

Bridging the Digital Divide:

A Concept Analysis of Digital Health Equity

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Background

Digital health interventions are being used more commonly **by patients**.

Digital health interventions must consider concepts of health equity at all stages:
1.conception 2. development 3. implementation 4. evaluation
according to the MRC. (Skivington et al., 2021)

The fast-paced development of digital health interventions **does not consider the health disparities** among different patients.

With the increased use of digital behavioural interventions, understanding **digital health equity** is imperative for the development of these interventions to address health disparities and benefit all patients.

Objective

Analyze the concept of digital health equity to guide

- theory
- intervention development
- intervention implementation

Methods

Guided by Rodgers' evolutionary method (Rodgers, 1989) for concept analysis, this paper analyzed literature to identify:

attributes
(characteristics used to define a concept)

antecedents
(incidents before the development of a concept)

consequences
(the result of using the concept in practice) of digital health equity

Data analysis:

Focused on the implications of digital health equity on digital intervention development.

Data collection:

All full texts were reviewed, and data extraction included excerpts related to digital health equity's attributes, antecedents, and consequences.

Sample:

Searched through 2 electronic databases (CINAHL and Google Scholar)

Used terms related to “digital health” and “health equity” and included all articles published in English covering this concept



Results 19 papers were identified

the attributes were

- Determining the needs and usage patterns of end-users based on social determinants of health.
- Designing digital health interventions that promote accessibility (e.g., gamification features).
- Shifting healthcare culture towards more acceptance of technology.
- Identifying users' technical proficiency.

the antecedents included

- Having physical and psychosocial barriers to care.
- Having inequitable access to education.
- Experiencing socio-economic and age health disparities.

the consequences identified were

- Reduced burden on the healthcare system.
- Improved quality of life.
- Improved health behaviour outcomes.

Conclusion

Digital health equity is fundamental for ensuring that all individuals have the same opportunity to engage with digital behavioural interventions.

This study can support a cultural shift toward more accessible interventions.

This highlights the need to work collaboratively towards **bridging the digital divide**.