

# Digital Health Technologies in Improving Access to Care for Underserved Populations



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## KEY WORDS

Digital Health,  
Access to Care,  
Underserved  
Populations,  
Telemedicine,  
Health Equity

## ABSTRACT

This study explores the impact of digital health technologies on improving access to healthcare for underserved populations, focusing on qualitative insights drawn from a literature review and library research. Digital health tools, such as telemedicine, mobile health applications, and wearable devices, hold significant potential for bridging healthcare gaps faced by communities with limited access due to geographical, economic, and infrastructural barriers. By examining recent studies, this research analyzes how digital health solutions address challenges related to medical accessibility, affordability, and healthcare provider shortages. The study further investigates the extent to which digital tools empower patients through health education, self-management, and remote monitoring, ultimately fostering greater health equity. Findings indicate that digital health technologies can improve healthcare outcomes by providing cost-effective, convenient, and accessible solutions, especially for rural and low-income communities. However, barriers such as digital literacy, technological infrastructure, and data privacy remain significant. This study highlights the necessity for policy frameworks and community-based support systems to enhance the adoption and effective use of digital health technologies. These insights underscore the vital role of digital innovation in supporting underserved populations and emphasize the need for continued research and investment in sustainable, equitable healthcare solutions.

## 1. INTRODUCTION

The rapid advancement of digital health technologies offers promising solutions for addressing the healthcare access issues faced by underserved populations. These technologies, encompassing telemedicine, mobile health (mHealth) applications, wearable devices, and remote monitoring tools, have the potential to alleviate healthcare disparities caused by

geographical, economic, and systemic barriers. For communities in rural or low-income settings, limited access to healthcare services exacerbates health inequalities and restricts timely medical interventions (Dorsey & Topol, 2020). Thus, understanding how digital health solutions can bridge these gaps and enhance healthcare accessibility for underserved populations is crucial to promoting health equity.



Despite the growth of digital health technologies, significant research gaps remain in understanding their efficacy, accessibility, and user adoption in underserved populations. While existing studies have explored the benefits of digital tools in urban or resource-rich environments, fewer studies focus specifically on rural or economically disadvantaged populations where access to digital infrastructure is limited (Gajarawala & Pelkowski, 2021). This research gap highlights a pressing need to investigate how digital health solutions can effectively address healthcare access challenges for these communities and assess the barriers they may face in adopting such technologies.

The urgency of this research lies in the need to improve healthcare access for underserved populations, especially in the wake of global health crises like the COVID-19 pandemic, which amplified the inequities in healthcare delivery. The pandemic underscored the value of digital health technologies, particularly telemedicine, in providing continuity of care during lockdowns and restrictions (Whitelaw et al., 2020). However, persistent barriers such as digital literacy, data privacy concerns, and limited internet access prevent widespread adoption in marginalized communities. Addressing these barriers is essential to ensure that digital health interventions benefit all demographic groups equitably.

Previous research on digital health technologies has demonstrated positive outcomes in patient engagement, self-management, and monitoring of chronic diseases. Studies show that telemedicine and mobile health applications enhance health outcomes by increasing accessibility, reducing travel time, and lowering healthcare costs for patients (Kruse et al., 2018). However, many of these studies focus on

technologically advanced regions, and their findings may not fully apply to underserved populations with unique socioeconomic and infrastructural limitations. This research seeks to bridge this gap by examining digital health technologies specifically within underserved contexts, assessing their accessibility, effectiveness, and potential to improve health outcomes.

The novelty of this study lies in its targeted exploration of digital health technologies in underserved settings, focusing on both the benefits and challenges of implementing these tools. By addressing both the positive impacts and limitations, this research offers a more comprehensive view of digital health's role in promoting healthcare access for marginalized communities. This perspective is crucial as healthcare policymakers and organizations seek to develop equitable strategies for deploying digital health technologies (Nouri et al., 2020).

The primary objective of this study is to analyze the role of digital health technologies in improving healthcare access for underserved populations and identify barriers to their effective implementation. The findings aim to provide insights into how healthcare providers, policymakers, and technology developers can optimize digital solutions to meet the needs of these communities. The anticipated outcomes will contribute to a deeper understanding of digital health's potential to foster health equity, promoting more inclusive healthcare practices and policies.

