BUILDING A COMMUNITY: STRATEGIES FOR SCALABLE GROWTH IN THE DIGITAL HEALTH HUB

Bachelor Thesis Presented

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Objective of the Thesis:

The objective of this thesis is to explore, design, and evaluate community growth for the Digital Health Hub Literacy Hub. The aim is to enhance engagement, visibility, inform people, and bring collective participation in digital health literacy. As digital health tools become increasingly common in this digital era, there is an urgent need for inclusive, community-driven initiatives that empower individuals (especially volunteers, experts, or regular users and consumers of digital tools) to access and share reliable health information.

This research seeks to identify best practices in community building, assess the current state of engagement within the Hub, and propose actionable strategies that foster collaboration, increase volunteers and retain members and expand the Hub´s reach through digital platforms, Ultimately, the thesis aims to contribute to the development of a scalable and sustainable community model that supports the mission of improving digital health literacy at both individual and societal levels.

In today's digital health landscape, all stakeholders, policymakers, healthcare professionals, lawyers, and the public need to be aware of and actively engage with the digital tools available to support health decision-making. Although digital health innovation in health continues to grow significantly, there are gaps in understanding, access, and trust that still exist across different populations.

Policymakers need reliable insights to create inclusive digital health strategies; healthcare providers must be equipped to guide patients in using the tools effectively, but at the same time, they need to understand them themselves first to provide guidance, and individuals need to feel confident in navigating and comprehending the digital resources available to them.
This thesis focuses on developing the Digital health literacy Hub as a collaborative and trust digital space where volunteers and experts come together to educate, inform and empower everyone to improve personal decision making and self-care practices but also to influence broader systems, such as public policy, digital health regulations and institutional trust by building a more informed and connected society.

Abstract:

This thesis examines the developments and implementation of community growth strategies withing the Digital Health Hub, an online platform designed to enhance public understanding and promote the responsible use of digital health tools, The research centers on creating a collaborative and inclusive digital environment where expert, volunteers and everyday users work together to bridge the gap between rapidly evolving digital health technologies and public awareness. As the digital health world expands, the demand for informed usage of tools such as telemedicine platforms, health apps, wearable devices, and AI-driven health or non-health information sources becomes increasingly urgent.

The thesis outlines a strategic framework that utilizes social media outreach, people, experts, and volunteers' engagement, and structured communication efforts to improve community participation. It highlights the importance of building trust, improving accessibility, and influencing health. Related decision-making. A key objective of this study is to establish a model in which health professionals and citizens collaboratively contribute to digital health literacy. The finding emphasizes the community-driven initiatives in promoting digital health discussion, inclusion, supporting better individual or public decisions, and enabling AI experts, policymakers, companies, the pharmaceutical industry, etc., to develop together a more reliable and user-friendly digital environment for everyone.

Key words

1. Digital Health Literacy
2. Health literacy
3. Community growth strategies
4. Online health platforms
5. Public health education
6. Expert and Volunteer engagement
7. Digital health tools
8. Social media outreach
9. Policy Development
10. Digital support and inclusion

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1. Introduction

In today's world, where health information is increasingly accessed, shared, and utilized through digital channels, digital health literacy has become an essential skill for both individuals and communities. From navigating telemedicine platforms that integrate health data from wearable and mobile applications, the ability to understand and effectively use digital health tools is crucial for informed decision-making. However, the pace of digital health innovations often exceeds the public understanding, particularly among vulnerable populations with limited digital or health literacy. This disparity between technological advancements and user capability can result in misinformation, health inequities, and a decline in trust towards both digital health tools and the healthcare system that promotes them.

