## From the Delaware Academy of Medicine/Delaware Public Health Association

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On behalf of the board and advisory council of the Delaware Academy of Medicine / Delaware Public Health Association (Academy/DPHA), we are pleased to be the lead institution in the public/private partnership named Delaware Health Force, and the author of this report, which includes content from other experts in the field.

The Academy/DPHA started this initiative in early 2019, long before the COVID-19 Pandemic swept around the world and across our State. In the beginning, this effort focused on the State of Delaware's DIMER (Delaware Institute for Medical Education and Research) program and its graduates for the 50th Anniversary Report of the program. As data was collected and analyzed, we realized we were pursing an important vein of data which, if related to other information, could supply policy makers and resource allocation alike.

We are informed by the Social Determinants of Health (see Figure 1), in particular the healthcare access and equity components (often overlooked due to their perceived to be relatively minor role in health outcomes). Many scholarly articles have been written citing healthcare as being responsible for ten to twenty percent of health outcomes, however if an individual or community is medically underserved or has acute shortages of a variety of healthcare facilities, that 10% can become the single largest barrier to care for those who seek or need it.

Figure 1. The Social Determinants of Health<sup>1</sup>

## **Social Determinants of Health**



## Social Determinants of Health Copyright-free



We are also informed by the reality that the healthcare landscape is a complex one, and that simply looking at the physician component of the workforce, or the anchor institutions (hospitals) providing care, is not enough to truly understand the nature of opportunity for workforce enhancement. Today's healthcare is a series of interlocking systems of care, and the better those connections, the stronger the fabric of the safety net of care for our fellow Delawareans.

Several methodologies were considered before we settled on the approach used to generate this report. Some of those methodologies are used to great success by other researchers analyzing specific parts of the healthcare landscape (e.g., voluntary surveys). This report does not replace

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the high value of that research. Instead, it expands upon that research with additional data and analysis. Our methodology is articulated in depth in a later section of this report. For now, we extend sincere thanks to our institutional and individual partners:

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- Delaware Health Information Network, Executive Director, Jan Lee, MD and staff;
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- TechImpact and Delaware Innovation Lab Director of Strategy and Operations, Ryan Harrington, and Director, Research Development & Analytics Data Lab, Héc Maldonado-Reis, and staff;
- Delaware Nurses Association Executive Director, Chris Otto; and
- The team at the Academy/DPHA including Kate Smith, MD, MPH; Matt McNeill, BS; Nicole Sabine, BS; Caroline Harrington, MS, and members of the Board of Directors.

## References

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