
Foreword

Reima Suomi*

University of Turku,
20014 Turun Yliopisto, Finland
Email: reima.suomi@utu.fi
*Corresponding author

Raija Halonen

University of Oulu,
Oulun Yliopisto, PL 8000, 90014, Finland
Email: raija.halonen@oulu.fi

Mirella Cacace

Catholic University of Applied Sciences Freiburg,
Karlstrasse 63, 79104 Freiburg, Germany
Email: mirella.cacace@kh-freiburg.de

Hongxiu Li

Tampere University,
Korkeakoulunkatu 8, 33721 Tampere, Finland
Email: hongxiu.li@tuni.fi

Biographical notes: Reima Suomi is a Professor of Information Systems Science at the University of Turku, Finland, and a Part-Time Professor at the Huazhong Normal University, Wuhan, Hubei, China. He is a docent of University of Oulu, Finland. He has had longer research periods abroad at University of St. Gallen, Switzerland and University of Münster, Germany. His main research interests focus on healthcare information systems and inter-organisational information systems, e-government as well as on different governance structures for information systems management. He has over 400 scientific publications, in addition to his eager activity in popular press. For 20 years, he has headed the work on the conference series Well-being in the Information Society (WIS).

Raija Halonen acts as an Adjunct Professor at the Unit of Empirical Software Engineering in Software, Systems and Services (M3S) at the Faculty of Information Technology and Electrical Engineering (ITEE) in the University of Oulu, Finland. Earlier she has worked both in the public sector and in private IT enterprises. Her research has focused on information systems, and especially usability from the users' point of view, and she is interested in human being and how they benefit and experience the systems. She has published on ICT and social inclusion while continuing research on information systems in such topics as people with dementia, Chinese elderly at home, pervasive elderly

care, care for cancer patients, care for people with dementia – among others. She has also worked at the Centre of Innovation and Structural Change, University of Galway, Ireland.

Mirella Cacace is an economist and Professor of Health Systems and Health Policy at the Catholic University of Applied Sciences in Freiburg, Germany. Her research focuses on new institutional economics and efficiency and equity in health systems, also from an international perspective. Her most recent works deal with the academisation of nursing staff in the German healthcare system as well as the consequences of the COVID-19 pandemic on healthcare and nursing systems. Previously, she was a health policy analyst at RAND Europe and a Commonwealth Fund Harkness Fellow at Columbia University, New York.

Hongxiu Li is an Associate Professor (Tenure Track) in Business Data Analysis at the Unit of Information and Knowledge Management in the Faculty of Management and Business, Tampere University. She holds a PhD in Economics and Business Administration from the University of Turku in the field of information systems. Her primary research interests focus on user behaviour, digital services, business data analytics, and data-driven value creation. Particularly, she is interested in discovering how value can be extracted from digital services as well as big data. Her research has been published in the journals of *Computer & Education*, *Computers in Human Behavior*, *Internet Research*, *Decision Support Systems*, *Information & Management*, *European Journal of Information Systems*, and *Information Systems Journal*.

Respect is a fundamental aspect of healthy and positive human relations, contributing to the overall well-being of individuals and fostering positive social environments. All too often we anyway see missing or insufficient respect leading to malfunctions, compromised effectiveness, social and mental problems, broken communication – just to mention a few examples – in organisational and personal life.

Respect is a foundation for trust. When individuals treat each other with respect a sense of reliability and dependability is established. Trust is pivotal for the success of any relationship. Respectful communication is open and effective. When people feel respected, they are likely to express themselves openly and honestly, leading to effective mutual understanding and resolution of conflicts. Respect encourages collaboration and teamwork. In a respectful environment, people are willing to work together towards common goals, share ideas, and contribute their skills and knowledge.

When conflicts arise, a base of respect enables individuals to address issues in a constructive manner. Respect is essential for creating inclusive environments where individuals of diverse backgrounds, cultures, and perspectives feel welcome and valued. Respectful communication and consideration for others' perspectives facilitate the resolution of conflicts with minimal negative impact. Being treated with respect is appreciated by everyone. When individuals feel valued and respected, it positively influences their self-esteem and confidence.

At the individual level, feeling respected and valued can reduce stress, anxiety, and negative emotions, promoting a positive and fulfilling life. In the workplace, respect is crucial for professional success. It contributes to positive work environments, increases job satisfaction, and promotes productivity and creativity. Societies and communities that foster respect tend to be more harmonious and cooperative. A culture of respect

contributes to the overall well-being of communities by fostering a sense of unity and shared values.

Well-being in the Information Society (WIS) conference in its 8th edition concentrated on respect as an integral component of healthy and wellbeing life. Out of the 21 papers presented in the conference, three are now published in this special issue as completely new editions, in addition we have one external keynote type contribution.

The need for respect is richly present in basic clinical healthcare. An important starting point for respect is listening of the patient, and her/his ultimate authorities over the issues that touch upon own health and wellbeing. Patient-centred healthcare is a part of respectful healthcare, and it is mirrored in respecting an individual's autonomy, which involves obtaining informed consent before any treatment or intervention.

Cultural sensitivity is one part of respect: healthcare providers should be aware of and respect cultural differences among individuals. Respect is also demonstrated in treating all individuals equally and without discrimination. Healthcare providers should not discriminate based on factors such as age, gender, race, ethnicity, religion, or socioeconomic status.

A respectful environment encourages individuals to provide feedback and voice their concerns. Healthcare providers should have mechanisms in place to handle complaints and feedback in a fair and constructive manner. Respect is inherent in professional conduct. It includes maintaining a positive attitude, being punctual, and treating colleagues, patients, and their families with courtesy and consideration.

Further, a respectful environment encourages individuals to provide feedback and voice their concerns. Healthcare providers should have mechanisms in place to handle complaints and feedback in a fair and constructive manner.

In their article 'Respecting the patients' needs: the accountability shared model', Nilmini Wickramasinghe and Rima Gibbings discuss how patients' needs are a cornerstone for working healthcare and how patient's needs must be respected – an often forgotten yet integral part of patient – healthcare professional communication.

Waiting is always a respect destroying experience – even when it has good reasons. Riitta Söderlund delves in her article 'Waiting times in healthcare: a literature review' on the literature of waiting times in healthcare. The findings demonstrate that humans are often handled as entities in a mathematical model when waiting times are researched, or waiting is approached from a medical point of view – waiting seldom improves medical conditions. The psychological effects of waiting clearly still need much more attention – both in health and social care as well as generally.

In their article 'Categorising the personal health record – a systematic review and analysis of the term's use in the literature', Jani Koskinen and Minna M. Rantanen focus on the core of healthcare: personal health records. They clarify the jungle of terms describing the basic patient information in healthcare. The multitude of descriptions for the key component of healthcare information systems already shows less than perfect state of the discipline.

In the fourth article 'Reflections on social learning environment and 21st century learning skills', Brita Somerkoski, Päivi Granö and Teija Koskela show – among other things – that respectful behaviour should be integrated already to education at all levels, and at all disciplines.

We thank all the authors for sharing their knowledge with us. We also thank the reviewers that have contributed to the quality of the articles. A big thank goes also to the journal editorial team, first and foremost for Editor-in-Chiefs M.A. Dorgham and Priti Das, and to Alexandra Starkie, who has continuously and altruistically supported us in hundreds of details needing attention in the preparation of the special issue.