

Comments from the Gravity Project Public Collaborative Meeting (March 19th & April 2nd) and Gravity Project Inbox (March 27th & March 31st)

Martina Ahadzi: "Public Health crises tend to show the gaps and inequalities in our society; COVID-19 has been no different. The social needs of our community's most vulnerable populations have been magnified and our focus on addressing them should also be intensified to meet that need. We know populations with a history of food insecurity; housing instability; or lack access to healthcare, will most likely be hit the hardest and experience more long-lasting effects on their health."

This pandemic has also shed light on the need for screening and robust systems to support/ coordinate community social service providers whose resources will be stretched during this time. Such systems not only support community providers but also the vulnerable populations in the state."

L. Johns "See this for use of SDOH data: can pt say home if food and pet food can be delivered?"

<https://www.healthcareitnews.com/news/covid-19-hotspot-physicians-group-deploys-free-triage-and-telehealth-tool>

SDOH data re-housing density, pop density is the background for projecting capability for social distancing. Gov in NY might have resisted for days because he didn't think it could possibly work. Whether it will now TBD.

Those numbers could vary by ethnicity too, cultural norms about keeping apart. No such data now in SDOH data. ;-) Another factor for the parking lot."

Matthew Bishop: "Are any Gravity project members epidemiologists by training who could speak to the specific social determinants related data associated with the transmissibility (R0) of infectious diseases like COVID-19?"

Elizabeth: "<https://www.tableau.com/covid-19-coronavirus-data-resources>"

Jennie Harvell: "1. Summary of telehealth flexibilities that pertain/could pertain to exchange of social service providers and SDOH data

2. Examples of how telehealth is being used to support these types of exchange"