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ACCESS, EDUCATION AND INFORMATION

TACKLING ISOLATION AND MENTAL HEALTH GAPS

1 in 5 Youth are in mental health services

1 in 4 Face mental health issues yearly

2m on NHS mental health waiting lists

7.5% of adults suffer from mental health issues

KEY THEMES

- Overlapped services and low engagement
- Rising mental health issues
- Digital health inequalities
- Mental health inequalities
- Psychiatric assessment therapy

WHO ARE WE DESIGNING FOR?

- Young people
- People with mental health issues
- People with limited resources
- People with limited access to services

HOW MIGHT WE...?

- use technology to **minimise long wait times** for people seeking help
- use technology to **improve engagement** with mental health services
- use technology to **provide support** for people with mental health issues
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8 DIGITAL HEALTH SOLUTIONS

- PEANUT** SOCIAL ISOLATION
- BOOST** LONG WAIT TIMES
- SHOUT** OVERCROWDED SERVICES
- LUMINA** USE MENTAL HEALTHLINE
- APPLE WATCH** MENTAL HEALTHLINE
- TALKSPACE** MENTAL HEALTH INEQUALITIES
- EVERLUMINA** OVERCROWDED SERVICES
- SOLOACT** USE MENTAL HEALTHLINE

MENTAL AND SOCIAL HEALTH

[illegible]

CARE AT HOME AND INDEPENDENCE

[illegible]

HEALTHSPAN AND LONGEVITY

[illegible]

WOMEN'S HEALTH AND WELLNESS

SHOWING FASTER, FURTHER DISTANCE DETECTION AND MANAGEMENT

1 in 3

Diagnosed in 2 years or less for 30% of service users

1 in 18

Diagnosed in service providers

9.1m

Diagnosed in England by 2040

KEY THEMES:

- Delayed diagnosis
- Health inequalities
- Fragmented and unclear care
- Diagnostic uncertainty
- Diagnostic incontinence
- Lack of resources support post-diagnosis

HOW MIGHT WE...?

- create an *integrated* health service – enabling seamless management of evolving conditions?
- improve *diagnostic* pathways, making those tools more flexible to use?
- re-define *diagnosis* to a *clinical* responsibility, empowering our frontline professionals/ partners to play a *transformative* role?
- build *diagnostic* teams that actively seek out and *validate* conditions with no need to *investigate* a second step?

Who are we designing for?

Primary care

Secondary care

Community

DIAGNOSIS AND DISEASE MANAGEMENT

ACCESS, EDUCATION AND INFORMATION

COMBATTING MISINFORMATION TO EMPOWER USERS WITH TRUSTWORTHY HEALTH GUIDANCE

45%

UK adults don't understand written health information

50%

UK adults struggle to access trusted health information

2/3

UK adults say that independent verification of health info would help increase trust

'Health misinformation is not a new phenomenon, but the internet has fundamentally changed the way we communicate and share information, increasing the rate at which harmful health misinformation spreads.'

Online Health Misinformation in the UK, Full Fact Report

KEY THEMES:

- Accessing digital healthcare when not at home
- 24/7 access to free information
- Low digital & literacy levels
- Spread of misinformation
- Safe recommendations for self-diagnosis

Who are we designing for:

people with low literacy

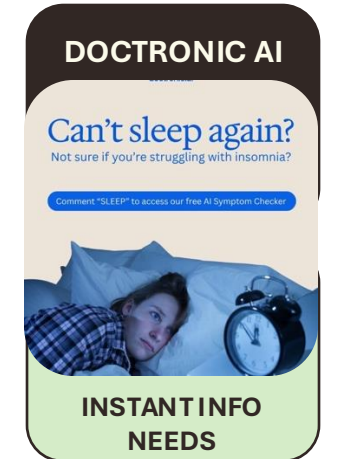
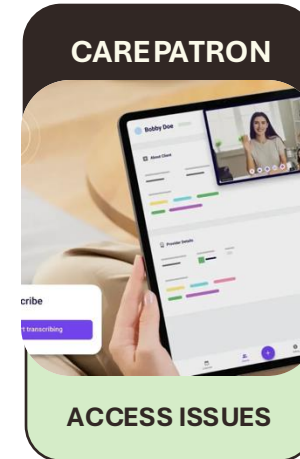
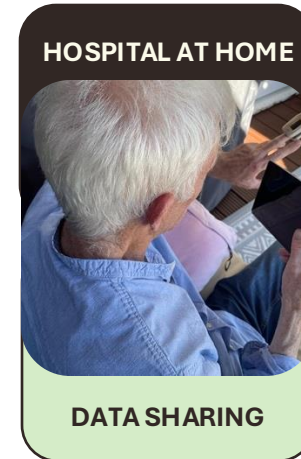
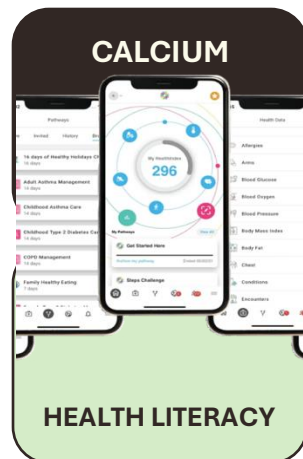
people needing reassurance

AI trusters

those trying to self diagnose

HOW MIGHT WE...

