## **Definitions of the contextual criteria clusters**

Criteria Cluster	Definition
10- Data-protection compliance	Assesses whether the tool explicitly reports being compliant with the relevant data privacy and protection laws (e.g., GDPR, HIPAA), and the treatment of any personal data is compatible with the Patient Data Act, Personal Data Act, and other applicable privacy laws, and compliantly allows for data sharing and segregation for research use.
11- Safety regulatory compliance	Assesses whether the tool's provider clearly identifies the risks that its management may pose for user safety and has gone through the proper certification processes to ensure its safety; and the tool contains a disclaimer that the information provided/content does not replace a health care professional's judgment (when applicable).
12- Interoperability and data integration	Assesses whether the tool allows for interoperability, data integration and exchange of data with other apps, e-tools, wearable devices, electronic health records (ability to exchange data with other systems on a technical and policy level, and with other users such as clinicians or care givers).
13- Cultural requirements	Assesses whether the tool takes into account culturally relevant factors (e.g., different languages and alphabets, specific religious or cultural requirements or restrictions, gender considerations).
14- Affordability	Assesses whether the tool is affordable taking into account the local socioeconomic context, and whether it is clear who pays for it and how they pay.
15- Cost-benefit	Assesses whether a cost-benefit analysis was performed and led to positive results. I.e., the balance between the costs and benefits arising from the tool's utilization. This refers to the tool's direct costs (purchase price, subscription, licensing), but may also include costs associated with the tool's selection, staff training, setting up support mechanisms, and appropriate governance.
16- Implementatability	Assesses whether the tool fits well into existing workflows and does not require additional resources (workforce, hardware, software) to scale-up and to enable it to function properly; and whether it fits well into the existing infrastructure and does not require investment in additional infrastructure to enable it to function properly (This refers to physical infrastructure such as electricity, access to power, connectivity etc. in the local context).

Source: Jacob et al. A sociotechnical framework to assess patient-facing eHealth tools: results of a modified Delphi process. npj Digit. Med. 6, 232 (2023). <a href="https://doi.org/10.1038/s41746-023-00982-w">https://doi.org/10.1038/s41746-023-00982-w</a>