The Women Observatory for eHealth, WeObservatory

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Introduction

The Foundation Millennia2025 Women and Innovation [1] is committed to highlight the crucial role of women in global health and telemedicine, as well as their unrecognized capacity as builders of alternative futures. The latter is based on women's innate future orientation, their ability as social actors to mediate and network at all levels, and to face natural catastrophes and human conflicts by saving lives and creating solidarity among women.

In this context, nurses are root workers whose endless efforts and worldwide commitment to control pain and reduce mortality are still insufficiently recognized. To address this gap, "Connecting Nurses" [2] an initiative supported by Sanofi, in partnership with nurses' organizations, provides a forum where nurses from around the world can share ideas, advice, innovations, and enhance the leading role of the nursing profession in advancing healthcare.

Acknowledging that women remain a forgotten group in many countries, Connecting Nurses and the Foundation Millennia2025 joined forces in September 2012 to launch the WeObservatory, an innovative Digital Inclusion Platform dedicated to women's global eHealth challenges. The overall objective of the WeObservatory is to serve as a unique resource center on eHealth and telemedicine, to promote women's empowerment through the access to and use of

advanced technologies, combined with innovative integrated collaborative leadership programs. More specifically, the *WeObservatory* seeks to:

- Accelerate women's access to and use of information and communication technologies (ICTs) for the provision of eHealth, mHealth and Telemedicine services, especially to those living in the developing world, within the context of the UN Millennium Development Goals (MDGs) 4 and 5;
- Optimize connections, generate creative solutions, and contribute to the drastic reduction of maternal and child mortality by 2015 and 2025; and
- Support women and healthcare professionals in engaging all generations in the use of advanced technological tools, to promote access to eHealth and Telemedicine for the improvement of women's and family health.

By making all ICT tools and services fully accessible, the WeObservatory improves communication, facilitates access to healthcare services, and provides cost effective connections.

Activities

The WeObservatory offers a selection of innovative projects, eApplications, online courses, and a Library. The projects are selected from among those posted by participating nurses to Care Challenge—the ideas-sharing website of the nursing community worldwide, created by Connecting Nurses [3]. In 2013, WeObservatory decided to select each year five Care Challenge projects that improve the use of telemedicine and eHealth services. Their inclusion in the WeObservatory aims to expand the projects' visibility and aid their founders in establishing connections with Millennia2015 communities in diverse regions and countries.

Projects

The nine projects selected for the WeObservatory since 2013, described below, have proposed activities that include eHealth into their frameworks. They were developed in their original language (English, French, or Spanish) without translation, and expand over four continents: Africa, the Americas, Asia and Europe. These projects cover themes that the Women and eHealth Study 2010–2012 [4], presented at Medetel 2013, found to be of interest to women,

including: Emergencies during natural disasters, mental health, the elderly, HIV, maternal health, diabetics, mHealth applications, health prevention, and online education through videos.

pod.RN - The Nurses' Podcast Project, Philippines [5]: The use of radios remains a favorite communication tool in isolated communities. The Alliance of Young Nurse Leaders and Advocates (AYNLA) in Manila is scaling up its initial podcast project with video podcasts that integrate YouTube, social media and micro blogging sites, reaching a larger audience. A special fund for emergencies contributes to support pregnant women facing natural disasters.

Répertoire des guides cliniques pour l'élaboration des plans thérapeutiques infirmiers en santé mentale, Canada [6]: Mental health remains unrecognized in many places. Nurses in Quebec have elaborated therapeutic guidelines to ensure adequate and qualitative care for these patients. The guideline on Consumption of psychoactive substances has been adapted to the local context of mental healthcare in Kinshasa, Democratic Republic of Congo, thanks to a joint agreement with the Centre Neuro Psycho Pathologique de l'Université de Kinshasa (CNPP/UNIKIN).

Research-based Community Telehealth Center, Philippines [7]: The Our Lady of Fatima University, in Valenzuela City, Philippines, is investigating the views of the elderly regarding lifelong learning through telehealth technologies; the preliminary results are promising. Additional research, planned for 2014, will address internet use for healthcare among aging women in Filipino communities.