- ...ensure that information being shared digitally is **accurate and from verified sources**?
- ...use tech to improve **health literacy**?
- ...enable easier access to healthcare when people **can't attend in-person**?
- ...increase the **accuracy of AI** when it comes to health information?
- ...understand how people **self-diagnose** and help them do this **more safely**?
- ...provide **up-to-date information** on complex health issues **for free, quickly**?



MENTAL AND SOCIAL HEALTH

TACKLING ISOLATION AND MENTAL HEALTH GAPS

1 in 5

Youth are at mental health risk

1 in 4

Face mental health problems yearly

2m

On NHS mental health waiting lists

7.5%

Adults feeling lonely “always or often”

‘81% of global consumers say they're more focused on mental health than five years ago.’

McKinsey (2024)

KEY THEMES:

- Fragmented systems
- Overstretched services and long waiting times
- Rising mental health needs
- Social isolation and loneliness
- Mental health inequalities – Diversity & inclusion
- Psychedelic-assisted therapy

Who are we designing for:

children/youth

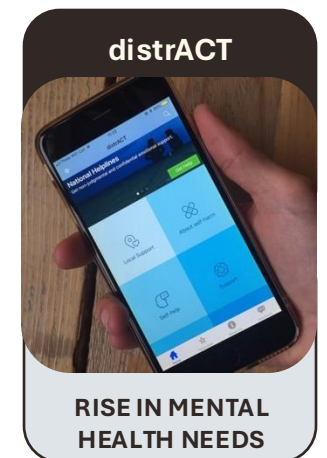
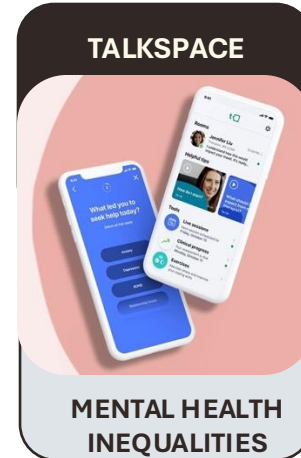
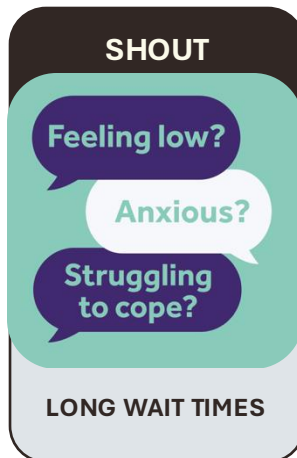
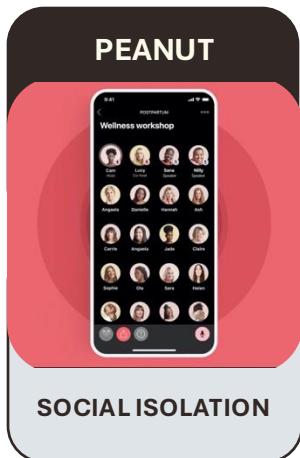
professionals

isolated individuals

marginalised communities

HOW MIGHT WE...

- ...use technology to **reimagine how people access mental health support** when systems are overwhelmed?
- ...create **personalised support** that evolves with an individual’s mental health journey when **traditional care can’t keep up** with growing demand?
- ...design interventions to **help people seek support** in environments when **mental health is not widely accepted**?
- ...use technology to rebuild **social bonds** for people who feel **disconnected**?



CARE AT HOME AND INDEPENDENCE

INTEGRATING HEALTH AND SOCIAL SYSTEMS

£162bn

Value of unpaid care

400k people

Awaiting assessment to start being cared for

75%

Homecare workers don't receive proper compensation

'If you're caring for someone, you're more likely to be in poor health. 43% of carers have had a mental/ physical health condition develop/ become worse since taking on these responsibilities.'