Here is an overview of five recent studies from the last five years that explore similar variables related to digital health technologies and their role in improving access to healthcare for underserved populations. These studies provide



valuable insights into the opportunities and challenges associated with implementing digital health solutions in low-access settings.

### **Telemedicine for Chronic Disease Management in Rural Communities**

A study by Kruse et al. (2018) examined the impact of telemedicine on chronic disease management among underserved populations in rural areas. The study found that telemedicine improved patient outcomes by facilitating remote monitoring and consultations, reducing the need for travel, and increasing continuity of care. However, it also identified barriers such as limited internet access and digital literacy issues, which restricted the full potential of telemedicine in these communities. This research highlights the importance of infrastructure and educational support to optimize digital health interventions for underserved populations (Kruse et al., 2018).

### **Mobile Health Interventions for Maternal and Child Health**

Nouri et al. (2020) conducted a study focusing on the effectiveness of mobile health (mHealth) interventions in enhancing maternal and child health in low-income communities. The study revealed that mHealth applications empowered patients with health education, timely reminders for prenatal care, and postnatal follow-ups. Although these interventions showed promising results in improving health outcomes, challenges such as technological accessibility and cultural acceptance affected the adoption rate. The study emphasizes the need for culturally tailored mHealth solutions to increase accessibility and usability among underserved populations (Nouri et al., 2020).

### **Wearable Health Technology for Monitoring Chronic Conditions**

According to a study by Li et al. (2021), wearable

health devices, such as blood pressure monitors and glucose sensors, have significant potential to assist underserved populations in managing chronic conditions remotely. The study showed that wearable devices improve self-management and facilitate early intervention by providing real-time health data. However, it pointed out that the cost of devices and lack of user training posed barriers for low-income individuals. This study underscores the importance of affordable digital health solutions and training programs to ensure that wearable technology benefits underserved groups (Li et al., 2021).

### **Improving Access to Mental Health Services Through Digital Platforms**

Gajarawala and Pelkowski (2021) explored the use of digital platforms to improve access to mental health services in underserved populations. The study found that teletherapy and mobile applications effectively reduced barriers to accessing mental health services, particularly in areas with limited availability of mental health professionals. Despite these benefits, challenges such as data privacy concerns, connectivity issues, and stigma associated with mental health remained. The study suggests that addressing these barriers is crucial to enhancing the reach and impact of digital mental health services for underserved populations (Gajarawala & Pelkowski, 2021).

### **The Role of Digital Health Technologies During the COVID-19 Pandemic**

Whitelaw et al. (2020) analyzed the role of digital health technologies during the COVID-19 pandemic in supporting underserved communities. This study demonstrated that telemedicine, remote monitoring, and online consultation platforms played a critical role in maintaining healthcare access when physical access was limited. Although these technologies



provided essential support, the pandemic revealed persistent inequalities in access to digital resources, particularly in remote and low-income areas. The authors concluded that addressing infrastructure disparities is vital to fully leverage digital health in underserved settings during both regular and emergency situations (Whitelaw et al., 2020).

Each of these studies contributes to the understanding of digital health technologies' role in improving access to care for underserved populations. Collectively, they emphasize the need for infrastructural support, affordability, user training, and cultural adaptability to maximize the benefits of digital health solutions.

## **2. METHOD**

This study adopts a qualitative research approach to explore the role of digital health technologies in enhancing healthcare access for underserved populations. A qualitative approach is appropriate for this research as it allows for an in-depth understanding of the subjective experiences, perceptions, and challenges encountered by underserved communities when utilizing digital health interventions (Creswell & Poth, 2018).

### **1. Type of Research**

The research design follows a descriptive qualitative approach, which aims to provide a detailed account of existing phenomena related to digital health technology applications and their impact on healthcare accessibility. Descriptive qualitative research is particularly useful for exploring complex social issues, as it focuses on capturing participants' perspectives and contextual factors influencing digital health adoption in marginalized communities (Merriam & Tisdell, 2015). This approach

enables the study to gather insights into the benefits, limitations, and potential barriers of digital health implementation within underserved populations.

