Call for Abstracts

TechQuity Volume: Call for Abstracts

IBM, Brigham and Women's Hospital (BWH), and Vanderbilt University Medical Center (VUMC) invite you to submit abstracts for papers to be included in a supplemental issue of the ***Journal of Health Care for the Poor and Underserved (JHCPU)***.

The **deadline for submission of abstracts is midnight Pacific time on August 15, 2020**.

All abstracts should be submitted through REDCap using this link:
https://redcap.vanderbilt.edu/surveys/?s=ED79938LRH

The purpose of the supplemental issue is to describe how technology can transform health and healthcare to promote health equity.

Process: Submitted abstracts will be scored by the sponsoring organizations. Of those received, no more than 50 will result in an invitation to submit completed papers to the Journal. **Invited papers need to be submitted no later than October 1, 2020 for consideration**. We anticipate choosing approximately 20 of the papers submitted for the volume to be accepted.

Criteria: Abstracts will be scored on the following criteria:
- Relevance for underserved populations
- Relevance to the topics suggested by the overview below
- Quality of research
- Implications for techquity research or its application
- New insights for techquity research or its application
- Clarity and completeness of abstract
- Evidence that the authors are knowledgeable about existing scholarship on the topic they address

Overview of issue: The topics we hope to see addressed in submitted abstracts include the following:
- Workforce Diversity
- Data (i.e., diversity in data collection, data integration of diverse data sets, etc.)
- AI Transparency and/or Solutions for addressing bias in AI
- Design and/or Usability considerations for non-majority populations
- Analytics (i.e., equity dashboards, discrimination measures, etc.)
- Structural racism, psychosocial factors, and their impact on health, healthcare delivery, or the healthcare workforce

We invite authors with relevant work to submit abstracts. Achieving health equity through technology requires the use of interdisciplinary methods, stakeholders, data, and policies.

Editorial requirements:
Abstracts must be in English, no more than 250 words long, and sufficiently detailed for the scorers to evaluate the proposed paper in a fully informed way.

The authors should include, in addition to the abstract, a list of no fewer than **five key words or phrases** important for the proposed paper. For more information on the types of papers JHCPU accepts, please click the link below to view the author guidelines.

https://www.press.jhu.edu/journals/journal-health-care-poor-and-underserved/author-guidelines

The authors must also include a **cover letter**, in which they supply the names, degrees, and affiliations of the authors, as well as any information they think it is important for the Guest Editors to know.

Literature Reviews
We strongly encourage authors with suitable expertise to submit Literature Reviews.

The 250-word abstracts submitted for the August 15th deadline proposing Literature Reviews on techquity, describing how technology can transform health and healthcare by leveraging workforce diversity, data, analytics, and/or artificial intelligence (AI) should:
(a) State the particular problem being addressed.

(b) State the intention to review what interventions to address the problem have been evaluated; the nature of those evaluations; and the results of those evaluations; as well as to review what sorts of interventions still must be evaluated – i.e., ones for which the evidence is not firm as to the intervention's effectiveness.

(c) We would like authors of articles for this supplemental issue to examine the topic beyond the 'Digital Divide,' which has been well-researched; rather, we will look for manuscripts written from a systems perspective, identifying ways that factors bear upon techquity and on interventions to address these problems.

In evaluating Literature Reviews (the full papers), the reviewers, editors, and advisory board will look for papers that:

(a) enumerate their search criteria, enumerate the date range considered, and name the databases consulted;

(b) discuss applications to the real world of the research being reviewed; additionally, address how broadly the conclusions might ultimately be generalized (as well as the status of the work in terms of certainty as to causal relationships identified);

(c) are tied to a topic area suggested above and;

(e) are between 2,000 and 10,000 words long.

Not all of this must be covered in abstracts for Literature Reviews, but the abstract should indicate that the fully written paper will meet these criteria.

Commentaries
The 250-word abstracts submitted for the August 15th deadline proposing Commentaries should address a particular topic within the overall area of techquity. The abstracts should provide a good idea of the argument the author will make in the full paper. We will look for emphasis on context in these abstracts as well.

Commentaries (the full papers) should provide an overview of a particular topic within the overall area of techquity, describing how technology can transform health and healthcare by leveraging workforce diversity, data, analytics, and/or AI, with appropriate references to the empirical literature, and then take a position on it. We will look for emphasis on context in these papers as well. Full papers should be 1,000-4,000 words.

Reports from the Field
For this volume, Reports from the Field are descriptive accounts of programs and other interventions, or of new policies in the area of techquity, describing how technology can transform health and healthcare by leveraging workforce diversity, data, analytics, and/or AI. While still adhering to the highest standards for timeliness and accuracy, Reports are not structured as research papers and do not contain statistical analyses. Programs and policies that are notable for their innovation, their success, and their replicability will especially interest us. Full papers should be no longer than 2,000 words.

The 250-word abstracts submitted for the August 15th deadline proposing Reports from the Field should reflect these characteristics and draw attention to the noteworthiness of the program, ability to overcome barriers, or policy being described, in view of what is already well-established. Emphasis on and description of the larger context in which the program or policy is implemented (and why that context is important to consider) is welcome. Why did you do this (what evidence compelled you to design this program or policy)? What exactly did you do? What happened? Would you do anything differently if you had the opportunity to do it again? Do you think this can work in other communities? Why or why not? Statistical analyses are not suitable given the descriptive nature of Reports from the Field, although some descriptive statistics may be included.

Population Parameters
To develop a topic, choosing among (or combining several of) the following population parameters may prove helpful. While the supplement will be organized in terms of race/ethnicity, we also welcome work that — while including information about race/ethnicity — also bear on other characteristics of underserved populations, including sexual orientation [LGBTQIA], mental

health and cognitive development, disability, and others. Work framing identities in terms of intersectionality are welcome, but this approach is not required.

Race/ethnicity
African American (or Black)
Latino (or Hispanic) broken down by subgroups
Non-Hispanic White (or White)
American Indian/Alaska Native, broken down by subgroups
Pacific Islander, broken down by subgroups
Asian Americans, broken down by subgroups
Multi-ethnic perspectives
Age groups
Children (pre-school, school age, or combined)
Adolescents
Adults
Reproductive-aged women (including pregnancy, post-partum, gestational influences, and infancy)
Elderly
Other demographic characteristics
Geographic regions
Urban areas
Rural areas
Groups with low socioeconomic status