

Call for Papers: Special Issue on

Addressing (in)equalities and (in)equities in digital health communication

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In this special issue of the *European Journal of Health Communication*, we invite scholars to submit manuscripts which address (in)equalities and (in)equities in digital health communication and provide theorising that goes beyond individual actors and their responsibilities.

As society grapples with inequities in health and disease, scientists throughout the world have recognised that individual-level behaviour change interventions, while common, are not always ideal for improving health outcomes. Recent global health pandemics have highlighted the need for both digital health technologies and collaborations that bring together the public and private sectors at local, regional, national, and international levels for success. This is an area where health communication scholars should offer new and important insights. New technologies, such as AI, digital health and monitoring tools, electronic medical records, and organisational shifts to digitise clinical encounters, are quickly becoming essential for health, well-being and patient empowerment. At the same time, technologies are often created for profit and exist within systems that replicate and often exacerbate inequalities due to unequal access, literacy, or other structural forms of oppression, such as embedded racism, sexism, and ableism.

What counts as digital health communication?

Worldwide technological development and the digitalisation of health technologies are at the heart of healthcare systems promising efficiency, better management, and a patient-centred approach. However, all the tools available to support patients, carers, and healthcare professionals are also at risk of exacerbating implicit and unintentional discrimination or bias. For this special issue, we are particularly interested in papers that focus on either the human use of digital tools/devices to support health communication or examination of digital health contexts such as mobile health, e-health, and AI-based technologies such as conversational agents and telehealth focused on health communication. This special issue calls on health communication scholars to theorise on or empirically examine (beyond individual actors and their responsibilities) interventions and solutions to health inequality/inequity using digital tools/devices.

What do we mean by (in)equality & (in)equity?

In most of Europe and in other parts of the world, the state plays a major role in ensuring public health. As most health technologies are developed by private companies with often different and conflicting objectives (responsibilities to shareholders and profit), it is worth exploring if and how

such technologies can improve health and for whom. *Inequalities* refers to the unequal distribution or usage of health care services supported or enabled by digital technologies. These inequalities may be related to socio-demographic factors such as age, race, region, income, education level, health status, or health literacy. *Inequities* refers to failures of governments or other structures or organisations that are supposed to ensure public health for all. Inequalities can create inequities, but they can also be used to address inequities. In addition, digital transformations can both improve or reinforce, produce or exacerbate, through health communication, certain forms of inequalities and/or inequities.

All submissions should address the three main components of this special issue:

- 1. A digital health communication context or technology,
- 2. an (in)equality or (in)equity aspect,
- 3. the issue of responsibility, which may include individual actors/patients but should also include examination of structural, cultural, organisational, economic, or policy levels.

Examples of topics of interest related to (in)equality and (in)equity in digital health communication include (but are not limited to):

- Processes for cultural adaptation of digital health messaging
- Digital health literacy alongside language literacy in migrant communities using e-health coaching or wearable devices
- Mis/dis-information at structural or organisational levels
- Telehealth platform for low-income patients without internet access or smartphones/digital devices
- User interaction design that accounts for various ability levels of vision and hearing
- Web-based directory of local mental health resources
- Health messages generated by AI algorithms/ large language models (e.g., GPT) and intrinsic racism, sexism, or other form of discrimination
- Chatbots in the distribution of health information and education
- Al communication policies/ethics created by organisations or governments
- Digitisation of inclusive health reminders for screenings and procedures that consider diverse gender identities (e.g., pap smears, mammogram, prostate screening)
- Health-related controversies on an NGO-designed digital platform

Submission format

We welcome submissions that fit any of the EJHC formats: original research papers, theoretical papers, methodological papers, review articles, and brief research reports. For further information on article types, please see http://www.ejhc.org/about/submissions.

Manuscripts should be prepared in accordance with EJHC author guidelines and be submitted via the journal website.

The deadline for submissions is 15 February 2024.



Review process

All articles will undergo a rigorous peer review process. Once the paper has been assessed as appropriate by the editorial management team (with regard to form, content, and quality), it will be peer-reviewed by at least two reviewers in a double-blind review process, meaning that reviewers are not disclosed to authors, and authors are not disclosed to reviewers. To ensure short publication processes, EJHC releases articles online on a rolling basis, expected to start in October 2024.

European Journal of Health Communication

The European Journal of Health Communication (EJHC) is a peer-reviewed open access journal for high-quality health communication research with relevance to Europe or specific European countries. The journal aims to represent the international character of health communication research given the cultural, political, economic, and academic diversity in Europe.

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