Digital health is not the future. It is already a reality. From telework to electronic health insurance cards and digital vaccination passes, digitalisation is very present in the health and social protection sector. The COVID19 pandemic undoubtedly accelerated the uptake of digital tools. At the AIM General Assembly, AIM members discussed, together with the European Commission and the Good Things Foundation, how digital developments should be steered to ensure that people’s health and well-being are put first and equal access for all is promoted.

Loek Caubo, President of AIM: “Digitalisation is an important development for access for everyone to good healthcare. But there can be no digitalisation without solidarity. Solidarity should be a guiding principle for all technological developments. In healthcare, we see that technology and internet access gaps exist between underserved population and everyone else. Underserved communities have and use technology, but digital health solutions are not tailored to older people or those with lower digital literacy.”

Digital as a Determinant of health

It is estimated that 10 million adults in the EU do not have the most basic digital skills. The key challenge is to boost the potential of digitalisation for better and healthier lives while preventing widening inequalities due to digital exclusion. The lack of accessibility to digital tools, sometimes missing infrastructure and equipment in some Member States, but also socio-economic factors threaten to worsen the digital divide. It is therefore essential to put digitalisation at the service of human relations and to invest in the social infrastructure, in addition to the digital one. As Emma Stone, from the Good Things Foundation, stated, “...an approach with people and relationships at the heart, that is supported at community level, is essential.”

Trust + Safety + Motivation + Skills = the perfect Equation for a proper and greater Uptake of digital Tools

A series of essential aspects need to be taken into account once access is guaranteed to make sure, digital tools will be more widely used in health care. The first one is ensuring trust, which is closely related to safety. In that regard, according to Andrzej Rys, Director at the European Commission, the European Health Data Space has the potential to allow individuals to safely access their data, ensure a proper framework for the use of data for research, innovation, and policy making, and to foster a genuine single market to make digital tools available across the union and make them “workable” for patients, payers and professionals. Once safety is guaranteed, the next steps are triggering the motivation and developing the skills to use the tools for both citizens and healthcare professionals.
Zero Clicks to Social Protection

All participants agreed that access to health and social security should not depend on a click. The example of Estonia was given, where the population increased 3% since the beginning of the war in Ukraine. Upon arrival, migrants get interview and from then on, all procedures happen automatically, and access is granted without any click. According to Rain Laane, CEO of EHIF, that is the way to be taken to ensure that digitalisation benefits all. Frederico Santos from Residencias Montepio underlined the need to integrate digitalisation into homes for elderly, thus improving the service provided to them. Wouter Kniest from ZN in the Netherlands stated that cooperation between AIM members and sharing information and experiences is important to learn from each other.

The International Association of Mutual Benefit Societies (AIM) is an international umbrella organisation of federations of health mutuals and other not-for-profit healthcare payers. It has 53 members from 28 countries in Europe, Latin America and Africa and the Middle East. AIM members provide compulsory/and/or supplementary health coverage to around 230 million people around the world, including close to 200 million people in Europe, on a not-for-profit basis. Some AIM members also manage health and social services. Collectively, they have a turnover of almost €300 billion. Members are either mutual or health insurance fund. They are private or public legal entities; solidarity based; not-for-profit orientations: surpluses are used to benefit the members; democratically elected members play a role in the governance of the organisation.

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