

D2.4 - Interactive stakeholder map for cancer literacy in Europe

2026



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Version Tracker

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12/12/2025	0.1	First draft
08/01/2025	0.2	Revision
23/01/2026	0.3	Section 4
27/01/2026	0.4	Section 5
30/01/2026	0.5	Complete revision and layout editing
20/02/2026	0.6	Internal project revision
23/02/2026	1.0	Final version ready for submission



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List of Abbreviations

- **CPD** – Continuous Professional Development
- **CURTAIN** – Beating Cancer Inequalities through Literacy in Europe
- **D** - Deliverable
- **EU** – European Union
- **M** - Month
- **T** - Task
- **WHO** – World Health Organization
- **WP** – Work-Package



Executive Summary

The CURTAIN project aims to strengthen cancer literacy across Europe, to reduce inequalities in cancer prevention, early detection, treatment and quality of life.

Within this context, this deliverable, *D2.4 Interactive stakeholder map for cancer literacy in Europe*, describes the methodology, results, and implementation details of a comprehensive overview of relevant stakeholders in the continuum of cancer care and research in Europe.

This deliverable is composed by an interactive digital European map that visualises the location and key characteristics of the final stakeholder selection – the **Interactive European Cancer Literacy Stakeholder Map** – accompanied by this lay report describing the mapping and selection process. Together, these components provide a clear and accessible overview of the organisations, institutions and networks engaged in or relevant to CURTAIN's objectives, while reinforcing transparency and shared understanding within and beyond the project consortium.

The interactive map serves as a practical and analytical tool, enabling users to explore the geographic distribution and thematic focus of stakeholders involved in cancer literacy initiatives across Europe. The accompanying narrative report explains how stakeholders were identified, assessed and selected, outlining the criteria applied and the methodological steps followed. This combined approach ensures that both technical and non-technical audiences can understand not only who the stakeholders are and where they are located, but also why they are relevant to the CURTAIN project and how they contribute to its overarching goals. Thus, the deliverable further aims to situate the findings within the broader project goals of increasing health literacy and reducing disparities in cancer outcomes throughout Europe under the EU4Health framework.

Through the documentation and visualisation of the stakeholder landscape, this deliverable supports strategic collaboration, informed decision-making and effective communication throughout the project lifecycle. It provides a foundation for future engagement activities, helps identify gaps and opportunities for strengthening networks, and contributes to the long-term sustainability and impact of CURTAIN's work. As such, it represents a key resource for project partners, policy makers and other interested actors seeking to advance cancer literacy in an equitable and coordinated manner across Europe.



Deliverable Introduction

Deliverable objective and scope

The present report D2.4 *Interactive stakeholder map for cancer literacy in Europe* objectives and scope encompass the systematic identification, categorisation and representation of stakeholders relevant to cancer care and research in 9 European countries – across the CURTAIN partner regions and beyond.

The purpose of this deliverable is to provide a transparent, accessible and user-friendly overview of stakeholders engaged across Europe in advancing cancer literacy as part of CURTAIN's mission to reduce inequalities in cancer prevention, early detection, treatment, and quality of life. By rendering stakeholder information in a dynamic spatial format alongside narrative context, this deliverable supports evidence-based decision making, strengthens consortium and external partner engagement, and enhances the accessibility of project insights to diverse audiences.

Its intended audience includes project partners and consortium members, policy makers and public health practitioners, civil society organisations and advocacy groups, academic researchers and evaluators, as well as any external stakeholders interested in the CURTAIN project's implementation and impact.

The main recommendations include leveraging the interactive map for ongoing monitoring and communication, expanding outreach to under-represented stakeholder groups to strengthen inclusivity, and using the documented methodology as a template for future stakeholder mapping activities within CURTAIN and related initiatives. By doing so, the project can continue to foster a more connected, informed and equitable ecosystem for cancer literacy across Europe.

Relation to other WPs and deliverables

The present deliverable is closely linked with the following WPs and deliverables:

- **WP2 Mapping Cancer Literacy Resources, Stakeholders, Initiatives, relevant KPIs:** This deliverable complements the remaining outputs of WP2, namely D2.1 *Mapping of the current state of cancer literacy facilitators and gaps report*, D2.2 *Regional and platform-specific patterns of cancer-related disinformation report*, D2.3 *Report on the needs, capacities and education/training programs in cancer literacy in Europe* (Month 4, December 2025), and D2.5 *Comprehensive KPI Report for Cancer Literacy Programs* (Month 6, February 2026). Taken together,

these deliverables provide a comprehensive overview of the current cancer literacy landscape in Europe and serve as key evidence base for activities across the CURTAIN project.