VIH TaVie, Canada [8]: HIV treatment adherence remains a challenge. This project focuses on developing 20 minute-long videos that provide continuous support to patients. Women living with HIV will benefit of having access to specific videos adapted to their needs during pregnancy and lactation.

Let's Save our Mothers, Nigeria [9]: Limited progress has been made in improving maternal health in Nigerian communities. Using mobile phones, the Traffina Foundation is addressing identified challenges by targeting pregnant women who are victims of dangerous practices. The project sends participating women weekly bulk short message service (SMS) messages with information about

pregnancy and the dangers of harmful practices to increase awareness and help save lives during childbirth.

Diabetic Foot Care, Kosovo [10]: The methods and materials used for treating diabetic patients are sophisticated in developed countries, but rarely adapted to areas with limited resources. Targeting these areas, the Diabetic Foot Care project has already obtained promising results in Kosovo and will contribute to the development of a future mHealth application.

iPansement, France [11]: This multi-service mHealth platform is dedicated to the wounds and healing field. A special module for women's wounds and Diabetic Foot Care will be developed in 2014.

ePrevention in LAC and Caribbean, Peru [12]: The primary benefit of telemedicine lies in facilitating remote access to prevention and care. With ePrevention and the Global Network of Women in Telemedicine at the Millennia2025 Foundation *We*Telemed [13], telemedicine courses are made available in remote communities to train healthcare professionals on dengue and tropical medicine.

5' (minutes) **Program, Spain** [14]: This program provides continuous capacity building to nurses through the development and use of short videos. Available in Spanish, the videos are planned to be included in online courses to benefit nurses in Central and Latin American countries.

In 2014-2015, the *WeObservatory* plans to expand its activities with new projects and additional partnerships to cover more health areas of interest to women and girls, in particular.

eApplications

The WeObservatory is supporting the development of innovative healthcare solutions that address multilingualism, a key barrier to women's access to healthcare information, as identified in the Women and eHealth Study 2010-2012. In partnership with UniversalDoctor, the Foundation launched the application "UniversalWomen" in September 2013, at the Women Leaders Forum, in New York [15]. This new multilingual mobile application, available for download, provides medical translations on pregnancy, childbirth and overall maternal health in six different languages (English, French, Spanish, Russian, Romanian, and Arabic) [16]. Expanding on this concept, the application "UniversalNurses" will

be launched during the Special Women Session at Medetel 2014, to support multilingual communication with patients. By end of 2014, additional applications will be made available with iPansement and VIH-TAVIE to address women healthcare.

Online Courses

The Women and eHealth Study 2010-2012 revealed that capacity building is a key factor for women's empowerment in telemedicine and eHealth. To facilitate learning, the WeObservatory is selecting online and massive open online courses (MOOCs) in English, Spanish and French accessible free of cost. A list of 30 courses in English [17] and six in French [18] is already available, and will be updated twice a year by the WeObservatory expert team.

In addition, the WeObservatory and WeTelemed provide links to a selection of telemedicine online courses in Spanish and French. In particular, the course on "Introduction to Health Informatics and Telemedicine", developed with the University of Technology of Panama, provides the basics in telemedicine for infectious diseases prevention in Panama and Latin America. Limited to 25 students, the first course received more than 300 inscription requests, demonstrating the vast training needs and high interest of healthcare workers in this area.

The WeObservatory Library

The Library is currently under construction and aims at providing articles, publications, videos, photos, and events related to women involved in eHealth and telemedicine. Currently, the *We*Observatory Share and Learn section provides access to 99 selected publications listed in the *Women and eHealth Study 2010-2012* [19], and links to recent events, such as the Women Leaders Forum 2013 [20]. This section is periodically updated and worthy of being consulted.

Conclusion

Launched in September 2012, the WeObservatory has developed several activities that promote the use of eHealth and telemedicine by women's associations and healthcare workers in rural and remote communities. Through a combination of projects, applications, online courses and the future Library, the WeObservatory is expected to become a unique innovative ePlatform at the service of women

and health professionals, within the global framework of the post UN Millennium Development Goals.

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Authors' Info

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