

Health Informatics for Contact Tracing in a Pandemic Response: A Perspective

Lateefat Amao

*College of Basic and Applied Sciences, Healthcare Informatics
Middle Tennessee State University
Murfreesboro, TN, United States
lka2w@mtmail.mtsu.edu*

Misagh Faezipour*

*Department of Engineering Technology
Middle Tennessee State University
Murfreesboro, TN, United States
misagh.faezipour@mtsu.edu*

Abstract—This paper delves into the pivotal role of health informatics in pandemic response, focusing on the recent COVID-19 pandemic as a real-world case study. Contact tracing emerges as a crucial non-pharmaceutical strategy for containing infectious disease outbreaks, especially for highly contagious asymptomatic diseases like COVID-19. While experts agree on its potential to curb disease spread, assessing the effectiveness of traditional contact tracing methods can be challenging.

In this study, we embark on a comprehensive journey through peer-reviewed literature to explore how health informatics seamlessly integrates into the contact tracing process. We meticulously analyze its impact, from data collection and modeling to the delivery of healthcare services. By doing so, we shed light on the transformative role that health informatics plays in reshaping pandemic response and management. This paper offers a fresh perspective on the remarkable potential of health informatics in pandemic research and management, seeking to clarify its pivotal role.

Index Terms—Health informatics, Pandemic response, COVID-19, Contact tracing, Public health, Health technology.

I. INTRODUCTION

In the realm of pandemic response, time is of the essence, and precision is paramount – from swiftly identifying potential exposures to implementing effective control measures. This underscores the growing significance of health informatics, particularly within the domain of contact tracing [1]–[4]. Within the field of medical sciences, health informatics stands at the forefront of healthcare innovation, seamlessly merging the realms of public health and cutting-edge health technology [1], [2]. It has achieved remarkable milestones and offers practical solutions to the formidable challenges of infectious disease outbreaks [1], [3], [4]. This report embarks on a journey through this evolving landscape of healthcare technology, specifically focusing on the role of medical informatics in contact tracing.

Pandemics, exemplified by the unprecedented global crisis brought about by COVID-19, underscore the pressing need for advanced surveillance and containment strategies [3], [4]. While contact tracing has long been a staple in public health practices [1], [3], [5], [6], it has, in recent times, undergone a transformative evolution through the integration of health informatics. This evolution equips contact tracing with

the formidable tools of data analytics, digital technologies, and interconnected information systems, positioning it as a formidable weapon against modern infectious diseases.

As we delve deeper into this exploration, we are confronted with critical questions that demand our attention. This paper dissects these inquiries, offering a comprehensive perspective on the intricate intersection of health informatics and contact tracing. Through meticulous examination and thoughtful analysis of the current landscape, we aim to provide invaluable insights that extend beyond the immediate context of pandemic response, charting the course for future public health strategies. In this journey, we navigate the delicate equilibrium between health technological innovation, ethical considerations, and the overarching mission of safeguarding public health in the face of infectious threats. Within this context, we will also explore the potential challenges and opportunities.

A. Objective and Scope

This research investigates the pivotal role of health informatics in contact tracing within the challenging landscape of pandemic response. It seeks to provide a different perspective to understanding how health informatics and contact tracing intersect in the context of pandemic response. Our primary focus is on integrating health informatics into contact tracing models and the profound ripple effects and enduring consequences of this integration.

II. METHODOLOGY

This research employs a multifaceted methodology to investigate the intersection of health informatics and contact tracing for pandemic response. The approach integrates various research methods to provide a nuanced understanding of the technological, ethical, and societal dimensions inherent in utilizing health informatics for contact tracing during pandemics. It involves a thorough literature review, delving into peer-reviewed articles, and conference papers to establish a foundational understanding of health informatics historical development and contact tracing during pandemics.

A technological assessment follows the literature review to categorize and analyze the diverse technologies underpinning

health informatics in contact tracing. This includes examining digital tools, data analytic platforms, information systems, and emerging technologies to provide insights into the technological landscape that shapes effective contact tracing strategies. The research incorporates in-depth analyses of case studies from past pandemics to capture real-world applications and outcomes. Studying both successful implementations and challenges faced offers valuable insights into the practical implications of health informatics in contact tracing.

