Correction to: The Role of Human Computer Interaction in Consumer Health Applications: Current State, Challenges and the Future

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The original version of the chapter was inadvertently published with a few mistakes in the following paragraph on page 264. The chapter has now been corrected and approved by the authors.

The corrected paragraph is given here.

When designing user interfaces for these groups, there are several key considerations to address (Older Americans 2012). Disparities in education and income levels are intertwined with health disparities. Approximately 16% of African Americans and Hispanics live below the federal poverty line. 37.7% of Hispanics and 16.1% of African Americans aged 25 and older did not complete high school (Healthy Aging Improving and Extending Quality of Life Among Older Americans). It is important that the design of health technology interfaces facilitates bridging the digital divide and embracing disenfranchised populations or those who are medically underserved. Several studies have demonstrated creative designs targeted to the needs and preferences of a variety of populations. These studies have shown that interfaces that contain culturally appropriate content are more effective than purely language translations (Healthy Aging Improving and Extending Quality of Life Among Older Americans; Hedden and Gabrieli 2004).

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