- **WP4 Cancer Literacy among Citizens and Patients and WP5 Cancer literacy education of Health Care Professionals and relevant stakeholders:** The stakeholder identification directly supports activities aimed at improving cancer literacy among citizens, patients, healthcare professionals, and other relevant stakeholders by identifying key actors across the cancer research and care continuum who are relevant for engagement, capacity building, and dissemination activities.
- **WP5 - T5.5 Exploring organizational cancer literacy in selected countries:** In particular, the results of this work directly inform the establishment of the CURTAIN's International Stakeholder Group. The mapped stakeholders support the identification and selection of candidate organisations across participating countries, ensuring balanced representation across the penta-helix groups.
- **WP6 Developing a Virtual Cancer Literacy Library and Policy Guidelines for Cancer Literacy:** The Interactive Digital European map will be integrated into the Virtual Cancer Literacy Library to be developed under T6.1. Additionally, the stakeholder mapping informs *T6.2 Recommendations for policy action regarding cancer literacy in Europe* by supporting the development of policy recommendations that strengthen coordination on cancer literacy across national and European levels.
- **WP7 Raising Awareness and Ensuring Sustainable Communication in Cancer Literacy:** The list of stakeholders identified at national and European levels provides a critical resource for the design of awareness-raising campaigns and the definition of strategies for sustainable communication in cancer literacy.

Content of the deliverable

This deliverable offers a comprehensive lay report detailing the process of mapping, selection and development of an interactive digital European map, that visualises the location of the final stakeholder selection for the CURTAIN project – the **Interactive European Cancer Literacy Stakeholder Map**.

It articulates the methodology used to compile and curate stakeholder data, to document the criteria and processes applied in stakeholder selection, and to present detailed descriptions of their point of interest in the continuum of cancer care and research, as well as their geographic distribution.



The deliverable further aims to situate these findings within the broader project goals of increasing health literacy and reducing disparities in cancer outcomes throughout Europe under the EU4Health framework.

Methodologically, the deliverable reflects a structured approach to stakeholder mapping and analysis, drawing on a combination of desk research, consultation with partners, review of existing networks and evaluation of stakeholder relevance and engagement potential. Stakeholders were identified based on their roles in cancer literacy, prevention and care ecosystems, then classified according to type and geographic location.

The interactive map aggregates this information, enabling users to explore stakeholders' spatial relationships and thematic contributions, while the accompanying lay report explains the selection logic, data sources and validation steps undertaken throughout the process.



CURTAIN's Stakeholder mapping

Rationale for stakeholder mapping

Stakeholder mapping represents a core component of the CURTAIN project's strategy to strengthen cancer literacy and reduce inequalities across Europe. Given the complexity of cancer prevention, care and survivorship, progress in this area depends on the coordinated involvement of a wide range of actors operating at local, national and European levels. Stakeholder mapping – consisting of the identification and visualization of relevant stakeholders in a defined context [1] – was therefore undertaken to systematically identify, analyse and engage organisations and individuals whose expertise, influence or reach is relevant to CURTAIN's objectives, ensuring that project activities are informed by diverse perspectives and grounded in real-world practice.

The rationale for conducting stakeholder mapping within CURTAIN is rooted in the recognition that cancer literacy is shaped by multiple interconnected systems, including healthcare delivery, education, policy making and community engagement.

Mapping stakeholders enables the project to gain a structured overview of existing capacities, networks and initiatives, while also identifying gaps and under-represented groups. This process supports more targeted engagement, reduces duplication of efforts and fosters synergies between actors working on complementary aspects of cancer literacy. Moreover, a transparent mapping exercise enhances accountability and facilitates knowledge exchange within the consortium and with external partners.

Definition and typology of CURTAIN's stakeholders

Stakeholders refer to individuals, groups, and organisations that possess some form of interest, influence, power, or significance in relation to an organisation, policy, or project [2]. In the context of CURTAIN, stakeholders play a critical role in advancing cancer literacy by translating evidence into practice, shaping public understanding and supporting individuals in navigating cancer-related information and services. In particular, stakeholders contribute through activities such as awareness raising, capacity building, policy advocacy, service delivery and community outreach. Their involvement strengthens the relevance and sustainability of project outputs by ensuring alignment with existing initiatives and local contexts.

