Abstract

Improving Telehealth Equity in Response to COVID-19 in California: ACTIVATE and Lighthouse

David Lindeman, PhD

Center for Information Technology Research in the Interest of Society and the Banatao Institute, University of California, Berkeley, Berkeley, CA, United States

Corresponding Author:
David Lindeman, PhD
Center for Information Technology Research in the Interest of Society and the Banatao Institute
University of California, Berkeley
2594 Hearst Ave
Berkeley, CA, 94720
United States
Phone: 1 510 666 3677
Email: dlindeman@citris-uc.org

Abstract

Background: In response to the significant stressors on health care delivery created by COVID-19, CITRIS Health and partner organizations developed 2 telehealth solutions through a rapid co-design process: Lighthouse and ACTIVATE. These programs were developed to support providers serving underserved and vulnerable populations who lack the tools and resources to support patients with chronic illness or who are isolated. These challenges were exacerbated by the COVID-19 pandemic, which increased the need for resources to support vulnerable patients who could not come into a clinic in person or were isolated and lacked access to services. ACTIVATE and Lighthouse apply 2 different telehealth strategies to reach vulnerable populations.

Objective: This paper presents lessons learned from the design, development, and implementation of 2 innovative telehealth programs developed to improve health care delivery, access to care, digital literacy, and patient outcomes: ACTIVATE and Lighthouse.

Methods: ACTIVATE is a comprehensive digital health pathway for community health centers that care for those who are medically underserved. ACTIVATE is an innovative, evidence-based, and sustainable telehealth program, designed to benefit vulnerable populations in rural and agricultural communities in the California Central Valley who experience significant health disparities. Lighthouse focuses on connecting older adults in congregate affordable housing, which are settings where residents are particularly vulnerable to isolation, the lack of health care resources, and limited to no access to the internet. Lighthouse provides digital literacy training as well as access to broadband internet with the goal of increasing communication, engagement, and access to health care.

Results: This presentation will discuss successful design and implementation strategies as well as organizational and policy barriers to program operations.

Conclusions: In addition to reviewing program and implementation outcomes, strategies for replication and sustainability will be discussed. Although developed in response to COVID-19, the ultimate success of Lighthouse and ACTIVATE is dependent upon its successful scaling beyond the pandemic.

Conflicts of Interest: None declared.

(iproc 2023;9:e41686) doi: 10.2196/41686

KEYWORDS

telehealth; aging; underserved populations

Edited by B Dinesen; this is a non–peer-reviewed article. Submitted 04.08.22; accepted 19.06.23; published 27.06.23.

Please cite as:
Lindeman D
Improving Telehealth Equity in Response to COVID-19 in California: ACTIVATE and Lighthouse
iproc 2023;9:e41686
URL: https://www.iproc.org/2023/1/e41686
doi: 10.2196/41686
PMID: