

W o r k s h o p

Models of trust for Health web sites

Workshop Introduction

Arnaud Gaudinat, Natalia Grabar, Henning Müller & Celia Boyer

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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**

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):
IHC : eHealth Code of Ethics (Risk, 2000), TNO Health Trust : QMIC (Sheldon, 2002)
- **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**