By systematically mapping and engaging these actors, CURTAIN aims to build a collaborative ecosystem that supports equitable access to cancer-related knowledge and empowers individuals and communities across Europe.

For the purposes of the CURTAIN project, stakeholders are defined as organisations, institutions or networks that have a direct or indirect role in promoting, supporting or providing cancer care and research, thus influencing cancer literacy and related activities. This includes public authorities, healthcare providers, research and academic institutions, civil society organisations, patient and survivor groups, professional associations and advocacy networks.

In line with the approach adopted by the Mission Cancer project ECHoS [3], CURTAIN applies the penta-helix model as the conceptual framework for stakeholder identification and classification. This model depicted in Figure 1 recognises that addressing complex societal challenges such as cancer requires coordinated action across 5 interdependent spheres: public authorities, academia & research, industry and business, civil society, and citizens.

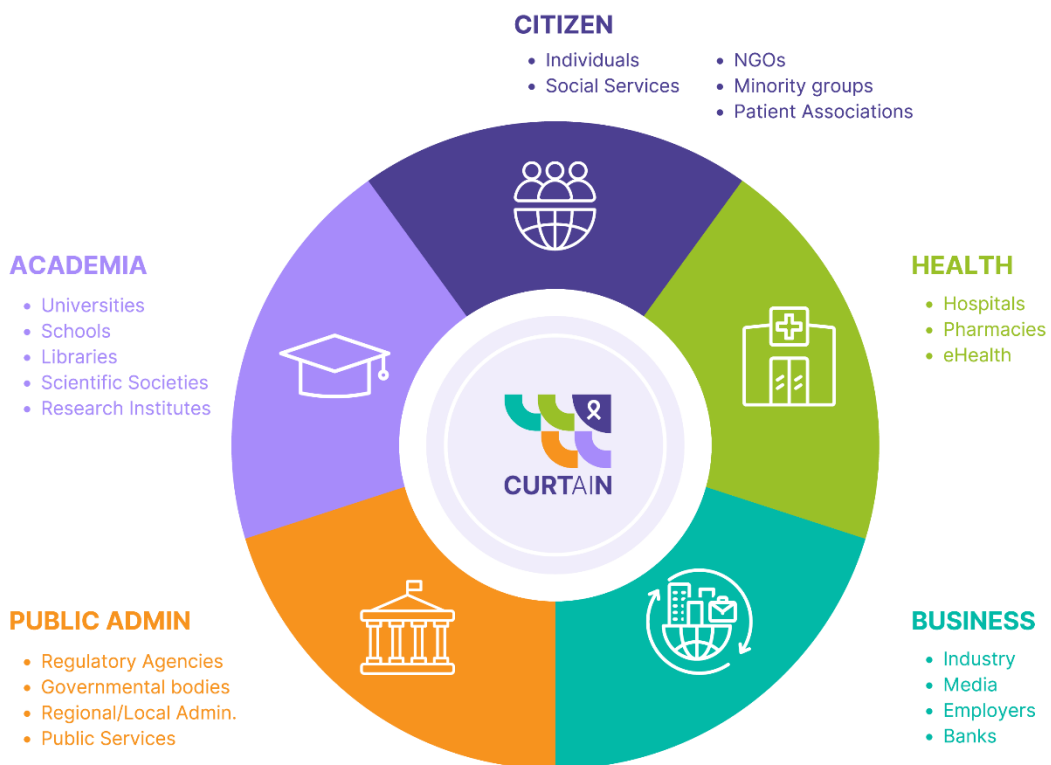


Figure 1. The Penta-Helix framework in CURTAIN, adapted from the ECHoS project.



The use of the penta-helix model supports a systemic understanding of how different stakeholder groups interact and contribute to cancer literacy outcomes. Rather than treating stakeholders as isolated actors, the model highlights their complementary roles and the importance of cross-sector collaboration. This approach is particularly relevant for cancer literacy, which spans health systems, education, digital environments, social support structures and governance frameworks. Applying a shared model also facilitates alignment with other EU-funded initiatives under the Cancer Mission and enhances the potential for interoperability and collaboration beyond the CURTAIN project.