In response to these challenges, the Digital Health Literacy & Policy Hub was founded as a shared vision to establish an online platform dedicated to creating a trusted and inclusive environment for individuals seeking understandable, reliable, and actionable health information. Cofounded by Professor Dimitri V. Nanopoulos who bring interdisciplinary, leadership at the field of science, technology and policy and Dr. Olga Tzortzatou Nanopoulos who is an academic, legal expert and former head of the technology transfers office, with deep experience in research ethics, including serving as an external ethics expert for the European research council and the European commission. The Hub unites AI, health, lawyers, policy makers, people in the pharmaceutical industry, workers of the public sector, and general users to share knowledge, raise awareness, and collaboratively develop resources that promote understanding of digital health. More than merely a repository of information, The Hub functions as a community-driven initiative where participants actively engage with content, support one another, and contribute to share a mission: *"To empower individuals to make informed health decisions in an increasingly digital world."*

Building a community is not an easy task; it necessitates deliberate strategies that promote engagement, cultivate trust, and adapt to the diverse needs of various stakeholders, this group includes not only user seeking information but also policymakers, doctors, researcher, IA experts and public or private health professionals who most improve their awareness and involvement with digital tools. These stakeholders should recognize the value of such platforms as vital sources of public input and collaborative learning spaces. When they engage meaningfully, stakeholders can help shape more responsive and equitable digital health policies that accurately reflect the realities faced by users on the ground.

This thesis investigates the strategies necessary for building, growing, and sustaining an engaged community with the Digital Health Literacy Hub. It delves into community-driven approaches, such as mobilizing volunteers, user participation, and trust in digital health information. Additionally, this study will explore how digital platforms like the HUB can function as a bridge between citizens and institutional actors, promoting mutual learning and encouraging the development of health technology that is informed by people's input.

2. Theoretical Foundation

Health Literacy and Digital Health Literacy:

Health Literacy is a fundamental aspect of both individual and public health. According to the World Health Organization (1998), health literacy is defined as "The cognitive and social skills that determine the motivation and ability of an individual to access, understand, and use information in ways that promote and maintain good health". This definition emphasizes that health literacy goes beyond reading health information; It involves the ability to process, interpret, and act on that information effectively within one´s context.

Attendance at the health literacy by spirit course, organized by The Health Literacy Academy on June 19, 2025, in Copenhagen, Denmark. Significantly influenced the understanding of health literacy concepts. The course presented Health Literacy as a dynamic and actionable process rather than a static set of competencies. Also, the course emphasized the global and political dimension of health literacy. This concept plays a crucial role in empowering individuals and communities to engage effectively with health information. Enhancing the ability to access the relevance of health knowledge enables informed decision-making that positively impacts personal well-being, healthcare choices, and community health outcomes. In my personal opinion, Health literacy is both context and content-specific, shaped by values, opinions, motivation, and community norms.

Despite many national action plans being proposed, few have translated into concrete, effective implementation strategies, and that's because they present some challenges that we evaluated, including persistent communications barriers, a lack of user-friendly tools, and the effect of inequity and social determinants. These issues are not just logistical but systematic, often preventing individuals from fully engaging in their healthcare. Conversely, the benefit of

improving health literacy is extensive: according to a study by John Venon (2007), it can prevent over 1 million hospital visits annually and generate savings of more than $25 billion. Therefore, it contributes to better self-care, community well-being, and more efficient healthcare systems. From this perspective, health literacy is both a public and personal good and a strategic investment.

As Healthcare becomes increasingly digital, the concept of health literacy has evolved to encompass skills relevant to digital environments. This shift has led to the emergence of the term “Digital health literacy” (Also referred to as *eHealth literacy*), which is the ability to seek, find, understand, evaluate, and apply health information from electronic sources to address or solve health issues. In 2006, Norman and Skinner introduced the eHealth literacy framework, which outlines six core’ literacies: 1. Traditional literacy, 2 health literacy, 3 information literacy, 4 scientific literacy, 5 media literacy, and 6 computer literacy. Together, these literacies provide the foundation for an individual´s ability to effectively engage with digital health tools and information.

In the context of digital health, these principles are becoming important in today´s public health landscape. The widespread use of smartphones, health apps, online portals, telemedicine, and wearable devices provides unprecedented access to health information and services. However, without the skills to critically evaluate and use this information, individuals may experience confusion, misinformation, and poor health outcomes. Public health goals, such as disease prevention, chronic illness management, and health promotion, are affected by the population's ability to understand and navigate digital health ecosystems.

