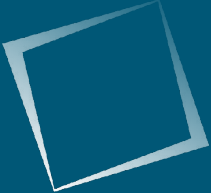


Closing the Gap: UX for Health Equity



Gyles Morrison,
Clinical UX Strategist, Whitespace

white  space

Closing The Gap

UX for Health Equity



10th October 2023 | Dr Gyles Morrison MBBS MSc

white  space



Hi, I'm Gyles

Clinical UX Strategist

Healthcare & Lifesciences at Whitespace

1. Clinical UX Research & Design
2. Clinical UX Consultanting
3. Clinical UX Training & Supervision



Contents

1. Explaining Health Inequity
2. Causes of Health Inequity
3. Creating Health Equity





Explaining Health Inequity



Despite health being a basic human right, health inequity is a persistent global problem humanity must solve



The Problem

People are suffering unnecessary
harm and death in healthcare
systems around the world



The Solution

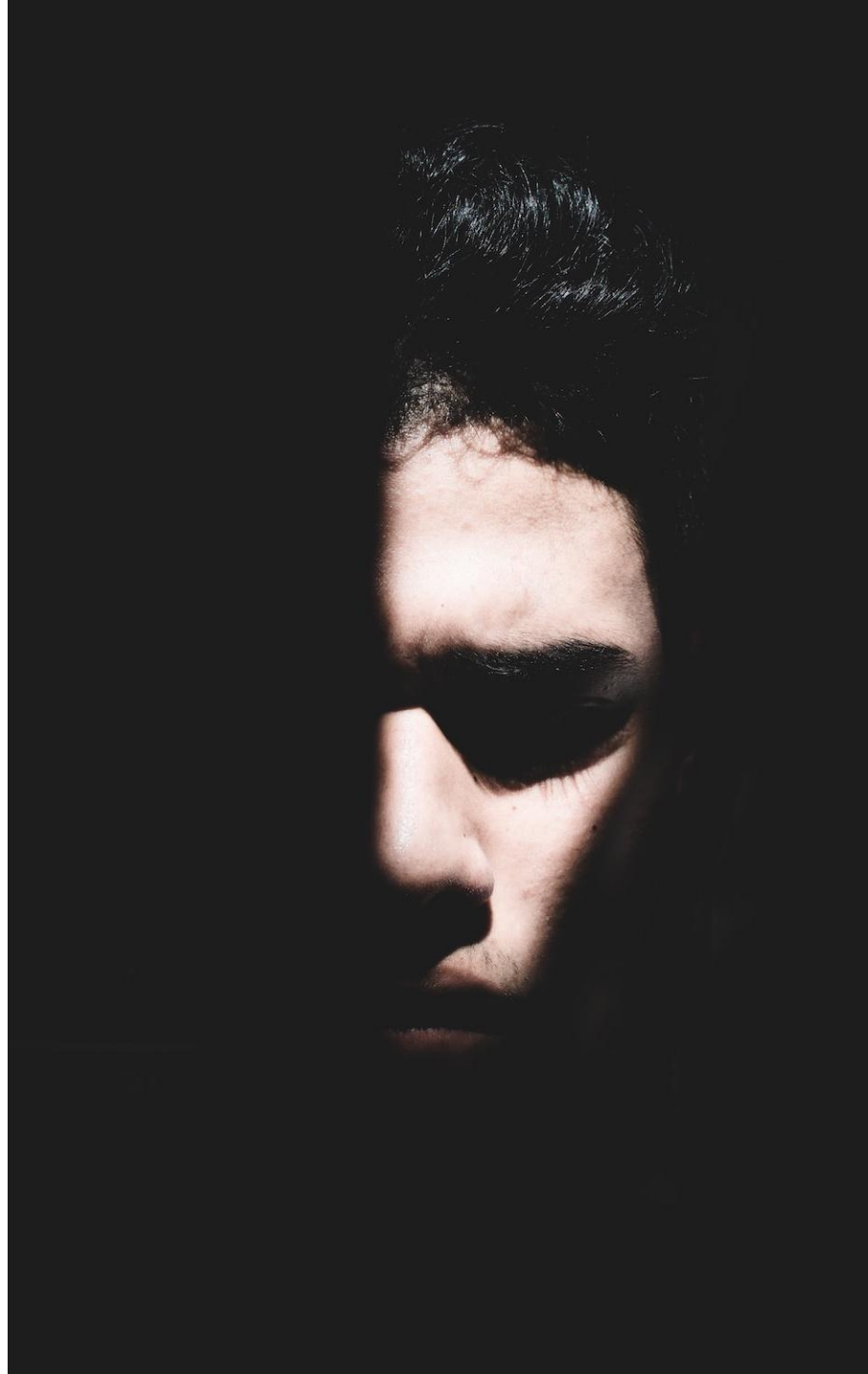
*Get people to do the right thing at
the right time*