An ethical analysis scrutinizes the ethical considerations associated with using health informatics in contact tracing. Privacy safeguards, consent mechanisms, and data security protocols are evaluated, considering diverse cultural and legal frameworks to ensure a comprehensive understanding of the ethical implications. A comparative analysis explores variations in the implementation and outcomes of health informatics-based contact tracing initiatives across different regions, countries, or healthcare systems. This analysis considers infrastructure, cultural norms, and public trust.

The study also includes an assessment of the long-term impact of health informatics on contact tracing. By projecting potential technological advancements and trends, the research considers how these innovations may shape future public health strategies and response frameworks beyond the pandemic.

A. Research Questions

1. How do individuals and communities perceive and adopt health informatics-based contact tracing systems, and what factors influence their acceptance or resistance?
2. To what extent is health informatics integrated with existing public health systems to facilitate efficient contact tracing during pandemics?
3. What role does Health informatics play in facilitating rapid and accurate contact tracing, disease containment, early detection, and resource allocation? What strategies or solutions can address these challenges?
4. What is the long-term impact of utilizing health informatics for contact tracing, and how does it contribute to building resilient public health infrastructure beyond the immediate pandemic response?
5. How can health informatics be leveraged to enhance community participation in contact tracing efforts, and foster collaboration in pandemic response?

III. STUDY DESIGN AND FINDINGS

The study is designed around contact tracing applications of health informatics in pandemic response. It leverages available resources and data during the COVID-19 pandemic. COVID-19 had the world at a standstill; with this pandemic posing unprecedented challenges for even the best health systems, thus requiring innovative approaches for efficient healthcare delivery and real-time decision-making. We explored comprehensive literature reviews of peer-reviewed articles, government reports, and relevant databases for this study. Relevant

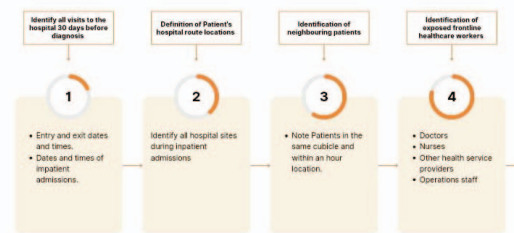


Fig. 1. COVID-19 Contact Tracing Algorithm Scheme

data for this report includes information on health informatics technologies, their applications, and outcomes in pandemic response.

Contact tracing involves a series of procedures that identify, examine and manage people exposed to an infectious disease [5]. It is a prerequisite for quarantining and further treatment. For COVID-19, the incubation period can be up to 14 days, which rarely goes past this (it stands as low as about one per cent of cases) [7]. Contact tracing is both an upstream and downstream activity, if we categorize it based on those who make contact with the disease - early victims and front-line health workers, and those it trickles down to. Health informatics systems played a pivotal role in data collection and surveillance, have helped achieve real-time data collection, and significantly improved contact tracing and existing surveillance efforts [5]. Several healthcare systems leveraged medical informatics and available data to develop algorithms to integrate hospital informatics systems with contact tracing models [8]. The table below shows an algorithm incorporating open data from separate hospital-based informatics systems, which perform different daily functions. This algorithm was programmed to augment the contact-tracing process of COVID-19 patients by identifying exposed neighbouring patients and healthcare workers and assessing their risk.

Health informatics interfaces with community health structures to improve contact tracing post-diagnosis. From mobile apps, and simple software, to wear-on devices, health informatics improved COVID-19 intervention, and, ultimately, outpatient care for infected persons [1]–[5]. This was especially important for the vulnerable populace and those with prior medical history; even reportedly asymptomatic people [5]. With health informatics now integrated into contact tracing, health professionals could recommend any social distancing, tests, based on available data, or address possible risks. The results of a socially intelligent artificial system (SAIS) model

as replicated in Figure 1 show that contact tracing and implementing the corresponding strategies - social distancing on the close contacts, infection test on the close contacts, and arousing risk perception from the close contacts - can significantly flatten the epidemic curve and reduce the scale of infections [5].

