted by various health issues.

It is for this reason, the DHEH Alliance has been formed, to bring together multi-sector stakeholders, leaders, and advocates to promote a more digitally inclusive and accessible society that transforms health delivery for underserved populations. We focus on supporting policies and initiatives that provide access to digital health technologies designed to mitigate existing and potential barriers to high quality care.

Why a coalition? Simply put, a coalition allows us to:

- \cdot Catalyze change supporting health and wellbeing for all
- Enable a comprehensive response to intractable societal health challenges
- Amplify and mobilize resources to create impact
- \cdot Establish cross sector partnerships with members that share common goals

None of this can be made possible without the help and support of our members. Health disparities in the U.S. is a nationwide issue that requires the involvement of a multitude of stakeholders to work collaboratively on meaningful and sustainable solutions. In other words, we need you with us!

We ask you to read more about our mission of eradicating health disparities through the use of digital health outlined within this booklet and look forward to speaking with you about the vast opportunities your membership can support.

For health and wellbeing for all,



Tanisha D. Hill, MPH DHEH President U.S. Sr. Medical Director, Respiratory – Teva Pharmaceuticals



Michael R. Crawford, MBA, MHL DHEH Vice President Associate Dean for Strategy, Outreach and Innovation – Howard University



TABLE OF CONTENTS

>	Background	5
>	Who We Are	8
>	Overview	10
>	Why Become a Member?	12
>	Next Steps	14



BACKGROUND



(202) 419-2515 | connect@DHEHalliance.org | DHEHalliance.org



BACKGROUND

Healthcare Disparities in the U.S.

- Disparities in healthcare exist when differences in health outcomes or health determinants are observed between populations¹
- In the United States, differences among specific population groups drive disparities in achieving the full benefits of healthcare¹.
- The term "health disparities" typically reflects differences between racial or ethnic groups but can also exist in other dimensions such as gender, sexual orientation, age, disability status, socioeconomic status, and geographic location².
- Technology allows us to reach each other almost instantly from nearly anywhere in the world.
- Expansion in the use of technology provides many opportunities to work with communities to reduce health disparities³.

Most Recent Issue: COVID-19 Related Disparities

- COVID-19 cases in Blacks and Hispanics are 2.6x and 2.8x higher than the rate of whites
- Rates of hospitalizations are 4x higher in Blacks and Hispanics compared to whites
- The rate of death due to COVID-19 is 2x higher among blacks than whites

References: i National Academies of Sciences, Engineering, and Medicine; Health and Medicine Division; Board on Population Health and Public Health Practice; Committee on Community-Based Solutions to Promote Health Equity in the United States; Baciu A, Negussie Y, Geller A, et al., editors. Communities in Action: Pathways to Health Equity. Washington (DC): National Academies Press (US); 2017 Jan 11. 2, The State of Health Disparities in the United States; Available from: https://www.ncbi.nlm.nih.gov/books/NBK425844/ ii Ditto iii Roundtable on the Promotion of Health Equity and the Elimination of Health Disparities; Board on Population Health and Public Health Practice; Health and Medicine Division; National Academies of Sciences, Engineering, and Medicine. The Promises and Perils of Disparities. Available from: https://www.ncbi.nlm.nih.gov/books/NBK4253436/



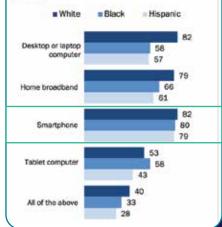
THE POTENTIAL FOR TECHNOLOGY

With the advent of COVID-19, telehealth claims **increased from 0.15%** in of April 2019 **to 13%** in April of 2020¹, and the percentage of doctors who say they used telehealth **increased from 26% pre-pandemic to 98% during the pandemic**²

During the COVID-19 pandemic, the increased expansion of the use of technology in healthcare provides many opportunities to work with communities to reduce health disparities

In particular, mobile technologies have a unique potential to reduce disparities because of their extensive use in racial and ethnic minority communities³

% of U.S. adults in each group who say they have the following





THE PLAN

We propose the development of a coalition of key members with a unified aim to reduce health care disparities in underserved and under-accessed populations by increasing and improving access to care using digital health technologies such as mHealth, eHealth and telehealth strategies.

1.Centers for Disease Control and Prevention (2013). Morbidity and Mortality Weekly Report (MMWR). Introduction: CDC Health Disparities and Inequalities Report — United States, 2013. MMWR 62(03):3-5. https://www.cdc.gov/mmwr/preview/mmwr/html/su6203a_Ltm?s_cid=su6203a_Lw 2. Asthma and Allergy Foundation of America. https://www.afa.org/asthma-disparities-burden-on-minorities aspx 3. Fuller-Thompson, E., et al. (2016). CODD in a Population-Based Sample of Never-Smokers: Interactions among Sex, Cender, and Race. International Journal of Chronic Diseases. https://doi.org/10.1155/2016/5862026 4. Stewart, W.F. et al. (1992). JAMA. 2671)(64-69. doi:10.1001/jama.1992.03480010072027 5. Nicholson R.A. et al. (2006). Headache; 46(5): 754-65. doi: 10.1111/j.1526-4610.2006.00453x. 6. Centers for Disease Control and Prevention. (2020, Aug 18). COVID-19 Hospitalization and Death by Race/Ethnicity. https://www.cfac.gov/coronavirus/2019-ncov/covid-data/investigations-discovery/hospitalization-death-by-race-ethnicity.html. Brair Health. Monthly Telehealth Regional Tracker, Apr.2020. https://www.fairhealth.org/article/fair-health-tracker-shows-continuing-growth-in-telehealth 2. ulik B. Hey, pharma reps: Most docs still want contact amid COVID-19 Hospitalization and Deatinto-a-new-normal-reconnect-via-video-and-phone-meet 3. The Promises and Perils of Digital Strategies in Achieving Health Equity: Workshop Summary. Washington, DC: The National Academies Press. https://doi.org/10.117226/23439 4. Pew Research Center (2019, April 19). https://www.faire-powersearch.com/rom/art.pl-blacks-hispanics-bripe-blacks-hispanics-shttps://doi.org/10.117226/23439 4.