What is Health Inequity?

The unfair and avoidable differences in health status and health outcomes observed within and between countries.

Key words

- Unfair
- Avoidable
- Health Status
- Health Outcomes






What is Health Equity?

The state in which everyone has a fair and just opportunity to attain their highest level of health

Key words

- Everyone
- Fair
- Just
- Highest level of health





*“a state of complete physical, mental
and social well-being and not merely
the absence of disease and infirmity”*

World Health Organization



The Causes of Health Inequity

2

Causes of Health Inequity

- Social Determinants of Health
- Institutionalized beliefs and policies
- Lack of accountability and responsibility

Causes of Health Inequity

Three Core Reasons

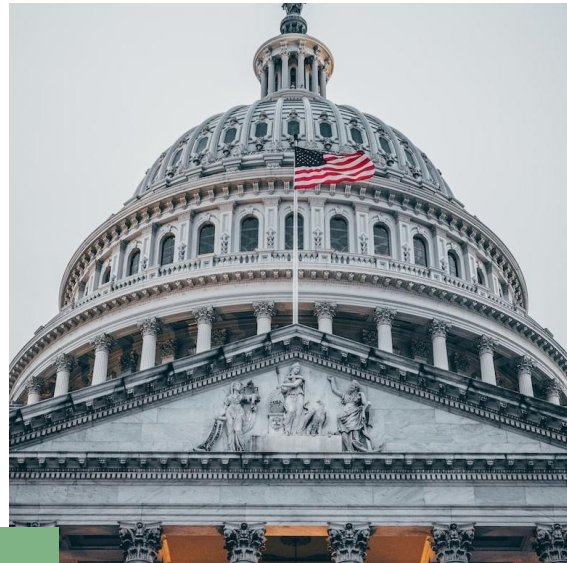
1

Social Determinants of Health



2

Institutionalized discrimination



3

Lack of accountability and responsibility



Cause of Health Inequity

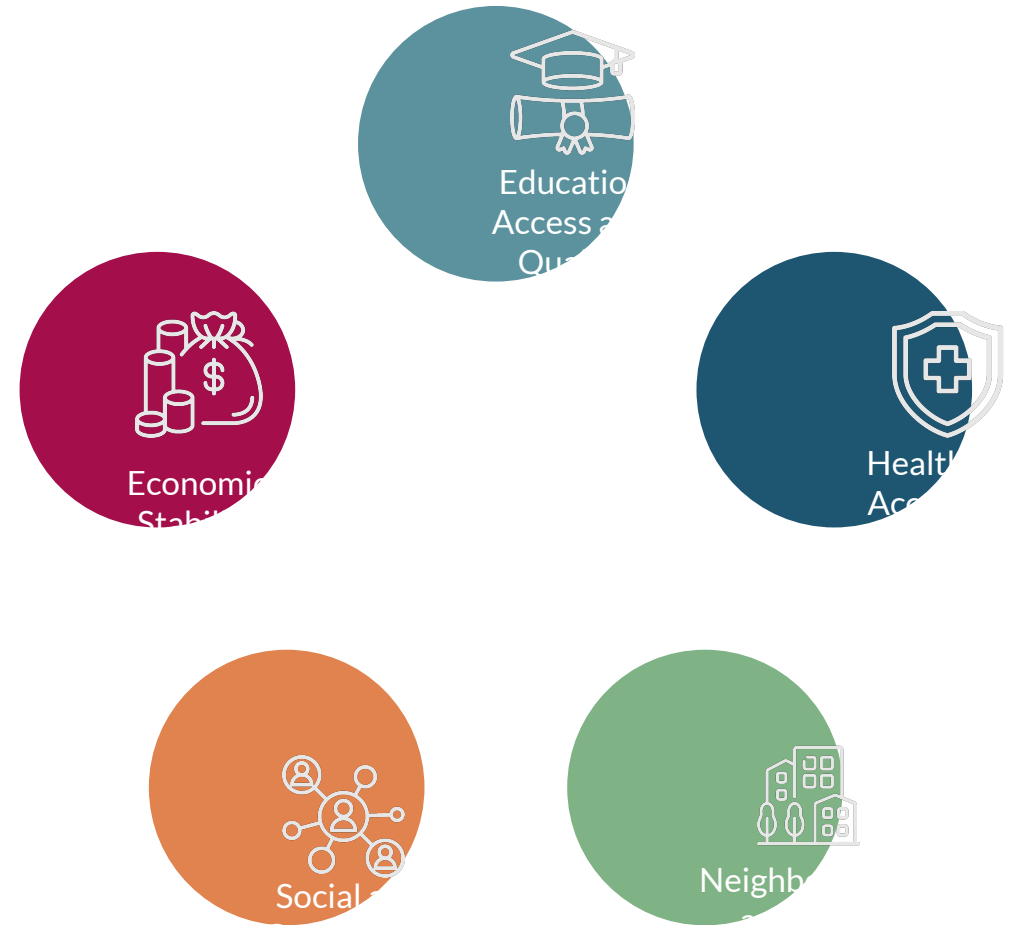
Social Determinants of Health

The social determinants of health (SDH) are the non-medical factors that influence health outcomes. They are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life.

World Health Organization

Key facts

- The lower the socioeconomic status, the lower the health status and health outcomes
- SDH is complex as the determinants are interconnected
- Many factors influence SDH; communities, businesses, and governments



Social Determinants of Health - Example

**Cystic
Fibrosis
Trust**



Population

10,900 UK

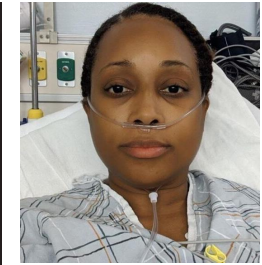
40,000 USA

NIH Funded Research per person

\$2,807

Philanthropic funding per person

\$7,690



Population

15,00 UK

100,000 USA

NIH Funded Research per person

\$812

Philanthropic funding per person

\$102

Cause of Health Inequity

Institutionalized Discrimination

Belief

An acceptance that something exists or is true, especially one without proof.

Policy

A course or principle of action adopted or proposed by an organization or individual.

Prejudice

Preconceived opinion that is not based on reason or actual experience.

