

Why Health Equity Will Be Measured in Value-Based Health Care

written by Theresa Hush | January 25, 2021



After the first wave of COVID-19 case numbers and deaths in Spring 2020, it was Mayor Lori Lightfoot of Chicago who broke the story of how the virus was distinctly ravaging Black and brown communities with [higher hospitalizations and deaths](#). In Chicago, alone, Black residents were dying from COVID-19 at six times the rate of other Chicagoans. While the virus has been unsparring across the board, there is a tragic trifecta—people who are older, or of color, with serious underlying conditions, are dying in greater numbers, with a disproportionate percentage of deaths afflicting underrepresented groups.

COVID-19 is not unique in exposing the inequitable consequences of worse risks and insufficient health care among people of color. From rates of maternal death to outcomes in metastatic breast cancer and cardiovascular disease, people of color and women fare badly. But the COVID-19 tragedy has raised consciousness politically of health inequities and is now an articulated priority in the new president's agenda.

Women, especially Black women, have faced an uphill battle on achieving good health care.

Distrust in their reports of symptoms, prejudices about motives and even scientific realities, shortage of research focused on women and women of color, and poor treatment are but a few of the obstacles. One of the most heartbreaking stories recently involves [Dr. Susan Moore](#), a Black doctor who contracted and then died of COVID-19. Despite her medical credentials, her reports of pain were not taken seriously, and she was denied adequate pain medication (a common issue for Black patients, suspected of seeking drugs). When she complained and exerted her medical knowledge, she was ignored on the grounds that she was “intimidating” (a frequent issue for women in positions of strength or knowledge).

Almost two years ago, Roji Health Intelligence published a series of articles based on research on health inequities, which we compiled as an e-book in June 2019. In 2021. We expect to see proposed solutions for addressing these issues coming from the new Biden administration. Value-Based Health Care concepts will expand to incorporate fairness and access in health care, as well as how to measure level of effort. But not everyone sees or feels how differential health care works. To refocus attention on these serious, substantive inequities, we are re-releasing our e-book , “Not Second Best: Inject Value in Women’s Health Care,” to provide essential context for one of the next big directions for health care. [Please click here.](#)

Founded in 2002, Roji Health Intelligence guides health care systems, providers and patients on the path to better health through [Solutions](#) that help providers improve their value and succeed in Risk.

Image: [Eye for Ebony](#)