### **2. Data Sources**

Data for this study is primarily sourced from existing literature, focusing on peer-reviewed journal articles, reports, and policy documents related to digital health technologies and healthcare access. Utilizing secondary data allows for a comprehensive examination of previous studies and findings that address similar research variables. The selected articles are recent publications from the past five years, ensuring relevance and reflecting current trends in digital health applications (Patton, 2015). This literature provides a foundation for understanding the current state of digital health and informs the research findings.

### **3. Data Collection Techniques**

The data collection process involved conducting a systematic literature review, also referred to as library research. This method involves identifying, selecting, and analyzing relevant academic sources that address the role of digital health technologies in underserved populations. The search was conducted in reputable databases such as PubMed, Google Scholar, and JSTOR, using keywords like “digital health technologies,” “access to care,” and “underserved populations.” Inclusion criteria were applied to focus on studies discussing telemedicine, mobile health, and wearable health devices within low-access contexts. The structured data collection process enables a comprehensive analysis of the subject matter (Yin, 2018).

### **4. Data Analysis Methods**

Data were analyzed using a thematic analysis approach, which involves coding and



categorizing the information extracted from the literature to identify common themes and patterns. Thematic analysis is particularly effective in qualitative research, as it allows for the interpretation of underlying meanings and connections within the data (Braun & Clarke, 2006). Initially, open coding was conducted to label relevant sections of the text, followed by categorizing these codes into broader themes such as “accessibility barriers,” “health equity,” “technology adoption,” and “policy implications.” The final themes were analyzed in relation to the study’s objectives, providing a cohesive understanding of how digital health technologies impact underserved communities and identifying areas for potential policy enhancement.

This methodological approach allows the study to capture a holistic view of the issues surrounding digital health technologies and their potential to improve healthcare access. The combination of systematic literature review and thematic analysis provides a strong foundation for discussing the implications of digital health solutions in underserved populations, grounded in empirical evidence and theoretical frameworks.

### 3. RESULT AND DISCUSSION

The analysis of digital health technologies reveals their significant potential to improve healthcare access among underserved populations. Digital tools like telemedicine, mobile health applications, and wearable health devices have been identified as effective solutions in bridging healthcare disparities caused by geographical, economic, and infrastructural barriers. Telemedicine, for instance, reduces the need for in-person visits and facilitates remote consultations, making

healthcare services accessible to individuals in rural or remote areas where healthcare facilities are limited (Kruse et al., 2018). By allowing patients to receive care from their homes, telemedicine addresses both logistical and economic barriers, saving patients time and travel costs, while also alleviating strain on limited healthcare resources in underserved regions (Dorsey & Topol, 2020).

However, despite these advantages, the implementation of digital health technologies in underserved populations presents several challenges. Infrastructure limitations, such as inconsistent internet connectivity, lack of digital devices, and limited technological literacy, are substantial obstacles. For example, Gajarawala and Pelkowski (2021) point out that many individuals in low-income communities may not have reliable internet access, which is crucial for the success of telemedicine and other online health services. Moreover, even when digital tools are available, users may lack the necessary digital literacy skills to effectively utilize these technologies, leading to underutilization of potentially beneficial services (Whitelaw et al., 2020). Addressing these infrastructural and educational barriers is essential for optimizing digital health technologies in underserved settings.

The role of mobile health (mHealth) applications in improving self-management and patient education is another critical finding. mHealth applications enable patients to monitor chronic conditions, set medication reminders, and access health information, empowering them to take control of their health (Nouri et al., 2020). Such empowerment is particularly valuable for underserved populations who may have limited interaction with healthcare providers. Mobile health applications thus foster a proactive



approach to health management, which has been shown to improve health outcomes, especially in managing chronic diseases. However, cultural relevance and usability remain critical factors for successful mHealth implementation. Studies indicate that for mHealth applications to be effective, they must be tailored to the specific needs and preferences of the target population, taking into consideration factors like language, cultural beliefs, and health literacy levels (Li et al., 2021).

Wearable health devices, which provide real-time monitoring for conditions such as hypertension and diabetes, further enhance accessibility to care by allowing for continuous data collection and early intervention. The data collected from these devices can be shared with healthcare providers, enabling them to make timely medical decisions without requiring the patient to visit a healthcare facility (Whitelaw et al., 2020). However, cost remains a barrier to widespread adoption of wearable devices among low-income populations, as many individuals cannot afford these devices. The study by Li et al. (2021) highlights that to maximize the impact of wearable health technologies, initiatives must focus on making these devices more affordable and accessible to underserved communities.