Public authorities represent the first helix within the model and play a central role in shaping the enabling environment for cancer literacy. This group includes European, national, regional and local public bodies responsible for health, education, social affairs and digital policy. Their contributions include policy development, regulation, funding allocation and the integration of cancer literacy into public strategies and programmes. Within CURTAIN, public authorities are key stakeholders for ensuring that project outputs are aligned with existing policy priorities, scalable within public systems and sustainable beyond the project lifetime. Their involvement also supports the translation of evidence into policy and practice.

The second helix encompasses **academia and research organisations**, including universities, research institutes and knowledge centres active in cancer research, public health, behavioural sciences, health communication and digital innovation. These stakeholders contribute scientific expertise, methodological rigour and evaluative capacity to the project. They play a critical role in generating evidence on cancer literacy needs, assessing the effectiveness of interventions and supporting the development of evidence-informed tools and approaches. In the context of stakeholder mapping, research actors also act as knowledge brokers, linking policy, practice and innovation across sectors and regions.

Industry and business actors form the third helix and include private sector organisations involved in healthcare technologies, digital platforms, pharmaceuticals, media, communication and education services. Their relevance to cancer literacy lies in their capacity to develop, scale and disseminate tools, services and innovations that support access to information and care. Within CURTAIN, industry stakeholders are considered in terms of their potential to contribute responsibly to cancer literacy objectives, particularly in areas such as digital health solutions, data visualisation and user-centred design. Engagement with this helix is framed by principles of transparency, ethical conduct and public value.



Civil society organisations constitute the fourth helix and include non-governmental organisations, charities, patient advocacy groups, professional associations and community-based organisations. These stakeholders are often closest to the populations most affected by cancer inequalities and play a vital role in outreach, capacity building and trust-building. Civil society actors contribute practical knowledge of community needs, cultural contexts and barriers to cancer literacy, and are instrumental in ensuring that interventions are inclusive and accessible. Their involvement strengthens the relevance and legitimacy of CURTAIN activities, particularly for vulnerable or under-served groups.

Citizens, including patients, cancer survivors, carers and members of the general public, form the fifth helix of the model. This group represents both the primary beneficiaries of cancer literacy initiatives and active contributors through lived experience and participatory engagement. Recognising citizens as stakeholders acknowledges their role in co-creating knowledge, shaping priorities and evaluating the real-world impact of interventions. In CURTAIN, the inclusion of the citizen helix reinforces a people-centred approach to cancer literacy and supports the project's commitment to empowerment, equity and responsiveness to lived realities.

By structuring stakeholder mapping around the penta-helix model, CURTAIN captures the diversity and interconnectedness of actors involved in cancer literacy across Europe. This approach enables a balanced representation of institutional, professional and experiential perspectives and supports the development of collaborative pathways across sectors, positioning CURTAIN within a broader European effort to foster systemic, inclusive and mission-driven responses to cancer.



Methodological framework

The methodological framework adopted for stakeholder mapping and selection in the CURTAIN project is grounded in a set of interrelated assumptions that reflect the complexity of cancer literacy and its determinants across Europe. The framework is designed to ensure that stakeholder identification is systematic, inclusive, and responsive to diverse needs, while remaining adaptable to different national and regional contexts.

It combines three main assumptions: (1) a contextual perspective, (2) a life-course approach to information needs, and (3) the penta-helix model for stakeholder classification, thereby providing a robust and policy-aligned basis for the development of the interactive digital European map.

Contextual perspective

The first assumption underpinning the methodology is contextual. Cancer literacy does not develop in a vacuum, but is shaped by social, cultural, economic and institutional environments. Health system organisation, levels of digitalisation, education systems, linguistic diversity and existing cancer policies all influence how information is produced, accessed and used. The CURTAIN methodology therefore recognises the importance of situating stakeholders within their specific national and regional contexts. This contextual sensitivity guided both the identification of stakeholders and the interpretation of their roles, ensuring that the mapping reflects real-world conditions rather than abstract or uniform models of engagement.

Life-course approach

The second assumption is based on a life-course approach, acknowledging that cancer-related information needs evolve over time and differ according to life events, roles and experiences.

This approach places individuals at the centre of the mapping exercise and distinguishes between three primary groups: citizens, patients, and healthcare professionals. For citizens and patients, cancer literacy needs were analysed along a continuum that reflects the typical prevention, care, and survivorship pathway.

For healthcare professionals, information needs were considered across stages of professional development, from initial education to continuous professional training.



This life-course perspective informed both thematic categorisation of stakeholders and the assessment of their relevance to different phases of the cancer journey.

