



DTL Symposium

SEWA-DTL-ATL1

“Inadequate Access To Health and Wellness Service in Underserved Communities”

Parent Mentors - Padmaja Kothapalli and Lakshman Tulsiram

Student Mentor - Abhi Singh

Students:

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Why did we pick this topic?/ Background to Need Statements.

- We picked this topic because in underserved communities access to medicine, doctors, medical access, and medical information are crucial and important but often times are limited by other factors.
- Background:
 - Health and wellness insecurities refer to the feelings of uncertainty or doubt that individuals may have regarding their physical or mental health status, as well as their ability to maintain a healthy lifestyle.
 - In Georgia 26% of the population falls under the line when it comes to household income, health and wellness stability, social isolation, job opportunities, and other crippling problems.
 - Our info lead us towards health professionals, doctors, organizations, in order to gain an efficient outlook towards our problem,population,and solutions.

Key Insights

- The CDC has noticed the significant gap in healthcare in urban to rural areas, due to living conditions.
- Rural hospitals also have trouble recruiting nurses and other medical personnel to fill job vacancies. “We’re all competing for the same nurses,” said Jay Carmichael, chief operating officer of Southwell Medical, which operates the hospital in Adel, GA.
- Piedmont Hospital of Atlanta sees a large population of individuals weekly with sickness’ caused by common household problems that they struggle with battling.

Final Need Statements

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- A way to providing nutritious food to patients at Piedmont Hospital of Atlanta with 'Meals by Grace' to measure healthy nutrient levels.
- A way to bring access to psychiatrists and counselors to underserved populations in Denmark Highschool in order to bring down the self harm and suicide rates.
- **A lack of healthcare information in elderly patients at Piedmont Hospital with the objective of having healthy food choices leading to healthy lifestyles measured by the reduction of visits to the hospital by 2%.**

Phase 2 - Brainstorming



Must Have/ Nice to Have Criteria

- Must Have:
 - Be sustainable over a period past this project
 - Something that isn't limited to just DTI members (School Students, parents, etc. can help with)
 - Idea should be affordable and not require extensive amount of help or permission.
- Nice to Have
 - We would like to have collaboration from more than one hospital or organization in the future
 - Our solution shouldn't be something that takes too much time to execute. (Driving many places back n forth, etc.)



Inputs from Stakeholders

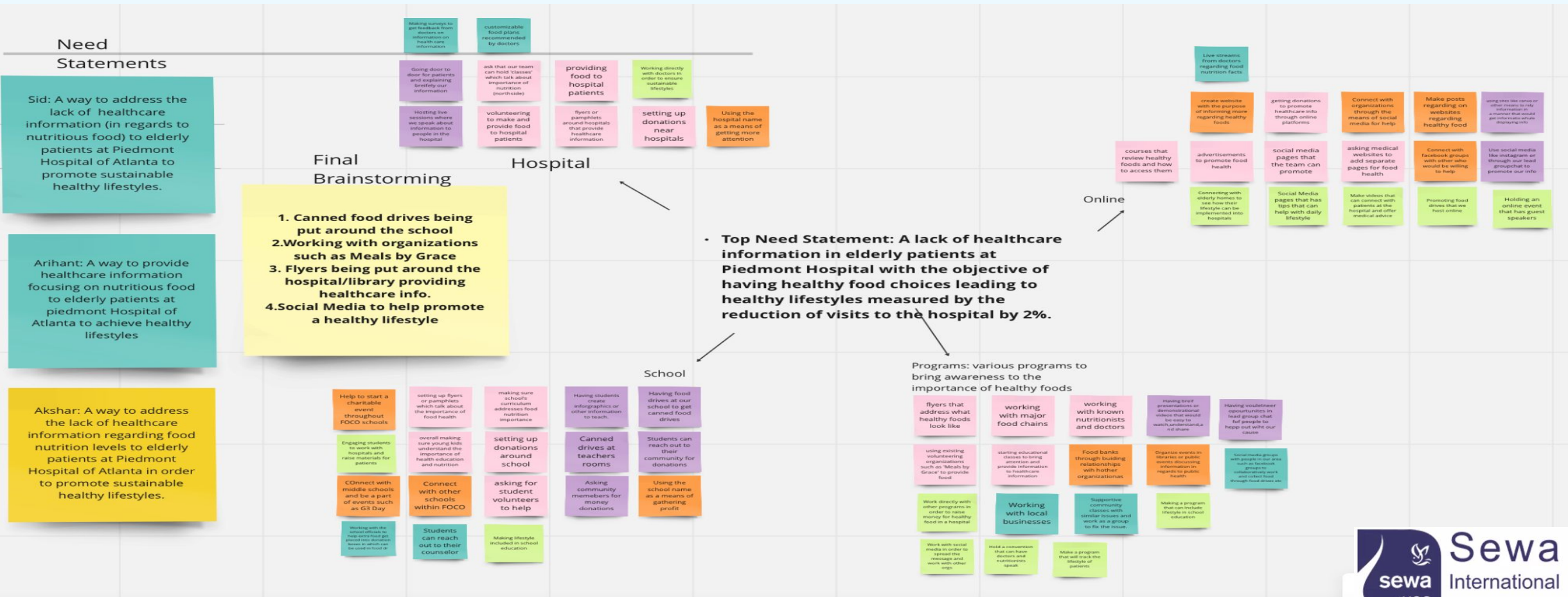
- Is our information fact checked, do we know who its talking about, is the author credible, make sure nobody can point and say “hey this isn't true”.
- Is the medical professional we are talking to applicable to our information, for example a nutritionist will give us different advice compared to a cardiologist.
- Is our solution measurable in a way that both DTL students and target population can measure easily. For example having check ups on nutrition levels is expensive and not something we can do as often but noting how often they go to the doctors office each year is doable.
- How are we approaching the problem in a way to develop the solution.



Miroboard for Phase 2 (Brainstorming)

Topic: Inadequate Access to Health and Wellness Services in Underserved Communities-

Top Need Statement: A lack of healthcare information in elderly patients at Piedmont Hospital with the objective of having healthy food choices leading to healthy lifestyles measured by the reduction of visits to the hospital by 2%.



Appendix

People reached out to - Srikanth Gundavarapu - 704-647-0875, Hansmukh Patel & Hrsikesh Madhav - +1 (678) 469-5958 -, Jyothi Gundavarapu - 980-234-2231, Madhavi Devaraju - 404 583-6607

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