One perspective to consider when releasing populace-focused health technology is how people would interact with such: whether devices or algorithmic platforms [9], [10]. The design, which includes the user experience (UX) and user interface (UI), of health technology systems, also affects its adaptability by medical professionals and the general public [11]. It is a significant determinant of interaction and usability. In the heat of pandemic troubles, where technological innovation is an urgent need, health-tech UX is critical for usability and interaction; it influences how users perceive and interact with the contact-tracing software or digital tool, and may skew intervention impacts [9]–[13]. Countless cases involve experienced professionals making grave errors due to interfacing misunderstandings of healthcare-based software.

Health informatics was instrumental in early outbreak detection and response. Machine learning and data analytics were used for predictive modelling, forecasting reach of pandemic spread, resource allocation, and identifying the high-risk populace [1], [3], [4], [8], [14], [15]. Real-time dashboards facilitate better outcomes due to improved decision making. Telehealth solutions experienced exponential growth during the pandemic [16], [17]. It was one of the health technology wins of the pandemic. Virtual consultations ensured continuity of care while reducing transmission risks. With remote monitoring devices, healthcare providers could track patients' vital signs and carry out early intervention, reducing hospital admissions. Health informatics also improved the service delivery and performance of healthcare professionals, researchers, and policymakers.

A. Analysis and Broader context

The analysis of the study's findings reveals a significant paradigm shift in pandemic response strategies. Health informatics stands at the forefront of this advancement, powering precise and well-informed decision-making. Integrating information technologies in healthcare services, proper availability and processing of now readily available data and efficient information systems optimizes response coordination while enhancing public health outcomes during pandemics. The viability of health informatics in the pandemic response was evident in the many governments, and privately sponsored contact tracing technology rolled out during the panic. Apple, Google, the national institute of health (NIH), the national health service (NHS), and the Chinese government are some renowned proponents of adaptability [18].

Like any other type of health crisis, pandemic management pushes medical sciences to adapt and innovate amidst burning walls. With digital health tools, medical sciences can be

employed flexibly and creatively during pandemics and other health crises. New roles were designed post-pandemic, which factored in medical informatics into pandemic management. While full integration is still in early development, its prevalence is beyond doubt.

IV. IMPLICATIONS AND FUTURE RESEARCH

In response to the recent COVID-19, Ebola, and H1N1 pandemics, more advanced research is needed to accurately predict pandemics and equip public healthcare systems to demonstrate better management and control [2]. Data security and privacy concerns are still valid for future research and application [9], [12], [13], [18]. Ethical considerations regarding data privacy and security emerged, and finding a meeting point between public health needs and individual privacy became a significant challenge [10], [12]. There should be relevant management policies within health systems that develop robust frameworks and governance structures. Policymakers and public health officials must collaboratively work towards establishing ethical guidelines that balance the imperatives of public health with the privacy rights of individuals. Also, adopting new tech may come with regional variance, which could deviate depending on prevalent regional factors [9], [11], [14].

Future research should be directed at advanced predictive modelling techniques to enhance the accuracy and precision of predictive models. Also, a continuous study that measures long-term impact must be encouraged to inform pandemic management strategies and contact tracing methods. Health Technology and the design of health systems (software) and devices is a research area that should not be left out. Designing for medical purposes is unique and should be appropriately studied because of its sensitivity and scale of impact.