Emily Holzhause CBE, Director of Policy and Public Affairs

KEY THEMES:

- Preventative + proactive care
- Early detection
- Networks and communities
- Accessibility: mobility and affordability
- Combatting social isolation
- Improving digital literacy
- Adoption of digital tools
- Alleviating NHS pressure

Who are we designing for:

patients

part time carer - family member

carer – professional

full time carer – family member

HOW MIGHT WE...

- ...use tech to help people live at home **confidently, comfortably** and **independently**?
- ...better support **unpaid carers** with **work-life balance, mental health** and **financial support**?
- ...create new tools/platforms to make it easier to address **evolving needs** for **patients** and **carers**?
- ...leverage community networks to **reduce loneliness**?
- ...increase **adoption** and **trust** of **home care tech**?
- ...create **integrated systems**?
- ...innovate digital services to **connect families, formal carers** for **personalised home support**, etc.

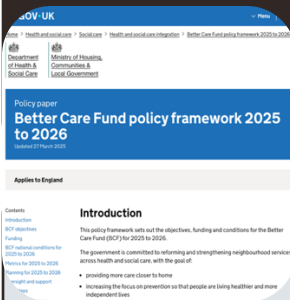
BIRDIE

Back to blog
Birdie have just raised \$30 million in Series B
June 29, 2022

Care Industry news The Birdie nest

DISJOINTED SYSTEMS

GOV.UK



REACTIVE CARE

BT X CARER UK



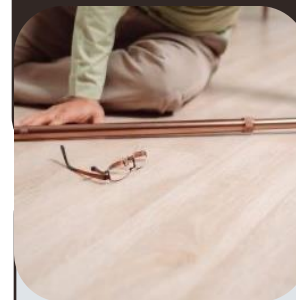
INVISIBLE CARER

SPORT ENGLAND



UNSUPPORTED CARER

NOBI



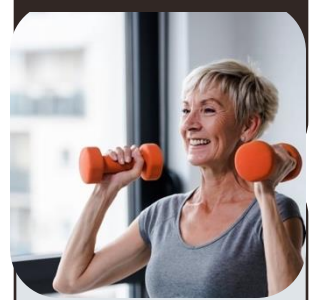
MOBILITY

HONOR



HOMECARE FUNDING

BOLD



REACTIVE VS. PROACTIVE

HEALTHSPAN AND LONGEVITY

WE MAY BE LIVING FOR LONGER, BUT WE ARE LIVING MORE YEARS IN WORSE HEALTH

20 years

Spent in poor health at the end of life, in the UK

1.8 years

Healthy life expectancy at birth has dropped

18-year gap

In healthy life expectancy across regions in the UK

'Currently, too many people spend a significant proportion of their later life in poor health or managing a disability which could have been prevented.'

UK Gov, Consensus on Health Ageing (2023)

KEY THEMES:

- Proactive prevention and early interventions
- Social determinants of health and health inequalities
- Smart aging and digital diagnostics / therapeutics
- Biohacking and biomarking
- Social isolation

Who are we designing for:

older adults (65+)

care givers

the health conscious

local communities

HOW MIGHT WE...

- ...use **predictive, personalised technology**, that is accessible and digestible to users, to empower individuals to understand their health?
- ...create **personalised, risk stratified, health plans** that adapt in real time to lifestyle, environment, and biology?
- ...design **frictionless health tech** that works for people with limited digital literacy or trust in tech?
- ...use **AI companions** to coach and support people in their health and wellbeing journey over their lifetime, as **needs and goals evolve**?
- ...build **localised, accurate data** that can be used to understand gaps in longevity across regions/demographics?

BIOHACKING



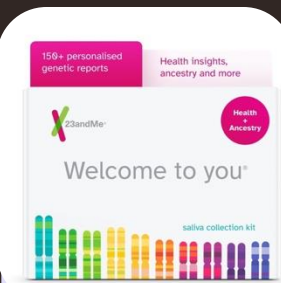
AGEING

GENOMICS



GENETIC HEALTH

23 AND ME



PREDICTION

HOLLY HEALTH



DIGITAL ACCES

WITHINGS



HOLISTIC HEALTH

WHOOOP



AGEING

CLP



LONGEVITY FUND

WOMEN'S HEALTH & WELLNESS

CLOSING THE WOMEN'S HEALTH GAP

£11bn

Menstrual-related absences

14m days

Menopause-lost productivity

£3.7bn

Severe period pain - costs the UK in absenteeism

1%

Healthcare investment to female specific conditions

KEY THEMES:

- Data/ knowledge gap
- Menstrual cycle + phases
- Fertility journey/ IVF
- Menopause/ perimenopause
- Contraception
- Hormone health
- Data privacy and trust
- Bone density and longevity

HOW MIGHT WE...

