

Through its faculty and graduates, the [Duke University Department of Biomedical Engineering](#) (Duke BME) is a driving force in creating engineering knowledge and novel biomedical technology that improve the human condition through the advancement of clinical care and biomedical science.

Working on DATAcc, I learned from the diverse stakeholders. Developing inclusive devices is not a job for one part of the industry – it requires a collaborative community to gain a common consensus.

— **Md Mobashir Hasan Shandhi, Ph.D.**, Postdoctoral Researcher, BIG IDEAS Lab, Biomedical Engineering, Duke University



The Opportunity

- » Researchers at Duke BME published a [paper](#) on methods for intelligent allocation of diagnostic testing by leveraging data from commercial wearable devices during COVID-19.
- » Upon completing the research, authors [acknowledged](#) that the study population was biased towards white communities compared to Black and Latin communities, as is the case in [much of biomedical research](#).
- » Authors began to strategize how to right size the demographic imbalance in future research. At the same time, Duke BME was working as a member of [DATAcc](#) to develop toolkits that outline the steps necessary to develop and deploy inclusive to digital health measurement products.



The Impact

- » By participating in [DATAcc](#), the Duke BME team could engage with people who bring different perspectives in healthcare - from bench to bedside - and learn how they approach digital health equity.
- » Leveraging experience from DATAcc and prior research, authors from Duke BME and partnering organizations published [Demographic Imbalances Resulting From the Bring-Your-Own-Device Study Design](#), which proposes the Demographic Improvement Guideline to address imbalances.