2.1 Barriers hinder the development and application of digital health literacy:

Access and Digital Divide: Many individuals, particularly those in low-income, rural, or marginalized communities, lack access to the internet, smart devices, or digital health platforms. This digital divide worsens existing health disparities by leaving vulnerable populations behind in the evolving landscape of digital health (Van Deursen & Helsper, 2015).

Trust and credibility: Given the amount of health content, users often struggle to distinguish between reliable and unreliable sources. This difficulty can lead to distrust in digital health

tools and information, especially when misinformation spreads rapidly through social media (Chou et al., 2020).

Technical and Cognitive skills: Not all users have the same level of comfort with technology; older adults, individuals with limited education, and non-native speakers may experience challenges in under grading and using digital health tools. Even with the access, a lack of digital skills or confidence can prevent meaningful engagement with these tools (Levy & Janke, 2016).

Health Misinformation: The proliferation of inaccurate or harmful health information online, or especially during health crises like the COVID-19 pandemic, has underscored the dangers of low health literacy. Without adequate critical thinking skills, individuals are more susceptible to misinformation, which leads to poor health decisions and public health risks (WHO, 2021).

Data privacy and ethical concerns: A growing barrier to digital health literacy is the concern over data privacy and the use of personal health information by digital platforms and mobile health applications, many health apps collect sensitive data not only to improve user experiences but also for commercial purposes, such as targeted marketing or pharmaceutical development, often without full transparency or user consent, this leads to ethical concerns and public mistrust when individuals feel their data may be exploited or sold, they are less likely to engage with digital health tools, despite their potential benefits (Olga Tzortzatou Nanopoulu, 2025).

AI **complexity and uncertainty:** The acceleration of artificial intelligence (AI) in health care presents both remarkable opportunities and significant challenges regarding digital health literacy. AI is capable of several things, for example, enhancing diagnosis, personalizing care, and improving health education. However, its technical complexity and the limited understanding among the public may impede its effective implementation. According to the Health Misinformation Tracking Poll (2025), 56% of U.S adults expressed uncertainty in their ability to differentiate between accurate and inaccurate health information provided by an AI chatbot, with only 5% demonstrating strong confidence in this regard. This lack of confidence is further complicated by concerns related to algorithmic bias, data privacy, and insufficient transparency. In the absence of clear guidance and educational resources, the potential of AI to improve healthcare may be undermined by confusion and skepticism.

2.2 Community Building concept in the health context:

Health communities, whether established in online or offline settings, function as supportive ecosystems where individuals and professional organizations connect to share knowledge, offer mutual support, and promote healthier behaviors. In the field of digital health literacy, these communities assume a virtual role in bridging the gap between complex medical information and public comprehension. They enable peer-to-peer learning, foster social support, and encourage collective problem-solving to create individual confidence and decision-making concerning health-related matters.

A relevant theoretical framework for understanding this phenomenon is Wenger´s 1998 Communities of Practice model, which conceptualizes communities as groups of individuals who share a common interest or passion and engage in regular interaction to improve their practices. Within the Digital Health Literacy Hub, the community serves as a "practice field" where experts, volunteers, and everyday users exchange experiences, validate information, and collectively advance their literacy.

Furthermore, in a digital context, Eysenbach (2008) highlights that online health communities can provide anonymity and accessibility, thereby facilitating participation from individuals who may be excluded from conventional environments. This functionality creates opportunities for more inclusive and equitable knowledge sharing.

2.3 Stakeholder Engagement theory:

The active engagement of a diverse multitude of stakeholders constitutes an essential determinant in the sustainable development and long-term progression of the Digital Health Literacy Hub. According to the Stakeholder theory (Freeman, 1984), the success of an initiative is predicated on the comprehensive identification and integration of the needs and interests of all the participants. In the framework of the Hub, this extends beyond primary users to include policymakers, healthcare professionals, technology developers, educators, and volunteers. The collective participation of these groups fundamentally influences the platforms´ relevance, credibility, and overall ability to create a societal impact.

In the health context, Participatory Governance models emphasize the importance of co-creation by developing health tools and policies with input from those who will use them. By involving stakeholders at multiple levels, communities can ensure that digital health tools are practical, ethical, and culturally relevant.

