

OHDSI Health Equity Workgroup

UPDATE 2021-10-05

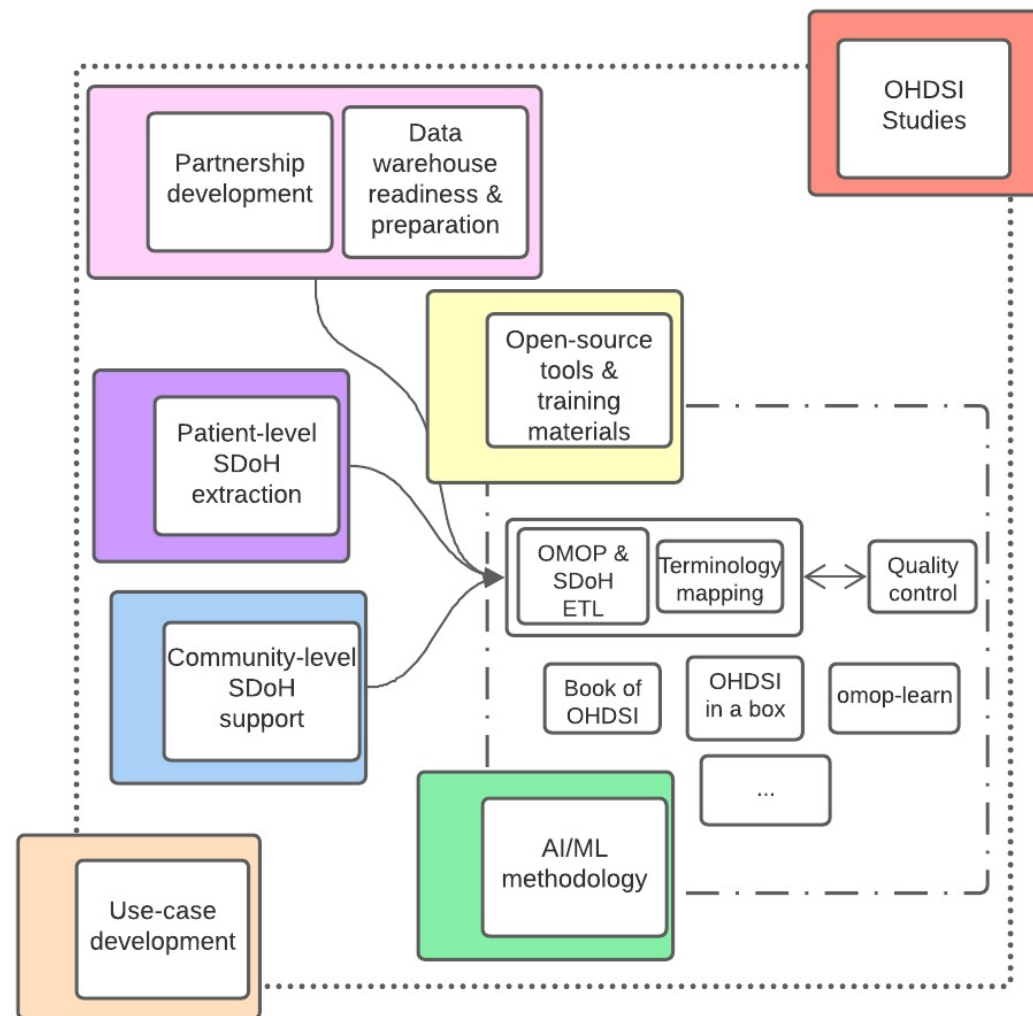
OHDSI Health Equity Workgroup

First meeting June 29, 2021

Meet every other week, Tuesday at @2PM Eastern

128 members

We aim to engage critically and intentionally in all of our work, considering not only the results but the potential interpretation and impact of results, steering clear of work that reinforces health disparities and misinterpretations that generate stigma, and lifting up work which is likely to contribute to health equity. [1]



AIM-AHEAD Coordinating Center – Data and Research application

PI - Arash Shaban-Nejad

PI - Noémie Elhadad

- 3 weeks
- 45 individuals
- 15 institutions
- 28 letters of support including community organizations and Google