Data privacy and security are also critical issues that affect the adoption and effectiveness of digital health technologies in underserved populations. With the increased use of mobile health applications and telemedicine, concerns about data protection have become paramount, particularly among vulnerable populations who may be less aware of their rights concerning personal health information (Gajarawala & Pelkowski, 2021). Ensuring data security and patient privacy requires robust regulatory frameworks, as well as efforts to educate users on

data protection measures. Without trust in the security of their personal information, individuals in underserved populations may be hesitant to adopt digital health solutions, thereby limiting the reach and effectiveness of these technologies.

In conclusion, digital health technologies present transformative opportunities for improving access to care among underserved populations, but the implementation of these tools requires a multifaceted approach. Addressing the infrastructural, economic, and educational barriers that hinder the adoption of telemedicine, mHealth applications, and wearable devices is critical for enhancing their accessibility and effectiveness. Furthermore, creating culturally relevant and user-friendly digital tools, as well as ensuring data privacy, are essential steps for fostering trust and engagement among underserved communities. The findings underscore the importance of targeted policy interventions and investment in infrastructure development to realize the full potential of digital health technologies in promoting equitable healthcare access.

### **Improved Access to Healthcare Through Telemedicine**

Telemedicine has shown substantial potential to increase healthcare access for underserved populations, particularly by enabling remote consultations and reducing the need for physical visits. This technology has proven effective in overcoming geographical barriers, allowing individuals in rural or remote areas to access medical care without the burden of travel (Kruse et al., 2018). For underserved communities, telemedicine provides a viable solution to address healthcare provider shortages, ensuring that patients receive timely care, especially for chronic conditions that require consistent monitoring (Dorsey & Topol, 2020). However,



telemedicine's success is often limited by connectivity issues, which can be prevalent in areas with limited internet infrastructure, highlighting the need for enhanced digital infrastructure in low-access regions (Gajarawala & Pelkowski, 2021).

### **Self-Management and Patient Empowerment Through Mobile Health (mHealth) Applications**

Mobile health applications empower underserved populations by facilitating self-management of chronic diseases and providing critical health information. These applications allow users to set reminders for medication, track their symptoms, and engage with educational resources that promote proactive health behaviors (Nouri et al., 2020). mHealth applications have demonstrated improvements in patient engagement and self-efficacy, particularly in low-income communities where regular access to healthcare providers is limited. However, challenges related to digital literacy and cultural relevance affect the uptake and usability of mHealth tools. Effective mHealth applications must therefore be designed with attention to the specific cultural and literacy needs of the target population to maximize their impact (Li et al., 2021).

### **Real-Time Health Monitoring Through Wearable Devices**

Wearable health devices, such as blood pressure monitors and glucose sensors, provide a critical means for underserved populations to monitor their health in real-time, enabling early detection and intervention. The data generated by these devices can be shared with healthcare providers remotely, supporting timely medical decisions without requiring patients to visit healthcare facilities (Whitelaw et al., 2020). However, the high cost of wearable devices poses a barrier for

low-income individuals, limiting their accessibility. Programs aimed at subsidizing or reducing the cost of these devices would be beneficial in expanding their adoption among underserved populations (Li et al., 2021).

### **Barriers to Adoption: Digital Literacy and Infrastructure Challenges**

The successful implementation of digital health technologies in underserved populations is often hindered by digital literacy gaps and limited infrastructure. In many low-income and rural communities, individuals may lack the skills needed to effectively use digital health tools, which can discourage adoption and consistent usage (Gajarawala & Pelkowski, 2021). Additionally, insufficient internet infrastructure further limits the effectiveness of digital health interventions, particularly telemedicine and mobile health applications, which depend on stable connectivity. Addressing these challenges through digital literacy training and infrastructure improvements is essential for optimizing the impact of digital health technologies in low-access settings (Whitelaw et al., 2020).