When community feedback is collected and analyzed systematically, it can directly impact public policy and system design, For example; user experience can identify barriers that policymakers may overlook, while experts input can help shape educational strategies that adhere to scientific standards, This approach aligns perfectly with the Digital Health Literacy Hub´s mission of bringing together experts and volunteers to support informed decision-making.

2.4 Digital inclusion and trust in health technology:

Digital inclusion is essential for ensuring that every individual, regardless of income, education, location, or ability, can enter and effectively utilize digital tools. In the health sector, this involves addressing both technical barriers, such as limited internet access and outdated devices, as well as skills gaps, including varying levels of digital literacy. If we do not address these challenges, we risk leaving vulnerable populations behind, denying them the transformative benefits of digital health innovations.

Equally significant is the importance of fostering trust. In an era characterized by the rapid propagation of data privacy concerns, agoristic bias, and health-related misinformation. Users must perceive digital health tools as secure, accurate, and protective of personal information. Community involvement is pivotal in cultivating this trust, as communities can curate reliable resources, advocate for transparency, and facilitate open, evidence-based dialogue between users and subject matter experts.

The technology acceptance model (TAM) proposed by David (1989) emphasized that technology adoption largely depends on two factors: perceived usefulness and perceived ease of use. At the Hub, the commitment is to ensure that tools are both relevant to users' health needs and easy to navigate, thereby encouraging and sustaining participation. By prioritizing digital inclusion and trust, the Digital Health Hub can contribute to a healthier and more equitable future.

2.5 AI and Digital Health Literacy:

Artificial Intelligence (AI) is transforming the healthcare landscape, with applications that include predictive diagnostics, personalized treatment recommendations, and automated patient education. While the potential benefits of AI are significant, integrating it into health

systems presents serious challenges for digital health literacy. Many individuals lack a clear understanding of what AI is, how it works, and how to interpret its outputs. This knowledge gap can hinder both patients and professionals from effectively utilizing AI-driven tools.

Public mistrust further complicates these issues. Concerns regarding algorithmic bias, unclear decision-making processes, and potential misuse of personal health data contribute to skepticism about AI applications in healthcare. DR Eric Topol help a leading expert in digital medicine, emphasizes in his book (deep medicine 2019) that while AI has transformative potential, “patients and provide alike must develop a critical understanding of AI outputs, as blind trust in algorithms can lead to errors and harm” He also notes that complexity of AI tools often overwhelms users, which limits their effective adoption in healthcare settings. Given the rapid adoption of AI, the challenge is not only to improve technical access but also to equip users with critical thinking and evaluative skills necessary to interpret AI-generated health information responsibly. Without targeting education and transparent system design, AI risks widening existing digital health literacy gaps rather than closing them.

3. Methodology

This chapter describes the research design, data collection methods, participant selection, and the limitations of the study. The research aims to explore how the Digital Health Hub can improve engagement, increase participation, and foster trust among various stakeholders. The ultimate goals are to develop strategies that will help the hub grow into a sustainable and vibrant community platform, offering expanded resources and activities. Beyond simply connecting people, the Hub seeks to act as a global knowledge exchange, gathering insights, initiatives, and research from interviews with volunteers, experts and the public. This contribution will not only inform the Hub´s development but will also be showcased to raise awareness of the diverse digital health literacy projects happening around the world, strengthening the Hub´s role as a connector of people, ideas, and innovations.

3.1 Research design:

The study focuses on three main objectives:

1. Assessing the level of awareness and understanding of digital health literacy among different stakeholders' groups.

2. Identifying how professionals and the public use or develop digital health tools, applications, and different initiatives.

3. Collecting ideas and strategies from participants that could help the HUB evolve into a sustainable and vibrant community with expanded resources, activities, and global reach.

3.2 Data collection tools

Data will be collected using a range of complementary tools to ensure a comprehensive understanding of the Hub´s activities and growth potential:

1. Interviews: These were conducted with 10-15 participants who expressed interest in joining the Digital Health Hub through our website, LinkedIn, and other channels.
Participants feel in two-man groups:

2. Experts and volunteers: These individuals were engaged through a more specific interview that explored their projects, areas of interest, background, and expertise to assess how they could contribute to the community. Questions also covered their network, involvement in research papers, and overall potential collaborations and knowledge sharing within the HUB.