Cons:

- No funding awarded

Pros:

- Demonstrated successful collaboration at scale
- Brought new folks to the workgroup and OHDSI
- Formed a strong basis for future work

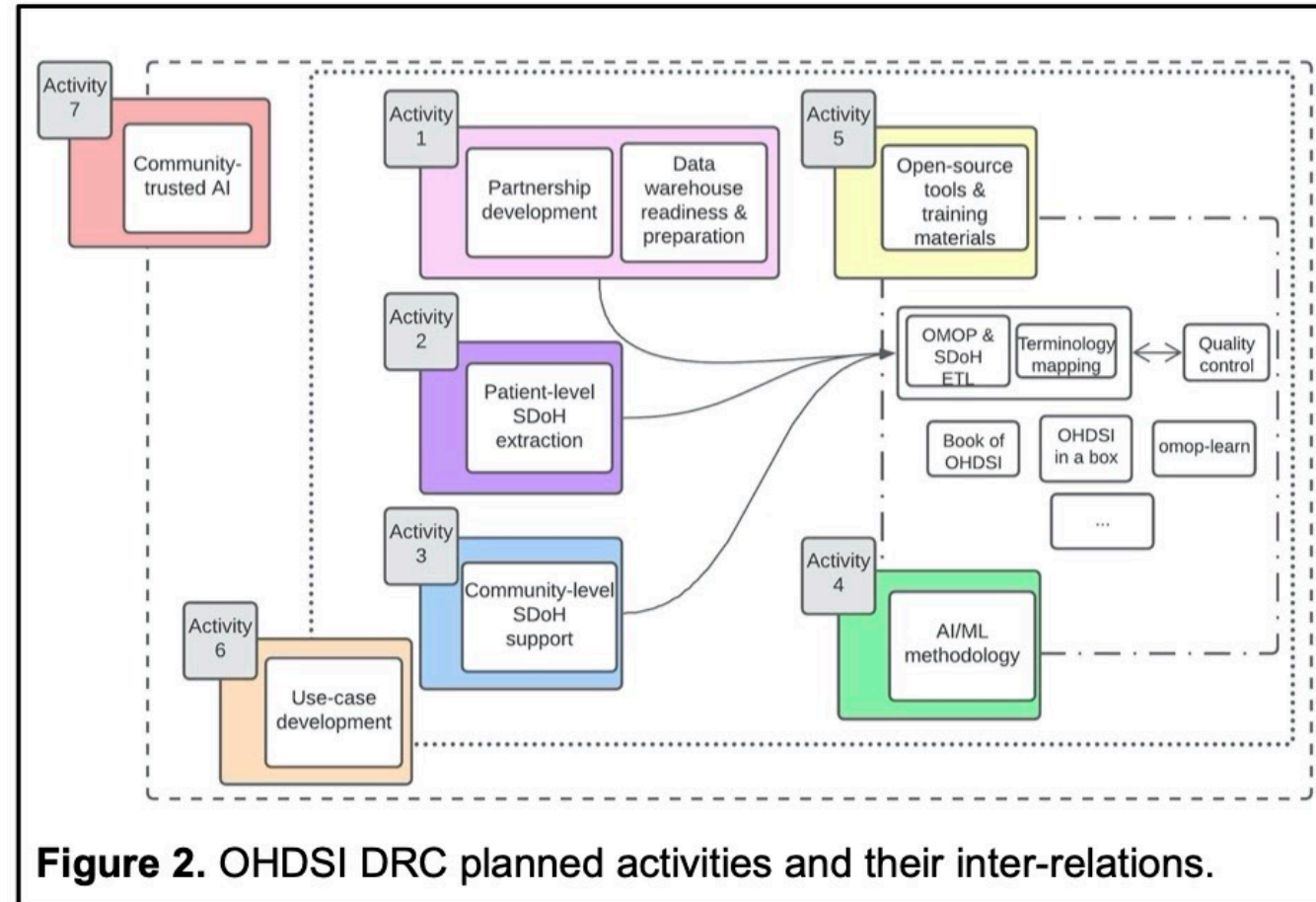


Figure 2. OHDSI DRC planned activities and their inter-relations.