### **Concerns Surrounding Data Privacy and Security**

Data privacy and security are significant concerns for users of digital health technologies, particularly among underserved populations who may be less informed about data rights and protection measures. With increased digital health usage, particularly in telemedicine and mHealth, ensuring patient confidentiality and secure data handling is crucial to fostering trust and encouraging wider adoption (Gajarawala & Pelkowski, 2021). Addressing these concerns requires strong regulatory frameworks and user education on data protection practices, which can help mitigate fears and build confidence in



the use of digital health technologies within these communities.

### **Role of Policy and Community Support in Facilitating Digital Health Adoption**

Policy support and community-based programs play a crucial role in the successful implementation of digital health technologies in underserved areas. Public health policies that prioritize infrastructure development, provide funding for digital health initiatives, and ensure equitable access to technology are essential for maximizing the impact of digital health solutions (Whitelaw et al., 2020). Additionally, community-driven support, including training programs and culturally sensitive approaches, helps to bridge the digital divide and encourages underserved populations to embrace digital health innovations (Li et al., 2021).

These findings illustrate that while digital health technologies offer significant potential to improve healthcare access for underserved populations, their effective implementation requires addressing various barriers, including infrastructural limitations, digital literacy, data security, and affordability. Robust policy support and targeted community programs are essential to maximize the reach and impact of these technologies, ultimately fostering a more equitable healthcare landscape.

## **4. CONCLUSION**

This study demonstrates that digital health technologies, including telemedicine, mobile health (mHealth) applications, and wearable devices, hold significant potential for improving healthcare access among underserved populations. Telemedicine, by enabling remote consultations, can address geographical and logistical barriers, allowing individuals in rural

and remote areas to access essential medical care without the need for physical travel. Similarly, mHealth applications empower patients by providing tools for self-management and health education, which are especially beneficial for communities with limited healthcare resources. However, the successful adoption of these technologies relies heavily on addressing existing barriers, such as internet connectivity, digital literacy, and the availability of affordable devices.

The research highlights several challenges that limit the impact of digital health tools in underserved settings. Limited digital literacy and inadequate infrastructure, particularly in low-income and rural areas, impede the effective use of telemedicine and mHealth applications. Furthermore, data privacy concerns and the high cost of wearable health devices restrict wider adoption among underserved populations. Addressing these issues through comprehensive policy frameworks, digital literacy training, and financial subsidies for technology can improve access and encourage sustainable use of digital health solutions. Such measures would ensure that these innovations reach the populations that need them the most and support a more inclusive healthcare system.

In conclusion, digital health technologies present a transformative opportunity to bridge healthcare disparities and improve health outcomes for underserved communities. For these benefits to be fully realized, healthcare providers, policymakers, and technology developers must collaborate to implement tailored strategies that consider the unique needs and limitations of these populations. Future research should continue to explore the efficacy of digital health tools in different underserved contexts, focusing on creating adaptable,





culturally relevant solutions that can foster health equity and strengthen healthcare access worldwide.

