

Executive summary

In a world where digitalization facilitates our everyday life, there are still groups of people that lack digital literacy and accordingly digital health literacy. The iHERE project aims to bring vulnerable groups closer to a more comfortable and sustainable reality by focusing on their health issues, understanding their needs and developing strategies to implement digital health literacy to their lives.

The European Union is often perceived as a group of wealthy countries where inclusive social systems provide protection and health care is easily accessible to everyone. Because of this perception, there are several gaps in social health protection coverage and barriers that build inequities in access to health services experienced by vulnerable groups. Therefore, meeting the needs of vulnerable groups is essential at an EU level. The iHERE project will focus on the following vulnerable groups among the consortium countries and at the EU level as well: migrants/refugees, older adults, and people from low socioeconomic groups or living in poverty/risk of exclusion.

Vulnerable groups are facing a variety of health issues, both common but also different among groups. The iHERE IO1 collected essential data about both the whole entity of the EU and for each consortium country as well. At an EU level, the health status of vulnerable groups is worse compared to the one of the general population, reflecting the situation in each consortium country. Health issues commonly reported by vulnerable groups are among others psychosocial disorders, nutrition disorders, injuries, non-communicable diseases (NCDs) and dental problems. The continuous establishment of these health issues is related to multiple barriers vulnerable groups are not able to confront by themselves. The iHERE IO1 localized these barriers to exploit their use for understanding the needs of the vulnerable groups. Practical issues like language barrier, cost of medical care, disabilities are coming to add a further limitation to health topics unawareness, healthcare delivery legal framework ineffectiveness, health promotion and disease prevention issues and health illiteracy.

Digital health literacy is an asset that could empower these vulnerable groups. To achieve the development of strategies to increase digital health literacy, iHERE IO1 collected data about the risk of digital exclusion of the vulnerable groups, their digital literacy and use of digital technology status. Interestingly, all vulnerable groups seem to be willing to understand, learn and use digital technology because they feel it will make their lives less hard. Their willingness can be used as the driving force to support the implementation of digital health interventions.

Nevertheless, it would be meaningless to discuss, if it was not for the front line of the healthcare system, the healthcare professionals, and other educators to contribute to this effort. The implementation of digital health interventions should be based on two important factors, besides the willingness of vulnerable groups to support this approach. These factors are the technology acceptance from the side of healthcare professionals and educators and their ability to implement, evaluate and operate these technologies for the best possible outcome. Among each of the consortium countries, there are some interventions to achieve this goal, corresponding to both the vulnerable groups and healthcare professionals and educators. But still, we see they are not enough to ameliorate the status quo of digital health

use. To do so, iHERE IO1 created a toolbox with the best practice tools that have already been used to detect digital health illiteracy and to build digital health interventions to vulnerable groups. This toolbox will be profitable for iHERE project to further use it to develop new, customized, more effective and more complete strategies to estimate digital health illiteracy levels and develop relevant training sessions for both sides; healthcare professionals/educators and each vulnerable groups with respect to their background.

Collectively, the iHERE IO1 will pave the way for the iHERE project engagement to the main goal; understand the needs and estimate digital health literacy of vulnerable groups, detect the insufficiencies of the healthcare system, trigger the interest of healthcare professionals/educators around digital health and develop strategies for a widely accessible digital health system for each consortium country.