Toolkit shows how developers can link health equity to innovation

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Taking the first steps in a journey to assess and understand equity in health care innovation can be a daunting task, but a new resource is now available to help solution developers, purchasers and investors get started on this path and ensure that the products or services they are building are meaningfully advancing health equity.

The Equitable Health Innovation Solution Development toolkit aims to enable an understanding of how communities that have been historically marginalized by the U.S. health care industry can be engaged in the design, development, testing and evaluation of health innovations to ensure positive health outcomes and avoid or mitigate harm.

Download the Solution Development Toolkit.

The effort is part of an AMA initiative, the In Full Health Learning and Action Community to Advance Equitable Health Innovation, that provides a framework for shared understanding and a community for stakeholders committed to putting equity at the center of their decision-making on health innovation.

The toolkit was developed in collaboration between the AMA Center for Health Equity, The Greystone Group, the AMA External Equity & Innovation Advisory Group, and the In Full Health Collaborator Organizations.

In addition to providing input on the solution-development toolkit, the advisory group also helped to develop In Full Health and build a business case for investment in equitable health innovation.

The 14 founding collaborator organizations, which include the Business Group on Health and the Healthcare Information and Management Systems Society, have committed to work with the AMA to support and advance the In Full Health principles for equitable health innovation.
End to end uses

Use of the toolkit is encouraged through multiple stages of the solution-development lifecycle, including problem identification, initial solution ideation and through ongoing evaluation and solution iterations.

There promises to be several iterations of the toolkit as well.

“We see the toolkit as a living, dynamic document,” Chris Gibbons, MD, MPH, a member of the AMA External Equity & Innovation Advisory Group and founder and CEO of The Greystone Group, a digital health transformation firm, said in an interview posted on the In Full Health website.

“Even though it’s gone through multiple levels of development, review and refinement, we think that it’s always best to continue that process going forward,” Dr. Gibbons added.

It appears that most solution developers have little meaningful expertise or experience involving individuals from historically marginalized racial and ethnic groups in the development or design of digital health solutions—yet many developers say they are creating solutions for “all,” Dr. Gibbons said.

“It is hard to imagine how these solutions could be the best solutions for individuals from (these) populations,” he added. “We wanted to make sure that this was not the case with the development of this toolkit.”

The toolkit begins with ten actions health-innovation developers can take to ensure equitable impact of their products or services, including:

- Understand the demographics of your total potential market, including the inequities in health conditions, treatment and outcomes among demographic groups and the structural and individual causes of these disparities.
- Be explicit about which demographic groups are represented among those you are engaging in solution design, and how you intend to address any inequities affecting those groups.
- Conduct a review of clinical research or community health data used as an evidence base for your solution to understand and address any gaps in representation of priority groups. Address any gaps and define a plan for monitoring variances among groups to ensure efficacy and safety for all user groups.
- If applicable, ensure that priority demographic groups are represented in all augmented intelligence algorithm datasets used to create the solution.
“All solution designers have resource constraints and will need to prioritize target audiences,” the toolkit says. “Once prioritization decisions are made explicit, we can understand representation gaps, decision-making power imbalances, and information asymmetry that might render solutions ineffective for or harmful to demographic groups that are not engaged.”

The toolkit also urges developers to seek out the insights and recommendations of marginalized communities via representation and power sharing in formal participatory design opportunities such as patient advisory groups, patient design councils, user research and usability testing.

Learn more

According to AMA policy, health equity is defined as “optimal health for all,” and is a goal toward which the AMA will work by advocating for health care access, research, and data collection; promoting equity in care; increasing health workforce diversity; influencing determinants of health; and voicing and modeling commitment to health equity.

Learn about the AMA Center for Health Equity and the AMA’s strategic plan to embed racial justice and advance health equity.

Other key health equity resources include:

- Advancing Health Equity: A Guide to Language, Narrative and Concepts
- AMA policies on health equity
- Health Equity topics
- Diversity, equity and inclusion (CME)
- Advancing equity in medicine (CME)
- *Journal of Ethics*:
  - Health Equity and the Circle of Human Concern
  - Ethics Talk podcast: How Clinicians Can Use Their Skills and Authority to Promote Health Equity