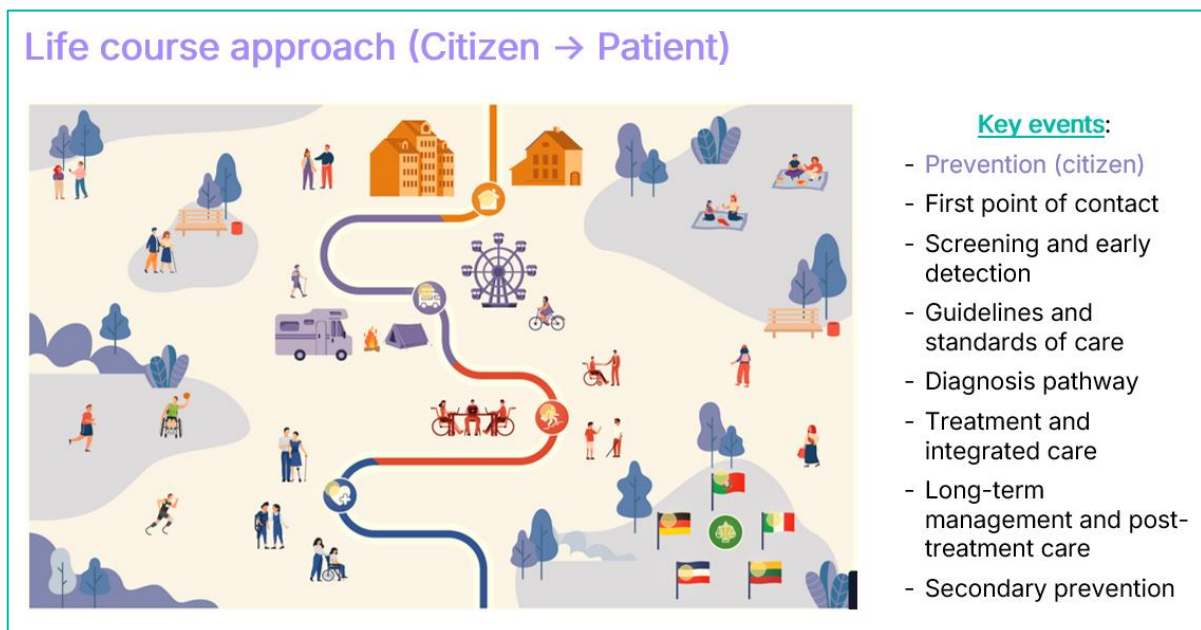


Figure 2. Life-course approach based on key events – for citizens and patients. Visualization of a course approach from the Erasmus+ YoungCare project [4].

For **patients and citizens**, stakeholder relevance was assessed in relation to key stages of the cancer care continuum as shown in Figure 2. These stages, discussed and approved by the clinical representatives in the consortium, include prevention activities targeting the general population, first points of contact with the health system, screening and early detection programmes, access to guidelines and standards of care, diagnostic pathways, treatment and integrated care, long-term management and post-treatment support, and secondary prevention.

Stakeholders were mapped according to their involvement in one or more of these stages, recognising that many actors operate across multiple phases.

This approach enables a more granular understanding of where support structures exist, where information flows are strong, and where gaps may persist along the patient and citizen journey.



ensure comprehensive coverage of the cancer literacy ecosystem. Stakeholders were first identified based on their relevance to the life-course stages and contextual settings described above, and then classified according to their position within the penta-helix framework. This dual approach allowed for cross-analysis between functional roles, life-course relevance and sectoral affiliation, enhancing the analytical depth of the mapping exercise.

In summary:

Methodologically, the stakeholder mapping process involved iterative steps of identification, categorisation, validation and refinement. Desk research, partner inputs and review of existing networks were used to compile an initial stakeholder pool. Stakeholders were then assessed against contextual relevance, life-course alignment and penta-helix classification. Validation was supported through consortium discussions and, where appropriate, cross-checking with external sources. The resulting dataset forms the basis of the interactive digital European map, enabling users to explore stakeholders by geography, thematic focus and stakeholder type.

Overall, this methodological framework ensures that stakeholder mapping within CURTAIN is people-centred, context-aware, and system-oriented. By integrating life-course assumptions with the penta-helix model, the approach supports a nuanced representation of the cancer literacy landscape and provides a solid foundation for strategic engagement, collaboration and future project activities.