3. General users: This group consists of regular people who use digital health tools and applications. Interviews with them focused on their experiences as consumers of digital health products, their awareness of digital health literacy, and their perspectives on the benefits, challenges, and trust concerns associated with these technologies.

Each interview lasted between 30 and 45 minutes and followed a semi-structured guide with open-ended questions designed to explore stakeholders' commitment, perceptions, and recommendations so that the Hub can better connect, support, and expand. Furthermore, feedback from general users is valuable because it provides information on how people responsibly manage their knowledge of digital health, including their level of awareness, concerns, and satisfaction with the use of the tools. This is especially important as it allows experts to incorporate new knowledge into their projects and helps identify gaps in

implementation where the Hub can offer support to the public, helping users make better decisions, engage more responsibly with the right tools, and stay well-informed. The goal is to make the digital health center's tools easier to use, with trusted courses and resources where everyone can have open discussions while receiving verified information. We need to make it more accessible and effective for everyone, especially for communities that are less informed or have difficulty understanding digital health concepts.

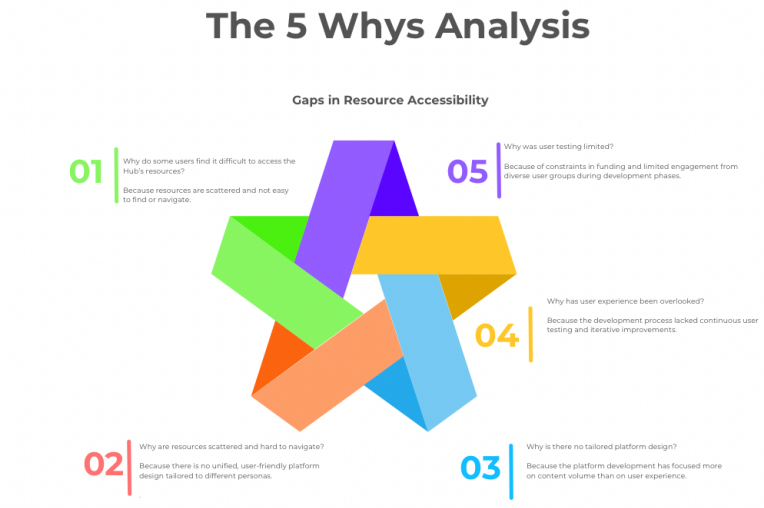
CATEGORY	QUESTIONS	PURPOSE
Background and expertise	• Can you briefly describe your professional background and current work related to digital health? • What projects or research are you currently involved in? • How do you see your expertise contributing to the Hub?	Understand their role, knowledge base, and possible contributions.
Engagment and Collaboration	• Have you collaborated with other professionals in similar platforms before? How was your experience? • What type of collaborations would be most valuable to you here? • What support would help you share your work more effectively?	Identify opportunities for networking and collaboration.
Digital health perception	• How do you define digital health literacy in your field? • What barriers do you think professionals face in adopting digital health tools? • How could the Hub help overcome these barriers?	Gather insights on professional challenges and solutions.
Resources use and need	• What resources (courses, research papers, tools) would be most beneficial for you? • What topics should be prioritized in the Hub's resource library?	Inform content and resource development.
Motivation	• What inspired you to join the Digital Health Hub? • Have you participated in similar initiatives before? • What skills or experiences do you want to contribute here?	Understand motivations and strengths.

CATEGORY	QUESTIONS	PURPOSE
Engagement & Networking	• Do you need connections or partnerships to advance your current projects? • What type of experts, organizations, or resources would you like to connect with? • How could the Hub facilitate these networking opportunities for you?	Identify networking needs and create tailored connection opportunities.
Needs & Suggestions	• What training or resources would help you be more effective in your volunteer role? • How could we make the Hub more welcoming and inclusive?	Strengthen volunteer support and retention.
Awareness & Experience	• How familiar are you with digital health tools and applications • What apps or platforms do you currently use? • How confident do you feel using these tools?	Measure awareness and confidence levels.
Perceptions & Trust	• What benefits have you seen from using digital health tools? • What concerns or challenges do you have? • How do you decide which tools or resoruces to trust?	Identify trust issues and improvement areas.
Concerns & Improvements	• What concerns do you have about using AI in healthcare tools • Are there specific technologies you find difficult to use or understand? • What improvements would you like to see in digital health tools or in the Hub's platform?	Identify concerns about AI and technology, and gather actionable improvement suggestions.

