The Disparities in Headache Advisory Council (DiHAC) was born from the need to address the inequities and systemic racism of the American healthcare system. DiHAC is a cross-functional group of patient advocacy organization leaders, headache patients, and healthcare providers tasked with identifying and supporting solutions to end racial health disparities in headache medicine.

DiHAC created an issue brief, Disparities in Headache, to highlight the topic of health disparities and patient care, and to focus on the path forward giving all people living with headache diseases, regardless of their racial or socioeconomic status, equitable access to patient care.
APPROACH

Earned/Owned/Paid Media Campaign
Our team took a multi-dimensional approach to this visibility campaign, which included:

- Crafting media materials about DiHAC and the Disparities in Headache issue brief
- Identifying experts to serve as media spokespersons (headache specialists and patients) and providing media trainings
- Disseminating the press release nationwide and conducting targeted and customized media pitches
- Creating a robust social media campaign to complement the earned media outreach
- Securing media opportunities and sharing news clips online and via social media
EXAMPLES OF RESULTS ACHIEVED:

A feature public radio segment on WYPR’s On The Record entitled “Migraine Disease Goes Beyond Headache Pain” with Dr. Courtney White and patient advocate Jaime Sanders. Read and listen here:
EXAMPLES OF RESULTS ACHIEVED:

FOX TV - KRI

Televised feature about Disparities in Healthcare on FOX TV – KRIV Houston’s The Isiah Factor with guests Dr. Courtney White and patient advocate LaQuinda McCoy discussing the challenges in disparities in healthcare. Watch here:
EXAMPLES OF RESULTS ACHIEVED:

WEBMD ARTICLE

WebMD online article, Diagnosis and Treatment of Migraine in People of Color, with references to the Disparities in Headache issue brief.

“People of color and other underserved groups face even bigger hurdles in getting proper migraine care. Right now, there’s a lack of research into the reasons behind these disparities. But it’s a growing area of study within the scientific community.”
Although estimated rates of migraine in BIPOC communities are similar to rates among white people, people of color are less likely to be diagnosed with and treated for migraine. This may be due to issues including lack of access to quality care, migraine stigma, healthcare disparities, and misconceptions about migraine in people of color.
EXAMPLES OF RESULTS ACHIEVED:

WUSA9 (CBS DC)

For Migraine and Headache Awareness Month (MHAM), CBS Washington, DC affiliate WUSA9 speaks to patient advocate Jaime Sanders about disease stigma and the added barriers for BIPOC individuals. The National Headache Foundation's Executive Director, Tom Dabertin (a CHAMP participant) is also interviewed for this feature.

"Migraine attacks are often experienced more by women than men, which could contribute to some people's dismissal of the intense symptoms. It can also be hard to get taken seriously in environments as a person of color, or another marginalized group member."
SOCIAL MEDIA RESULTS:

- Social media posts linking to the Disparities in Headache Issue Brief appeared across all CHAMP platforms reaching thousands of individuals. These posts were also shared by our member organizations, resulting in a reach of over 10,000. Additionally, social media content was strategically boosted, via paid ads, to reach targeted demographics.

- Each media placement was shared via social media, strengthening the understanding of the topic of disparities in headache medicine and connecting with a wide and diverse audience.

Coalition for Headache and Migraine Patients
October 15, 2021

Systemic racism continues to exist, and has shed a spotlight on the racial and health disparities in headache diagnosis and patient care. We are pleased to release the Disparities in Headache Advisory Council (DHAC) Issue Brief “Disparities in Headache.” It focuses on the overall issue of disparities in headache medicine for all marginalized groups, highlights the strides made by the DHAC, and sets the stage for future work. As a community dedicated to ending inequalities and inequities that result in poorer health outcomes, we can make strides and improve healthcare.