Results of the stakeholder mapping

Following the methodological framework presented in Section **Methodological framework**, consortium partners conducted the stakeholder identification exercise between Months 2 and 4 of the CURTAIN project (October-December 2025). Partners were invited to systematically identify relevant stakeholders in a template provided by SHINE 2Europe, responding to the following guiding question:

- ▶ *WHO are the relevant stakeholders from the penta-helix at each stage of the life course of the specific target group, at national level and across Europe?*

This process resulted in a consolidated list of key stakeholders spanning the cancer research and care continuum. In total, the exercise resulted in the identification of more than 150 stakeholders at the international level and more than 1000 at the national level. Submissions were reviewed by the SHINE's team, and duplicates were removed.

 The stakeholder list collected as Milestone #9 (December 2025) publicly available in the CURTAIN project website at <https://curtainproject.eu/public-deliverables/>. This list of stakeholders will be iteratively updated throughout the project's lifetime.

The list encompasses stakeholders identified at national level by CURTAIN consortium partners in **nine European countries** (Belgium, Bulgaria, Ireland, Italy, Moldova, Montenegro, Portugal, Romania, and Ukraine), as well as stakeholder operating at **European level**.

Key patterns, limitations, gaps, and strengths

Overall, the stakeholder identification exercise successfully achieved its aim of generating a comprehensive and policy-relevant overview of key stakeholders involved in cancer literacy in Europe. The methodological framework, comprising of a contextual, life-course-oriented and penta-helix-based approach, led to a robust and



diverse stakeholder landscape that reflects the complexity of cancer research and care systems at both national and European level.

The context-specific national analyses generated a richness of stakeholders that would not have been sufficiently captured through an exclusively European-level exercise. This finding confirms the added value of embedding stakeholder identification within national health structures, governance arrangements, and cancer pathways, and supports the methodological decision to combine national and European perspectives.

Across countries, stakeholders operating across the full cancer care continuum – i.e., relevant at all stages of the life-course – were generally easier to identify than those primarily active at specific life-course stages. Nevertheless, the adoption of a life-course approach proved to be a key strength of the mapping exercise, as it enabled the identification of stakeholders with relevance at critical moments of the cancer pathways, such as diagnosis, as well as within the professional development trajectories of healthcare professionals, including Continuous Professional Development (CPD).

Stakeholders within the Public Administration penta-helix category were the most challenging to identify consistently across countries. This may reflect the complexity and fragmentation of governance structures in cancer prevention and care, as well as the often indirect role of policy makers in cancer literacy initiatives. This observation highlights an important gap and reinforces the need for targeted strategies to strengthen the involvement of public authorities and policy-level actors in subsequent project activities.

Given that the CURTAIN project does not focus on specific types of cancer, the identification of patient and citizen associations, as well as professional associations, was necessarily broad. While several cancer associations were mapped, particularly those with higher public visibility and media presence, often linked to high-prevalence cancers such as breast cancer, the resulting list cannot be considered exhaustive. Consequently, advocacy groups and professional associations representing rarer or less visible cancer types may be underrepresented.

A methodological limitation relates to the classification of stakeholders within the penta-helix model. In some cases, stakeholders perform multiple roles and could plausibly be assigned to more than one category. In such instances, the categorisation provided by consortium partners was retained, recognising their contextual expertise and ensuring consistency with national perspectives.



The patterns, limitations, gaps, and strengths identified through this exercise provide critical input for the next phases of the CURTAIN project, informing both the refinement of the interactive stakeholder map and the design of targeted stakeholder engagement strategies.

The next section describes the design and implementation of the stakeholder mapping in an **Interactive European Cancer Literacy Stakeholder Map**.

The Interactive European Cancer Literacy Stakeholder Map

 **Interactive European Cancer Literacy Stakeholder Map**
accessible online at: <https://curtainproject.eu/interactive-stakeholders-map/>

Concept and Design Principles

The concept and design principles for the **Interactive European Cancer Literacy Stakeholder Map** were thought of towards an engaging and structured digital solution to support the comprehensive mapping of stakeholders across Europe, and the selected partner countries cancer research and care ecosystem. Its design is based on a **multi-layered information architecture** that enables users to navigate sequentially by country (the *contextual perspective*), audience (citizens and patients, healthcare professionals), audience journey map (the *life-course approach*), and the penta-helix stakeholder group (i.e., business, health and care, public administration, citizens and civil society, and knowledge and academia), before accessing detailed information on relevant stakeholders. The solution allows for both **national-level** exploration within partner countries and the identification of stakeholders with relevance **across Europe**.

