

12-8-2020

Fair Treatment

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Recommended Citation

(2020) "Fair Treatment," *In The Loop*: Vol. 1 : Iss. 15 , Article 4.

Available at: <https://via.library.depaul.edu/intheloop/vol1/iss15/4>

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Fair Treatment



Christina Harrington (center) develops interface mockups with graduate research assistants Lian Tran and Anthony Gladney at her research lab.

Three initiatives address racial inequity in health care

EHI Design Research Lab

Christina Harrington, assistant professor in the School of Design, is an expert in participatory design, which democratizes process innovation by involving more stakeholders and empowering underserved populations. Using her expertise in this area, she created the [Equity and Health Innovations \(EHI\) Design Research Lab](#) in 2019.

“Innovation is pretty commonly known in the design space, but the introduction of equity really emphasizes that our work focuses on making sure design is fair and just for all populations,” Harrington explains.

The EHI lab’s work “centers on those who are typically neglected in both health care and the design of health care systems,” she adds. “Designing technologies that are specifically anti-racist and considerate of those marginalized because of their racial identity, we can truly push forward design that considers everyone.”

Two graduate school students and two undergraduates volunteer in Harrington’s lab, funded by a National Institutes of Health grant. For a relatively new lab, the grant is “a big success,” Harrington notes.

Black Maternal Health

Associate professors Enid Montague and Sheena Erete are co-principal investigators studying birth and death rates connected to pregnancy, “measuring the differences in experiences related to race,” Montague says.

The project, which began in 2018, “is designed to collect stories about birth experiences in the Chicagoland area,” she explains, empowering people “to share the diversity of their experiences so mothers, researchers and health care providers can learn from them.”

Doctoral candidate Ashley Loomis (CDM MS ’19) “helped design and create content for the project’s website, literature reviews and survey questions that collected the stories,” Loomis explains, noting the project fills a need because “Black maternal health is still underresearched and underfunded in typical public health spaces. Policies, public health interventions and research tend to focus more on the baby than the mother.”

“These stories are helping us to develop better tools that can capture different experiences in health care related to race and inform new designs that reduce health inequities,” Montague adds.

Automating Equity

Montague, Loomis and graduate student Amal Almansour also have a COVID-19 research project “to build models and requirements of what should be automated in health care that consider racial inequity first,” Montague says.

“Many models of technology design systems and implementation don’t consider the effects on health care workers, who were experiencing very high levels of burnout before COVID,” she adds.

“The pandemic motivated me to pursue this work sooner rather than later because we need design guidelines to reduce the burden on exhausted workers, while simultaneously increasing quality for marginalized patients,” Montague notes.

After DePaul created its [Contributing to the Understanding of COVID-19 initiative](#), it awarded a grant to Montague and her team to ramp up their research.

Montague concludes, “We’re uniquely positioned, and the grant is a great opportunity.”