Building bridges for meaningful ehealth: aligning people, technology and practice through collaboration and knowledge sharing

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1. A lack of feedback on inhaler usage and a delayed perceived effect of medication were felt by individuals with asthma as reasons for poor adherence to their maintenance medication (*this thesis, chapter two*).

2. Seemingly minor procedures such as performing a weight and length examination can provoke stress and anxiety among children visiting the hospital (*this thesis, chapter four*).

3. The substantial variations in intervention, methodologies, and quality lead to considerable heterogeneity between studies when attempting to pool results to determine an overall effect. Are we comparing apples with pears? (*this thesis, chapter six*).

4. The Dutch version of the eHealth Literacy Questionnaire shows strong validity evidence and can be used by researchers and developers to identify eHealth literacy needs *(this thesis, chapter seven*).

5. When the problems of material and psychological access to digital health technologies have been solved, wholly or partly, the problems of structurally different skills and uses, as the other levels of access, become more operative (*Van Dijk, The Information Society, 2003*).

6. Users' are experts of their own experiences; designers are experts of the innovation process (*adapted from Sanders, CoDesign, 2008*).

7. The term 'patient' derived from the Latin word 'patior', to suffer or bear, is largely unfitting these days with active patient engagement, shared decision-making, and a focus on health instead of the presence or absence of a disease (*adapted from Neuberger, BMJ, 1999*).

8. Validity is not just about item content and psychometric properties; it is about the ongoing accumulation and evaluation of sources of validity evidence to provide supportive arguments for the intended interpretations and uses of test scores in each new context, however there is still little evidence of this thinking in the health sector (*Hawkins, Qual Life Res, 2018*).

9. Incorporating business development exploration early in the eHealth development process is crucial for finding sustainable funding models, addressing implementation challenges, and ensuring the technology delivers value to payers and other stakeholders.

10. Multidisciplinary collaborations between medical researchers and designers requires both parties to invest time and effort to learn each other's language, the healthcare context in which the research is performed, and the value of design and its process.

11. Doing a PhD is akin to cooking – it's not about blindly following a recipe but rather a journey of experimentation, tasting, adjusting and learning what works best while doing. The more freedom you have to experiment, the more surprising and innovative the dish becomes.

12. Saying 'no' to one opportunity or option is a wholehearted 'yes' to another.