The Interactive European Cancer Literacy Stakeholder Map was designed in a structured approach to ensure clarity and ease of use while accommodating a high volume of data. The development process included an evaluation of digital tools to ensure compatibility with the project website, resulting in the selection of [Genially](#) based on its integration capabilities, interactivity, and usability. Visual inspiration was drawn from existing European map visualisations, line-based mapping systems, information card layouts, and penta-helix-inspired frameworks to support clarity, accessibility, and meaningful user engagement. Figure 4 and Figure 5 illustrate some of the initial steps of the brainstorming and inspirational process, respectively.




Implementation | WP website with scrolling journey map

Links of ideas:


- <https://report2023.cscs.ch/> (click on the red dot)

Website Navigation:


Step 1: Click on country



Step 2: Click on Audience




Step 3: Scroll to view Stakeholders in vertical journey map




PROS: alternative way to view content, mock interactive.

CONS: Website might need to be hosted, level of stakeholder data might be too much.

**On the left side the stages of the audience journey, and on the right the stakeholder data.*






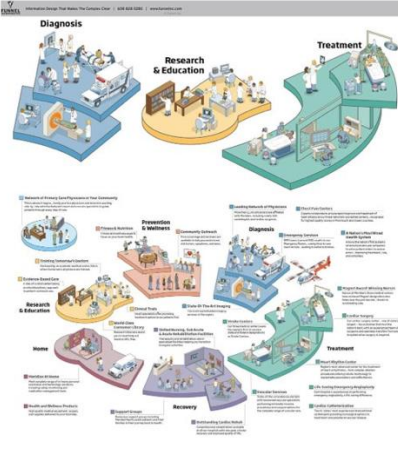
This project has received funding from the European Union EU4Health programme under grant agreement No101219448

Figure 4. Brainstorming and high-level concept development.

Key Inspiration





What do we like? The use of motifs with people and objects (it allows the graphics to be more visible and larger), the continuity of the path.



What do we like? The colored 2D platform, different scenes at each stage.

**On the left side the stages of the audience journey, and on the right the stakeholder data.*





This project has received funding from the European Union EU4Health programme under grant agreement No101219448

Figure 5. Selected key inspiration for the development of the citizens and patients, healthcare professionals journey maps (life course).



Technical Overview of the Mapping Tool

The Interactive European Cancer Literacy Stakeholder Map is implemented as a web-based, interactive solution designed to visualise and organise stakeholder data. During the development phase, several digital tools and platforms were assessed, including Prezi, PowerPoint, Power BI, Looker Studio, WordPress/H5P, and Unity. The decision-making process on the tool to use considered technical feasibility, integration requirements with other CURTAIN digital tools, customisation capabilities, cost, and sustainability beyond the project duration.

The Genially platform was selected as the most suitable platform due to its ability to support interactive and layered content while ensuring straightforward implementation within the existing WordPress-based CURTAIN website. The platform enables the creation of interactive, and modular content, allowing efficient maintenance and updates throughout the project lifecycle and beyond. Additional selection criteria included cost-effectiveness, flexibility for future use, and the availability of templates that supported rapid prototyping and visual consistency.

The mapping tool will be embedded directly within the CURTAIN project website and later on, in the CURTAIN Virtual Cancer Literacy Library (WP6), ensuring seamless access for users without additional software or authentication requirements. The chosen approach ensures scalability, ease of content management, and long-term sustainability of the tool.

Structure, Visualisation, Navigation and Functionalities

The opening page of the Interactive Map was designed with careful consideration of language to ensure clear and intuitive guidance for all navigation options. Navigation by country or at a Europe level is visually indicated through flag icons and supported by pop-up tooltips, as illustrated in Figure 6.