4. Results and Community Strategies:

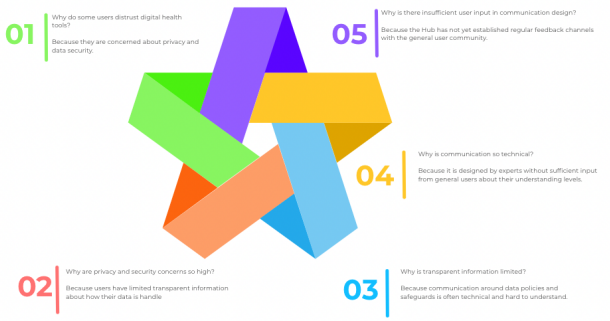
To develop strategies, I first used the 5 Whys method (Sakichi Toyoda,1930) to analyze the challenges identified during the interviews. This approach allowed us to uncover the root cause of these challenges rather than just addressing surface symptoms. Based on these insights, we created three customer personas methods (Alan Cooper (1980) to better understand the diverse needs, behaviour, and motivation of the Hub´s community members. Finally, I employed the Blueprint framework to map user journeys and key touchpoints for each persona. This process helped us design targeted strategies aimed at improving engagement, building trust, and enhancing resource accessibility within the hub.

4.1 The 5. Whys Analysis



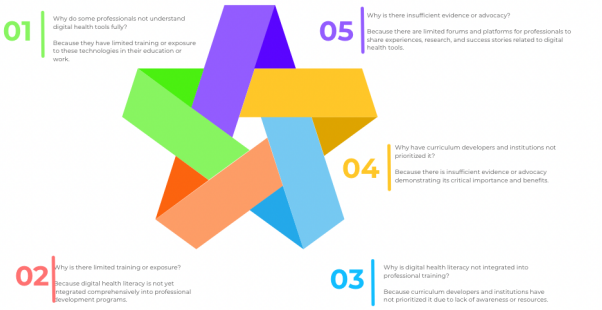
The 5 Whys Analysis

Lack of Trust in Digital Health Tools



The 5 Whys Analysis

Professionals Not Understanding Digital Health Tools



The 5 Whys Analysis

Maintaining Community Growth Without Losing Existing Members

4.2 Customer Persona

Persona 1	Details
Demographic	43 years old, male, with 2 children, lives in USA, works in a law firm
Behaviors	- Uses ChatGPT and Google to check symptoms for himself and his family - Relies on online tools for convenience - Doesn't read privacy terms or understand data sharing implications
Attitudes	-Curious and pragmatic - Trusts and relay in AI or digital tools too easily - Views digital health literacy as technical thing - Skeptic
Needs & Challenges	- Doesn't know the difference between AI suggestions and clinical advice - Unaware of his rights regarding health data - Risks acting on misinformation - Feels overwhelmed by legal language in privacy policies
Goals / Motivation	- Wants fast, trustworthy health advice for his family - Hopes to feel more confident using health tools safely - Interested in better understanding digital tools without becoming a tech expert
How We Can Help	-Policy Education: Easy-to-understand guides on health data rights and General Data Protection Regulation. -Digital Literacy: Intro course or webinars for professionals (e.g. "What is digital health literacy?") -Safe AI Use: Clear "Dos & Don'ts" for using AI like ChatGPT for health -Trustworthy Resources: Share in the community content with verified sources and expert explainers