AIM-AHEAD Reflection

OHDSI resources and tools are free, but participation requires time (to learn, to participate) and money (to ETL data, for research support).

How might we direct resources to supporting a diversity of researchers, community partners, and data involved in OHDSI research and development?

Objectives and Key Results

1.5

Overall Score

Score range	Question to ask:	3-month adjusted score range	
9.5	10 Are we being ambitious enough?	2.375	2.5
6.5	9.4 What have we learned?	1.625	2.35
4	6.4 How can we focus/help?	1	1.6
1.5	3.9 What do we need to change?	0.375	0.975
0	1.4 Should this remain a priority objective?	0	0.35

.6

Generate and disseminate real-world evidence about the substantial public health issue of health inequities

1.5

3 fully-reproducible study packages executed across at least 20 OHDSI data partners

0

10 publications accepted in peer-reviewed journals

1

10 instances of presentations of our work

0

10 uses of OHDSI results by internal or external stakeholders that demonstrate influence in policy or clinical decision-making

0.1

Standards for studying patient-level Social Determinants of health, Risk factors, and Needs (SDRN) [2]

0

Identify 5 priority use cases for patient-level SDRN, providing recommendations for storing, collecting, and mapping the relevant common data elements

0

Provide a recommendation (to data collectors like health systems) for screening tools useful for Health Equity research

0.5

Identify standard concepts for the data collected in recommended and commonly used screening tools

0

Engage with NLP team to release tools/methods for extracting SDRN from notes

0

Validate NLP tool for extracting SDRN in the context of a study

1.6

Standards for studying community-level SDRN

3

Identify 3 external datasets useful for incorporation in health equity studies

3

Identify a priority use case for linking place-based SDRN datasets to OMOP data

0

Identify a priority use case for rolling up patient-level OMOP data to describe spatial-population-level properties

0.5

Release a study package using GIS tools to gain a better understanding of health inequities

0.7

Extend OHDSI tools to make a health equity perspective the default and/or an option

2

Augment Patient Level Prediction (PLP) to expose the differences of predictions, predictive power, and other fairness metrics of the predictive models it creates.

0

Release tools to assess data quality / gaps for SDRN

0

Develop a framework for best practices in health equity across study design

1.5

Engage the broader community on issues related to health equity

3

Release directories of accessible educational resources and research relevant to health equity

0

Engage early-stage researchers group for researcher diversity and inclusion in our work

0

Engage education workgroup for health equity educational content

3

Organize health equity reading group / journal club

10

Support the work of the group

Apply, as a group, for a grant

Next Steps

Ongoing Studies / Efforts – reach out if interested

- Health Equity Research Assessment (HERA): a large scale characterization of gender and racial disparities - Noémie Elhadad, Tony Sun
- MSK study (Assess racial disparities in cancer surgery) - Rimma Belenkaya
- Disparities Analysis and Fairness Metrics in Patient-Level-Prediction – Ross Williams, Juan Banda

Upcoming Meetings

- 10/5 – Community-Level SDRN, GIS and Health Equity
 - 10/15 – Journal Club, Reconsidering Race Correction in Clinical Algorithms
 - 10/19 – Predictive Algorithms and Health Equity
 - 11/2 – Patient SDRN data elements and standards
- Have work you are interested in showcasing?
 - Interested in leading work within the group?
 - Feedback on objectives or prioritization?

Please Email - Jake Gillberg

References

[1] - [“Health equity tourists’: How white scholars are colonizing research on health disparities” STAT, September 23, 2021.](#)

[2] - [“When Talking About Social Determinants, Precision Matters” Health Affairs Blog, October 29, 2019. DOI: 10.1377/hblog20191025.776011](#)

Exhibit 1: Examples of interventions across the continuum of SDOH, social risk factors, and social needs