WHO WE ARE





WHO WE ARE

The Digital Health for Equitable Health (DHEH) Alliance was created to bring together multi-sector stakeholders, leaders, and advocates to promote a more digitally inclusive and accessible society that transforms health delivery for underserved populations. The DHEH Alliance focuses on supporting policies and initiatives that provide access to digital health technologies designed to mitigate existing and potential barriers to high quality care.

Digital Health for Equitable Health Alliance Policy Statements:

- We advocate for policies that support access to digital health technologies and services that mitigate existing and potential barriers to high quality medical care based on geography, age, ethnicity, race, gender, disability, mobility status, or socioeconomic status.
- We support policies that build upon innovations in digital health, such as greater use of wearables, artificial intelligence, machine learning, sensors, facial and voice recognition, natural language processing, virtual, mixed, and augmented reality and advance the use of these innovations to ensure they are codified and sustained in public and commercial health care plans.
- > We support policies that foster and encourage comprehensive, quality sustaining coverage and reimbursement for digital health technologies.
- > We advocate for policies that support future innovations and infrastructure that facilitate the transformation of healthcare delivery for underserved populations.



OVERVIEW





The Digital Health for Equitable Health (DHEH) Alliance

A coalition developed to support social change through digital health technology

OVERVIEW

OUR MISSION

To form a multi-sector alliance with a shared aim to create a more digitally inclusive society that facilitates improved health and wellbeing for underserved populations.

DESIGNED TO SUPPORT CHANGE

Why did we choose a coalition to support this mission? The structure of coalitions offer:

The key is to shift our focus from helping people to fit our care delivery system, to one where we design our care delivery system to fit people where they live, work, learn, play, and receive healthcare¹

Change Catalysts	Catalyze change to transform health and wellbeing for all		
Collaborative Response	To enable a comprehensive response to intractable societal health challenges		
Resource Leveraging	To amplify and mobilize resources to create impact		
Diverse Partnership		lish cross sector partnerships mbers that share common goals	
OUR GOALS		Access to Data Access to Digital Solutions	

To improve the health and wellbeing of underserved communities through improved: ccess to Digital Solutions Digital Health Coverage Access to Broadband Digital/Health Literacy 1. Erwin and Krishnan BMJ 2016; 354: i4536.

MEET DHEH

The Digital Health for Equitable Health (DHEH) coalition was created to bring together multi-sector stakeholders, leaders, and advocates to promote a more digitally inclusive and accessible society that transforms health delivery for underserved populations. The DHEH coalition focuses on supporting policies and initiatives that provide access to digital health technologies designed to mitigate existing and potential barriers to high quality care.



WHY BECOME A MEMBER





WHY BECOME A MEMBER?

- Become a Change Catalyst by transforming health delivery for underserved populations through digital inclusion
- Sain a "Seat at the Table" to shape policy directed at mitigating health disparities using digital health technologies
- Obtain Access to a Hub of Information as we work together to develop position papers and publications that inform policy and engage legislators and receive up-to-date happenings within digital health and healthcare disparities in underserved populations
- Earn Recognition as a leader on issues specific to the intersection of disparities and digital health
- Be a Part of Multi-Sector Community of Members whose goal is to engage in social change by leveraging resources and support from a diverse group of like-minded leaders across different sectors and network with other leaders from various disciplines
- Demonstrate a Public Commitment to endorse a coalition with a mission to improve access to care in underserved communities



NEXT STEPS



(202) 419-2515 | connect@DHEHalliance.org | DHEHalliance.org



NEXT STEPS

Ready to join?

Click here to request our Letter of Commitment packet

Questions?

Please feel free to contact Michael Werner at Michael.Werner@hklaw.com for any additional questions

LOOKING TO LEARN MORE ABOUT HEALTH DISPARITIES IN THE U.S.? SEE THE LINKS BELOW:

Communities in Action: Pathways to Health Equity https://pubmed.ncbi.nlm.nih.gov/28418632/

CDC Health Disparities and Inequalities Report — United States, 2011 https://www.cdc.gov/mmwr/preview/ind2011_su.html

The State of Health Disparities in the United States https://www.ncbi.nlm.nih.gov/books/NBK425844/

Health Disparities Overview

https://www.ncsl.org/research/health/health-disparities-overview.aspx