Persona 2	Details
Demographic	38 years old, female, PHD in informatics, Live in the IK, work in a university research center
Behaviors	-Regulary publishes and reviwes digital health research -Uses advanced analytics and AI tools for Clinical data -Engages in professional forums and conferneces
Attitudes	-Advocates for ethical Ai use in health -Sees technology as a tool, not a replacement for humans -Pragmatical
Needs & Challenges	-Needs reliable plataform for sharing and discussing validated information -Faces difficulties in communicating complex topics to non-experts -Concerned about corruption of AI health tools
Goals / Motivation	-Improve digital health standards and adoption -Support policy makers for responsable AI in healthcare -Mentor emerging professionals
How We Can Help	-Provide networking ooportunities with cross-disciplinary experts -Offer the digital health hub librray for publishing -Host policy discussions and different workshops

Persona 3	Details
Demographic	24 years old, male, recent public health graduated, lives in Canada, colunteers part-time while job hunting
Behaviors	-Assists with event organization and community outreach -Uses social media to share digital health news -Wants to learn more about digital health literacy but does not where
Attitudes	-Enthusiastic and eager to contribute -Values collaboration and mentorship -Very agile and openminded with new technologies -Frustated at not finding opportunities for career growth
Needs & Challenges	-Needs to learn the basics of health literacy -Connect with people who can advices him and guide him -Needs more news and updates to share social media
Goals / Motivation	-Build a career in the medical field by applying health literacy and digital health literacy -Expand professional network -Gain practical experience while helping the community
How We Can Help	-Provide courses and accesible training modules -Pair with experinced mentors -Recognized contributions publicly to boost professional visibility

4.3 Blueprint 4 strategies for the digital health hub

Blueprint “Welcome spotlight”	Elements
User actions	New member completes their registration with the community and interview
Strategy	“Welcome Spotlight” post published on social media, Hub website and newsletters
Backstage	Collect member information
Support process	Design templates, editorial calendar and communication coordination
Objectif	Aims to build a sense of belonging and inspire engagement by publicly introducing new members through the Hub´s platforms.

Blueprint “Mentorship & peer network”	Elements
User actions	Member expresses interest in being a mentor, mentee or joining a peer group
Strategy	Matching announcements, invitations to mentorship sessions or peer group activities
Backstage	Profile analysis, matching based on skills, interests and schedule a meeting
Support process	Video conferencing platform, project management tools and group moderation
Objectif	Foster knowledge exchange, professional growth and collaboration with the community by connecting members. This approach makes relationships and support the collective advancement of the digital health literacy through guided mentorship and peer-to peer learning

Blueprint “Digital research Library”	Elements
User actions	Member logs into the hub´s digital platform to access the research library and browse or download papers, projects and resources
Strategy	User friendly digital library interface with search, filters and categorized topic
Backstage	Curating and uploading research papers, updating information, ensuring access and up to data content
Support process	Library malmanagement software, content curation tea, partnership with researchers and institutions
Objectif	Provide all members with simple, centralized access to high quality research and advancements, encouraging informed participation and evidence-based discussion

Blueprint “Verified new & information section”	Elements
User actions	Members visit the news section of the platform to read verified news, fact checked updates and expert commentary on digital health topics
Strategy	A publicly accessible section will be developed to provide organized categories, concise summaries, and direct links to full articles. To ensure transparency and reliability, entries will include a ‘fact-check’ tag in cases where misinformation has been identified and corrected
Backstage	Policy makers, analytics, experts make a review trending news, verify facts, flag misinformation and write clear explanations
Support process	News aggregations tools, editorial workflow, fact checking protocol and partnership with trusted media and institutions
Objectif	Provide members and the public, with accurate, update and trustworthy information on digital health, counter misinformation and enhance public trust through expert-backed analytics

Blueprint “Verified new & information section”	Elements
User actions	Members visit the news section of the platform to read verified news, fact checked updates and expert commentary on digital health topics
Strategy	Publicly accessible section with organized categories, brief summaries and links to full articles. Including “fact-check” tag when misinformation is freed
Backstage	Policy makers, analytics, experts make a review trending news, verify facts, flag misinformation and write clear explanations
Support process	News aggregations tools, editorial workflow, fact checking protocol and partnership with trusted media and institutions
Objectif	Provide members and the public, with accurate, update and trustworthy information on digital health, counter misinformation and enhance public trust through expert-backed analytics