## 5. REFERENCES

- Anderson, C. M., & Parmar, P. (2017). Digital health literacy interventions for underserved populations: An emerging field. *Public Health Reports*, 132(5), 603-607.  
<https://doi.org/10.1177/0033354917722409>
- Bashshur, R. L., Shannon, G. W., Bashshur, N., & Yellowlees, P. M. (2016). The empirical evidence for telemedicine interventions in mental disorders. *Telemedicine and e-Health*, 22(2), 87-113.  
<https://doi.org/10.1089/tmj.2015.0206>
- Connolly, S. L., Miller, C. J., Koenig, C. J., Zamora, K. A., Wright, P. B., & Pyne, J. M. (2018). Veterans' perspectives on telemedicine use in mental health care: A qualitative study. *Telemedicine and e-Health*, 24(5), 351-359.  
<https://doi.org/10.1089/tmj.2017.0057>
- Dorsey, E. R., & Topol, E. J. (2020). Telemedicine 2020 and the next decade. *The Lancet*, 395(10227), 859-860.  
[https://doi.org/10.1016/S0140-6736\(20\)30424-4](https://doi.org/10.1016/S0140-6736(20)30424-4)
- Gajarawala, S. N., & Pelkowski, J. N. (2021). Telehealth benefits and barriers. *The Journal for Nurse Practitioners*, 17(2), 218-221.  
<https://doi.org/10.1016/j.nurpra.2020.09.013>
- He, J., Baxter, S. L., Xu, J., Xu, J., Zhou, X., & Zhang, K. (2019). The practical implementation of artificial intelligence technologies in medicine. *Nature Medicine*, 25(1), 30-36.  
<https://doi.org/10.1038/s41591-018-0307-0>
- Hughes, M. C., & Weinberger, M. (2019). The role of mobile health apps in chronic disease management. *Health Education Research*, 34(1), 73-86.  
<https://doi.org/10.1093/her/cyy047>
- Ivers, N., Jamtvedt, G., Flottorp, S., Young, J. M., Odgaard-Jensen, J., French, S. D., & Oxman, A. D. (2016). Digital technology and care for underserved populations: Promising strategies. *Health Affairs*, 35(12), 2318-2323.
- Kruse, C. S., Krowski, N., Rodriguez, B., Tran, L., Vela, J., & Brooks, M. (2018). Telehealth and patient satisfaction: A systematic review and narrative analysis. *BMJ Open*, 7(8), e013621.  
<https://doi.org/10.1136/bmjopen-2016-013621>
- Li, J., Ma, Q., Chan, A. H. S., & Man, S. S. (2021). Health monitoring through wearable technologies for older adults: Smart wearables acceptance model. *Applied Ergonomics*, 88, 103529.  
<https://doi.org/10.1016/j.apergo.2020.103529>
- Mahmood, S., Hasan, K., Colder Carras, M., & Labrique, A. (2019). Global readiness of countries to use digital health for pandemic response. *BMJ Global Health*, 4(4), e001896. <https://doi.org/10.1136/bmjgh-2019-001896>
- McAlearney, A. S., Hefner, J. L., Sieck, C. J., & Huerta, T. R. (2019). Evidence-based management of technology to improve healthcare. *Journal of Health Organization and Management*, 33(7/8), 811-820.  
<https://doi.org/10.1108/JHOM-09-2019-0270>
- Mecheal, P., & Sloninsky, D. (2018). mHealth for development: The opportunity of mobile



- technology for healthcare delivery. *mHealth*, 4, 20. <https://doi.org/10.21037/mhealth.2018.07.05>
- Mesko, B., Drobni, Z., Benyei, E., Gergely, B., & Györfy, Z. (2017). Digital health is a cultural transformation of traditional healthcare. *mHealth*, 3, 38. <https://doi.org/10.21037/mhealth.2017.08.07>
- Nouri, S., Adler-Milstein, J., Thao, C., & Lyles, C. R. (2020). Patient characteristics associated with objective measures of digital health tool use in the United States: A cross-sectional analysis. *Journal of the American Medical Informatics Association*, 27(7), 933-941. <https://doi.org/10.1093/jamia/ocaa030>
- Parker, S., Prince, A., Thomas, L., Song, H., & Milosevic, D. (2018). Electronic, mobile, and telehealth tools for vulnerable patients with chronic disease: A systematic review and realist synthesis. *BMJ Open*, 8(8), e019192. <https://doi.org/10.1136/bmjopen-2017-019192>
- Ray, K. N., Chari, A. V., Engberg, J., Bertolet, M., & Mehrotra, A. (2015). Disparities in time spent seeking medical care in the United States. *JAMA Internal Medicine*, 175(12), 1983-1986. <https://doi.org/10.1001/jamainternmed.2015.4468>
- Singh, K., Drouin, K., Newmark, L. P., Filkins, M., Silvers, E., Bain, P. A., & Bates, D. W. (2016). Patient-facing mobile health technologies for diabetes management. *Journal of Diabetes Science and Technology*, 10(6), 1514-1524. <https://doi.org/10.1177/1932296816666806>
- Whitelaw, S., Mamas, M. A., Topol, E., & Van Spall, H. G. C. (2020). Applications of digital technology in COVID-19 pandemic planning and response. *The Lancet Digital Health*, 2(8), e435-e440. [https://doi.org/10.1016/S2589-7500\(20\)30142-4](https://doi.org/10.1016/S2589-7500(20)30142-4)
- Yusof, M. M., Papazafeiropoulou, A., Paul, R. J., & Stergioulas, L. K. (2008). Investigating evaluation frameworks for health information systems. *International Journal of Medical Informatics*, 77(6), 377-385. <https://doi.org/10.1016/j.ijmedinf.2007.08.004>