Workshop Introduction

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Workshop Schedule

09h00 – 09h10: Workshop opening

09h10 – 09h40: Presentation of the Workshop

09h40 – 10h10: David Hawking, CSIRO ICT center (Australia)
Towards higher quality health search results: Automated quality rating of depression Web sites

10h10 – 10h40: Arnaud Gaudinat, HON (Switzerland)
Presentation of various models of trust used at the HON Foundation

10h40 – 11h10: Chocolate pause (Switzerland)

11h10 – 11h40: Michel Joubert, LERTIM (France)
WRAPIN: finding trusted health information on the Internet and empowering patients within personal health records

11h40 – 12h10: Yin Aphinyanaphongs, Vanderbilt University (USA)
Text Categorization Models for identifying Unproven Cancer Treatments on the Web

12h10 – 12h40: Stefan Darmoni, Rouen University Hospital (France)
CISMef: Catalog & Index of Health Resources in French on the Internet

12h40 – 13h00: Discussion and closure of the Workshop
Purpose of the Workshop

- The Models of Trust for Health Web sites workshop is devoted to the management of health quality information for the general public that can be found on the web.

- The goal of the models of trust is to improve access to trustworthy medical information of health Web site to the public.
Statements

- The content proposed by Web sites can have a direct impact on the user's well-being
- Indeed, millions of documents are available on the web, and users are often overwhelmed by the mass of information
- Moreover, the quality of information is uneven - a fact sometimes ignored by users
- These past few years, mercantile models have overwhelmed the Web without control

=> content reliability must be controlled, filtered … in order to help users to efficiently access information that is of most value to them
Background

Initiatives for assessing the quality of Web sites

- **Selection or referencing** (the first approach):
  - Yahoo!, MedlinePlus (Miller et al, 2000), CISMeF (Darmoni et al, 1999)

- **Self-regulation** (the most utopian):

- **Accreditation of web pages** (the most accurate):
  - HONcode (Boyer et al., 1996), URAC (webapps.urac.org)
  - WMA (Bosch, 2002)

- **Popularity of web pages** (the most naturally used):
  - Google (Page et al., 1998)

- **Collaboration of users** (the most democratic):
  - Outfoxed / Lijit (www.lijit.com), Google co-op (www.google.fr/coop), Wikipedia

- **Education of users for quality evaluation** (the most complementary):
  - Oxford University : DISCERN, OMNI (Organising Medical Networked Information)
Points to address (1/2)

- Initiatives aimed at evaluating the reliability of health websites referencing, accreditation, popularity and collaboration in the analysis and comparison of health Web sites
- Ways and means of rendering the control and evaluation visible and available to users: labels, seals, portals, P3P protocol and tools, etc.
- Criteria to determine the quality of health websites: transparency of information and information providers, document readability, traceability of content, quality of medical content, privacy, etc.
- Automation of quality assessment given the growing number of health websites
Points to address (2/2)

- Manual (human) versus automatic quality assessment: advantages and limitations
- Solutions for dealing with the constantly changing content of health Web sites
- Qualifications and capabilities of people assessing the content reliability of health websites
- Free versus lucrative solutions for the control of health website reliability
- Promoting the visibility of high quality health websites
- Multilingual issues on the reliability of health websites
Summarization of the WS Objectives

- Give a view of the trust models until now and their relevancy for the user
- Give an overview of the state of the art initiatives of trusts models
- Ways to integrate these models into daily life of the public