

European Medical Students' Association

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Statement on health system transformation in the digital age during the COVID-19 pandemic

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As European Medical Students we have made the digitalisation of health systems as well as digital health literacy amongst medical students one of our main priorities and support the measures suggested by WHO. EMSA appreciates the progress made through the Digital Health flagship initiative of the European Programme of Work, 2020-2025. Many technologies have been utilised during the COVID-19 pandemic to alleviate strain on healthcare systems and circumvent potential risks of infections through the use of telehealth initiatives. While we fully support any technological developments beneficial for countering inequalities, it has to be noted that sensitive aspects of the digital transformation of health systems cannot be neglected.

Complete transparency needs to be ensured regarding the implementation of these digital technologies in an effort to build trust and foster the willingness of users to share their data, which is required for many of these systems to operate optimally.

Further scrutiny needs to be applied to the data that is being used for these technological advancements, with users properly granting informed consent.

Moreover, the ability to control how user data is utilised should be clearly communicated prior to requisitioning the data. Simple and attainable methods of retracting or removing the data for these technologies must be clearly stated at all times in order to respect users' rights to privacy, particularly concerning such sensitive data and, once again, permit trust to be built.

Technology has the possibility of decreasing inequalities while being a risk factor in widening already existing gaps. Political attention must focus on reducing technological inequalities by providing necessary infrastructure, for example essential for guaranteeing stable internet connections. It is also vital that healthcare systems ensure that all users can more easily access technology that allows for telehealth.

Digital literacy courses, literacy support through for example helpdesks as well as ongoing audits to assess the risk of these digital solutions are additionally essentials to reduce inequalities.

EMSA hopes that the shortcomings mentioned by WHO will be addressed appropriately by member states, and support will be provided to prevent possible negative consequences of digital solutions adequately. It is crucial that WHO and its partner organisations certify that patient data is secured at all points and that users/patients can control access/use of their personal data. Further and in depth investigations are needed to monitor the effectiveness of invasive technologies continuously.

EMSA encourages European Member States to support each other regarding the endeavours of digital implementations. Through a united approach, member states will be better placed to minimise the impacts of the COVID-19 pandemic.



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When discussing the digital transformation of health systems, health professionals and their digital skills cannot be neglected. EMSA strongly encourages training programmes to be implemented at all levels of professional life, starting with the implementation of digital literacy into medical curricula. Digital Health toolkits and Data security toolkits are vital resources created by EMSA to provide medical students with an understanding of the various considerations, benefits and drawbacks surrounding these technologies. EMSA would encourage similar resources to be provided to patients in a concise format in order to foster understanding of digital tools used.

While digital advancements can be beneficial tools if used correctly, we, as European medical students, would like to underline that telehealth can and should never completely replace face to face consultations but should rather be used as a helpful tool. A complete examination of a patient is not fully possible with only a camera view. Even outside of direct physical examinations, non-verbal communication is an aspect which telehealth cannot yet compensate for but that may give invaluable indicators for diagnoses.

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