Discrimination

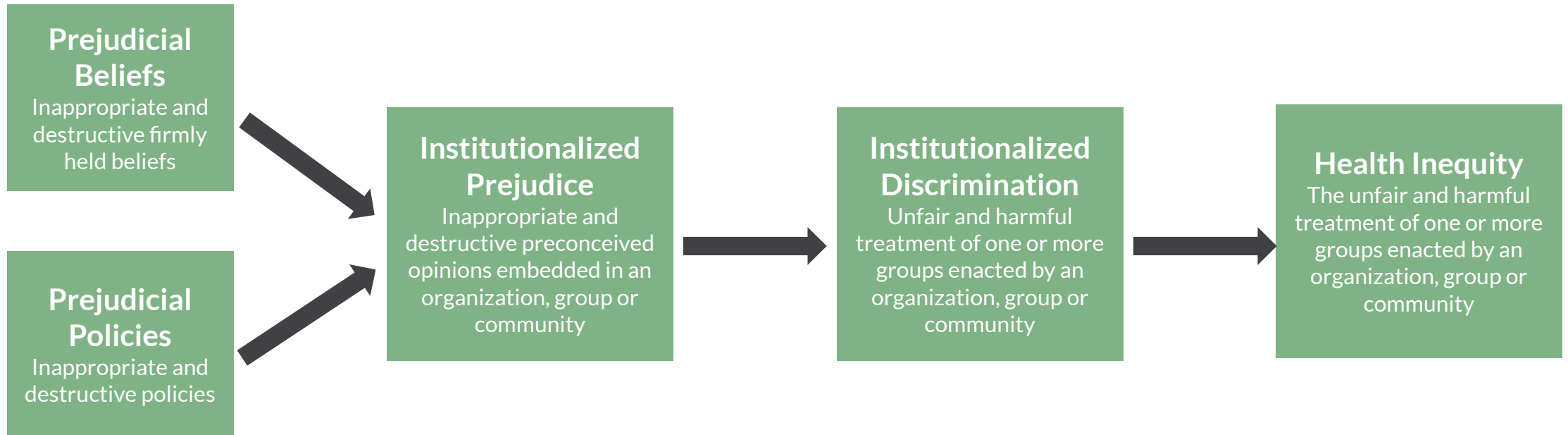
The unjust or prejudicial treatment of different categories of people, especially on the grounds of race, age, sex, or disability.

Institutionalized

Established (something, typically a practice or activity) as a convention or norm in an organization or culture.



Institutionalized Discrimination



Cause of Health Inequity

Lack of accountability and responsibility

“You cannot solve a problem until you acknowledge that you have one and accept responsibility for solving it”

Zig Ziglar

Quote from the book “Over the Top: Moving from Survival to Stability, from Stability to Success, from Success to Significance”

Key points

- With great power comes great responsibility
- Communities, businesses and governments have the power to end institutionalized discrimination
- Products and services can overcome this lack of accountability and responsibility, and prejudicial beliefs



Creating Health Equity

Three Core Solutions

1

Improve Health Economics



3

Design With Discrimination
in Mind



2

Help Those With The
Greatest Needs



Improve Health Economics

We must improve the way money flows within local to global healthcare systems and optimize the experience and value of patients, providers and payers.

Key Points

1. Put patients above profits
2. Make healthcare accessible for all
3. Incentivize health seeking behavior
4. Incentivize achieving health outcomes
5. Incentivize health prevention



Creating Health Equity

Help Those With The Greatest Need

By focusing on the most disadvantaged and oppressed people in the world, we can have solutions that can satisfy everyone's needs.

Key Points

1. Follow a User Centered Design process
2. Identify limited users; *legitimate users with real or perceived disabilities or handicaps which hinders their successful use of a product or service*
3. Conduct thorough user research, focusing on what users do *and* experience
4. Test solutions with a representative sample, making changes along the way



Design With Discrimination in Mind

Discrimination is real and felt by almost everyone in some shape or form. We should keep this in mind when designing and not wait for the world to be free of discrimination.

Key Points

1. Accept institutionalized discrimination is real
2. Reject prejudicial ideas and policies
3. Assess for prejudicial ideas and policies that can impact project
4. Challenge discriminatory behavior whenever you see it
5. Assume end users can discriminate and be discriminated
 - Ask yourself, is there anyone who could be discriminated by this solution? If the answer is yes, be clear on why and the root cause



Creating Health Equity

“Injustice anywhere is a threat to justice everywhere. We are caught in an inescapable network of mutuality, tied in a single garment of destiny. Whatever affects one directly, affects all indirectly.”

Martin Luther King Jr.

Letter from the Birmingham Jail



*Any questions?
Let's talk.*

Gyles.Morrison@whitespace.ch

white  space