- ...use tech to improve health outcomes for women with **limited digital access**?
- ...**overcome stigma** around women's health related issues, e.g. endometriosis, PCOS, menopause, PMS, to design female first products/ services?
- ...increase access to **trusted**, vetted health information for women worldwide?
- ...connect women to others to **share lived experiences**, stories and advice?
- ...manage **data privacy** and **security** around period tracking/ fertility apps?

Who are we designing for:

pre puberty girl

peri/menopausal woman

menstruating woman

pregnancy/ mother

'For too long, women have suffered from health conditions that are misunderstood, misdiagnosed, or ignored.'

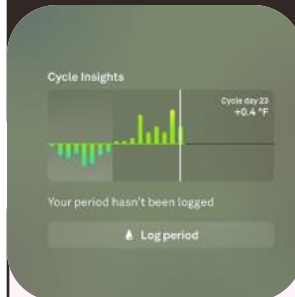
Dr. Anita Zaidi, president of the Gates Foundation's Gender Equality Division.

HERTILITY



FERTILITY INSIGHTS

OURA RING



DATA GAPS

ULTRAHUMAN



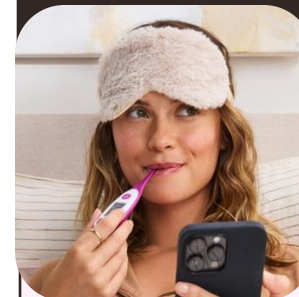
TRAINING INSIGHTS

EIGHT SLEEP



HOT FLUSH

NATURAL CYCLES



KNOWLEDGE GAP

NUMAN



LACK OF FUNDING

GIRL DINNER



DIET CULTURE

DIAGNOSIS AND DISEASE MANAGEMENT

EMPOWERING FASTER, FAIRER DISEASE DETECTION AND MANAGEMENT

1 in 3

Experience a 5 year wait time for a rare diagnosis

30%

With type 2 diabetes are undiagnosed

1 in 18

Misdiagnosis in serious conditions

9.1m

Major illnesses in England by 2040

‘Early and accurate diagnosis can make an enormous difference, but often, diagnosis is late, and the treatments needed are consequently more aggressive, more costly and have poorer outcomes.’

AXREM briefing on early diagnosis

KEY THEMES:

- Delayed diagnosis
- Health inequalities and socioeconomic status
- Fragmented and reactive care
- Workforce / capacity challenges
- Diagnostic innovation
- Lack of personalised support post-diagnosis

Who are we designing for:

patients

caregivers

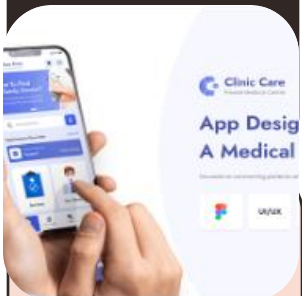
healthcare professionals

healthcare providers

HOW MIGHT WE...

- ...create an **intelligent health record** – enabling seamless management of evolving conditions?
- ...unlock the **full potential of emerging diagnostic technologies**, making these tools more familiar to healthcare professionals?
- ...**re-imagine diagnosis as a shared responsibility**, empowering non-clinical professionals/ patients to play a more proactive role?
- ...build diagnostic tools that actively seek out and **serve communities who are least likely to access care?**

CARE CLINIC APP



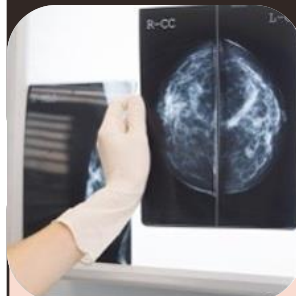
POST DIAGNOSIS
SUPPORT

NHS: HARP



HEALTH INEQUALITY

GOOGLE HEALTH AI



DIAGNOSTIC
INNOVATION

SMART TOILETS



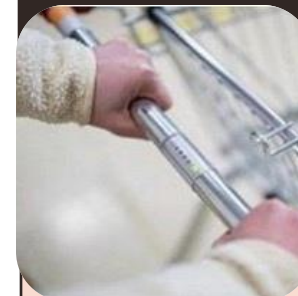
DELAYED
DIAGNOSIS

BIRDIE APP



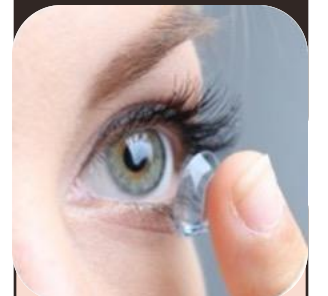
FRAGMENTED CARE

ECG SHOPPING TROLLEYS



DIAGNOSTIC
INNOVATION

SMART CONTACT LENSES



GLUCOSE
MONITORING