Blueprint “Engagement and retention”	Elements
User actions	Participated in workshop, expert panels, themes discussion, micro-activities, survey and challenges
Strategy	Promotion of workshops, panels sessions, monthly themes and recognition posts for active contributors
Backstage	Planning event topics, create panels and bring experts on the specific field, moderate discussion and track participation
Support process	Event hosting platforms (webinars, live stream) survey tools, community CRM, speaker management systems
Objectif	Maintain ongoing members engagement though interactive workshops, experts, panels and discussion, increasing retention and strengthening the sense of community while promoting knowledge exchange

Blueprint “Annual community gathering and id-year meetup”	Elements
User actions	Registration for the annual in person community event and through time a mid-year meetup, attends sessions, networking dinners and open discussions
Strategy	Public promotion of the annual gathering event, agenda workshop, talks, experts, volunteers, networking activities and social events
Backstage	Event planning, venue booking, coordination of travel logistics, speaker invitations, catering arrangements and scheduling of activities
Support process	Event hosting platforms (webinars, live stream) survey tools, community CRM, speaker management systems
Objectif	Maintain ongoing members engagement though interactive workshops, experts, panels and discussion, increasing retention and strengthening the sense of community while promoting knowledge exchange

5. Discussion

The qualitative research methods outlined in Chapter 3 were essential in uncovering the underlying issues affecting the Digital Health Hub´s engagement and growth. Conversations with healthcare professionals, lawyers, policy makers, researchers, etc., revealed that the awareness of digital health literacy remains inconsistent. In many cases, participants were unaware that the tools and applications they use daily could be considered part of the digital health literacy ecosystem. This insight, derived from direct questioning during interviews and surveys. Points to a fundamental communication gap that the Hub must address.

The strategies proposed in the blueprint section emerged directly from these findings. For example, the “Welcome spotlight” was developed in response to feedback from new members who felt disconnected from the community after joining. Likewise, the mentorship and peer network strategy reflect expressed desires, especially from professionals, for a structured way to connect, exchange expertise, and collaborate on digital health literacy initiatives.

Analysis of survey data and platform analytics also highlighted that members often struggle to locate credible, centralized information. This directly informed the creation of the Digital Research Library, designed to act as an easily accessible knowledge hub. Similarly, concerns about misinformation and trust in online health information, frequently voiced during interviews, led to the verified news and information section, ensuring that all publicly shared updates undergo fact-checking and expert review.

Finally, the observation of community events and online discussions revealed that participation is ensured during interactive or live activities but quickly declines afterward. This observation directly informed the Engagement and retention and Annual community gathering strategies, both of which aim to create regular, meaningful touchpoints that sustain long-term interest and strengthen member loyalty.

In short, each blueprint strategy is made in the lived experiences, needs, and pain points expressed by participants. The research process not only identified the challenges but also shaped targeted, actionable responses.

6 Conclusion:

This research set out to explore how the digital health hub could enhance engagement, expand participation and strengthen trust among its diverse stakeholders, through a combination of qualitative methods, including interviews, survey and participation, it became evident current barriers stem from both a lack of awareness and uneven access to credible information, compounded by the complexity of digital health tools.

The blueprint method proposed practical, scalable solutions that directly address these gaps by implementing initiatives such as welcome spotlight, mentorship network, centralized research resources, verified news sections, and interactive events offline or online. With this, the Hub can create a self-sustaining cycle of participation, learning, and trust. Each strategy contributes to building a community that is not only larger but also more engaged, informed, and empowered to advocate for digital health literacy in their contexts.

Beyond simply solving immediate challenges, these initiatives position the Digital Health Literacy Hub as a global connector, linking individuals, projects, and innovations across sectors and geography. The integration of trust-building mechanisms with active knowledge exchange ensures that members can navigate an increasingly complex digital health environment with confidence.

If implemented consistently and evaluated regularly (KPIs), the strategies can enable the Hub to evolve into a leading force in digital health literacy, fostering a culture of collaboration, combating misinformation, and amplifying credible, evidence-based health information worldwide. This transformation would not only enhance the Hub´s value to its members but also contribute meaningfully to the global movement towards accessible and trustworthy digital health resources.

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