Creating “techquity” to bridge patients to health innovations

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Andis Robeznieks
Senior News Writer

Despite the billions invested in medical technology innovations, health inequities continue to persist in the U.S., and the nation continues to experience the burden of chronic disease and high rates of death which could be avoided. A new report, however, suggests that a focus on creating equitable access, use and continued engagement with health tech could narrow these gaps.

The report (PDF)—“The Path to Techquity: An Introduction to Key Issues Impacting Equitable Design & Deployment of Technology in the U.S. Healthcare System,” identifies ways that technology can revolutionize health care, but cautions that it “also carries the risk of unintentionally perpetuating long-standing inequities” among communities and groups that have been economically and socially marginalized.

The report, intended to serve as a “call to action” for industry organizations and leaders, was produced by Ipsos, a global health care market research and consultant firm, and the HLTH Foundation, a nonprofit organization that promotes equity, inclusion and opportunity in health care.

Alexis Anderson, an Ipsos principal and the lead author of the report, and Janna Guinen, HLTH’s executive director, discussed the report and defined its terms in an interview posted on the website of the In Full Health Learning and Action Community, which engages the industry and encourages digital solutions that address the needs of historically marginalized communities while ensuring that new tools don’t unintentionally embed bias.

Anyone, including physicians, investors, solution developers, funders and others interested in participating in the influence of the health solution ecosystem are invited to join the In Full Health Learning and Action Community, which was sparked by the AMA’s strategic plan to embed racial justice and advance health equity.

Bridge to serving patients

URL: https://www.ama-assn.org/delivering-care/health-equity/creating-techquity-bridge-patients-health-innovations
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“I think of techquity being like a bridge,” Anderson said in the interview.

“On one side of the bridge, we’ve got the health care industry and its technologies which can take so many forms—patient portals, wearables, connected health devices, telehealth, virtual care, and health apps—just to name a few,” she said. “On the other side of the bridge are the people—all those who the health care system intends to serve.”

While some who are comfortable with and able to use health tech can cross the bridge without problems, many—including some who may truly benefit from using it—are unable or unwilling to do so.

“Techquity means acknowledging that, if the health care industry doesn’t go onto the bridge ourselves and meet our communities where they are at, then the health tech bridge remains uncrossable, no matter how impressive the health tech may be,” Anderson said.

“It’s not enough to talk about this topic,” she added. “It’s important that the industry has a clear, tangible, transparent plan for success and that we’re continuously evaluating how we’re doing along the way.”

3 elements of techquity

Technology access and digital literacy are now “super” determinants of health that affect an individual’s abilities to access education and employment, says the Ipsos-HLTH report, which identifies these three elements of techquity.

Equitable access

15% to 24% of Americans may lack a broadband internet connection. Although New York City has the infrastructure to provide nearly universal broadband access, about one-third of its households go without.

Use

Health technology lags behind other industries in user-friendliness, interoperability, privacy protection and inclusion in terms of language and accommodations for disabilities—all factors that significantly affect uptake.
Sustained engagement

Mistrust manifests itself in the fear of engaging with health tech and concerns about sharing personal health information. Efforts must be made to embed equity into innovations and improve current perceptions, or else patients may “continue to be stranded outside of the health care system,” the report says.

Guinen said that reviewing data-collection processes and understanding the value of diverse representation are two actions companies can take.

“Make sure that you are collecting the data that you need to understand the populations you serve and how well you’re meeting their needs,” she explained. “Demand diversity from your business partners and invest in diverse leadership and governance in your own company.”

The In Full Health Equitable Health Innovation Solution Development Toolkit can enable an understanding among solution-developers, buyers and investors 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.