REFERENCES

- [1] N. Venkataraman, B. H. Poon, and C. Siau, "Innovative use of health informatics to augment contact tracing during the covid-19 pandemic in an acute hospital," *Journal of the American Medical Informatics Association*, vol. 27, no. 12, pp. 1964–1967, 2020.
- [2] B. E. Dixon, J. H. Holmes, and S. E. for the IMIA Yearbook Section on Managing Pandemics with Health Informatics, "Managing pandemics with health informatics," *Yearbook of Medical Informatics*, vol. 30, no. 01, pp. 069–074, 2021.
- [3] K. J. T. Craig, R. Rizvi, V. C. Willis, W. J. Kassler, and G. P. Jackson, "Effectiveness of contact tracing for viral disease mitigation and suppression: evidence-based review," *JMIR Public Health and Surveillance*, vol. 7, no. 10, p. e32468, 2021.
- [4] C.-E. Juneau, A.-S. Briand, P. Collazzo, U. Siebert, and T. Pueyo, "Effective contact tracing for covid-19: A systematic review," *Global Epidemiology*, p. 100103, 2023.
- [5] Y. Chen and H. Huang, "Modeling the impacts of contact tracing on an epidemic with asymptomatic infection," *Applied Mathematics and Computation*, vol. 416, p. 126754, 2022.
- [6] C. for Disease Control, Prevention *et al.*, "Interim us guidance for risk assessment and public health management of healthcare personnel with potential exposure in a healthcare setting to patients with coronavirus disease (covid-19)," 2020.

- [7] S. A. Lauer, K. H. Grantz, Q. Bi, F. K. Jones, Q. Zheng, H. R. Meredith, A. S. Azman, N. G. Reich, and J. Lessler, "The incubation period of coronavirus disease 2019 (covid-19) from publicly reported confirmed cases: estimation and application," *Annals of internal medicine*, vol. 172, no. 9, pp. 577–582, 2020.
- [8] L. Shahmoradi, "Integration of health information systems to promote health," 2016.
- [9] M. Walrave, C. Waeterloos, and K. Ponnet, "Ready or not for contact tracing? investigating the adoption intention of covid-19 contact-tracing technology using an extended unified theory of acceptance and use of technology model," *Cyberpsychology, Behavior, and Social Networking*, vol. 24, no. 6, pp. 377–383, 2021.
- [10] L. Simko, R. Calo, F. Roesner, and T. Kohno, "Covid-19 contact tracing and privacy: studying opinion and preferences," *arXiv preprint arXiv:2005.06056*, 2020.
- [11] T. Li, C. Cobb, S. Baviskar, Y. Agarwal, B. Li, L. Bauer, J. I. Hong *et al.*, "What makes people install a covid-19 contact-tracing app? understanding the influence of app design and individual difference on contact-tracing app adoption intention," *arXiv preprint arXiv:2012.12415*, 2020.
- [12] S. J. Juneidi, "Covid-19 tracing contacts apps: technical and privacy issues," *Int. J. Advance Soft Compu. Appl*, vol. 12, no. 3, pp. 25–44, 2020.
- [13] J. Abeler, M. Bäcker, U. Buermeyer, H. Zillesen *et al.*, "Covid-19 contact tracing and data protection can go together," *JMIR mHealth and uHealth*, vol. 8, no. 4, p. e19359, 2020.
- [14] M. Villius Zetterholm, Y. Lin, and P. Jokela, "Digital contact tracing applications during covid-19: a scoping review about public acceptance," in *Informatics*, vol. 8, no. 3. MDPI, 2021, p. 48.
- [15] W. H. Organization *et al.*, "Public health criteria to adjust public health and social measures in the context of covid-19: annex to considerations in adjusting public health and social measures in the context of covid-19, 12 may 2020," World Health Organization, Tech. Rep., 2020.
- [16] T. K. Manyati and M. Mutsau, "Exploring the effectiveness of telehealth interventions for diagnosis, contact tracing and care of corona virus disease of 2019 (covid19) patients in sub saharan africa: a rapid review," *Health and Technology*, vol. 11, pp. 341–348, 2021.
- [17] S. Keesara, A. Jonas, and K. Schulman, "Covid-19 and health care's digital revolution," *New England Journal of Medicine*, vol. 382, no. 23, p. e82, 2020.
- [18] T. Sharon, "Blind-sided by privacy? digital contact tracing, the apple/google api and big tech's newfound role as global health policy makers," *Ethics and information technology*, vol. 23, no. Suppl 1, pp. 45–57, 2021.