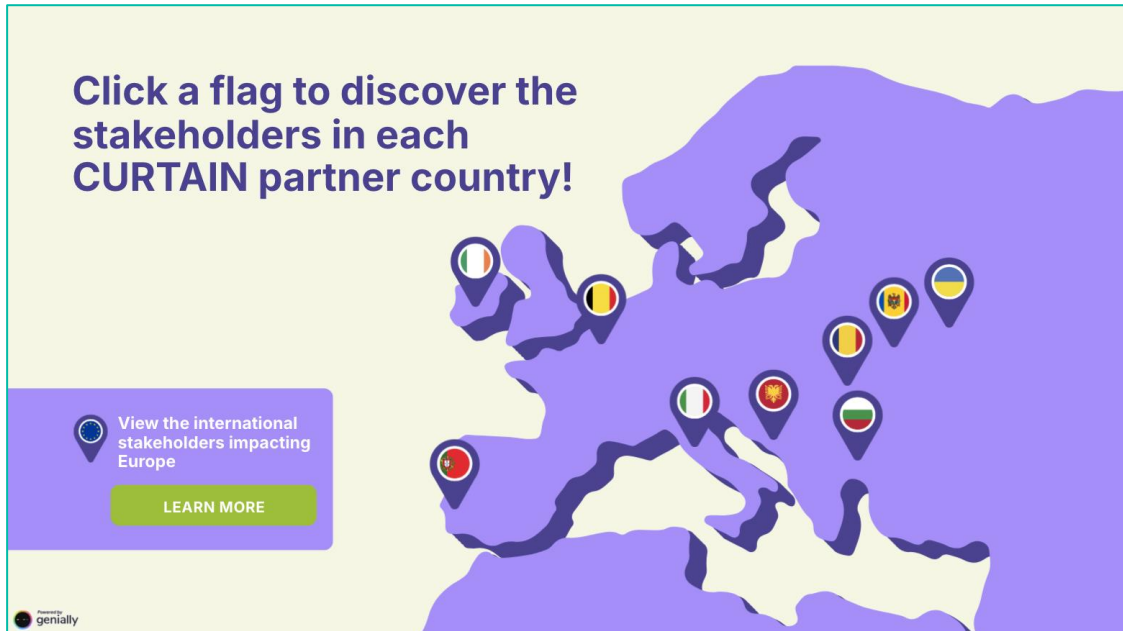


Figure 6. Screenshot of the opening page of the Digital European Mapping Tool.

Following country selection, users are guided by audience type through clearly presented cards with fully spelled, intuitive labels. Audience group navigation is visually distinguished through colour coding, with blue representing citizens and patients, green representing healthcare professionals (Figure 7).

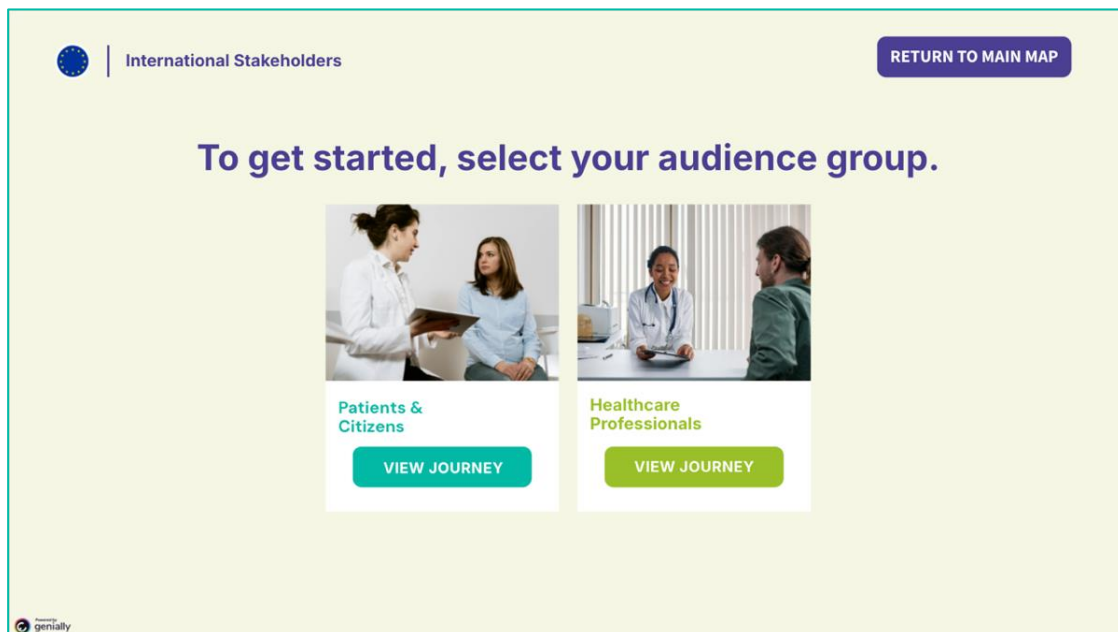


Figure 7. Screenshot of the audience selection page of the Interactive Stakeholder Map following the selection of the “Learn More” button on the opening page.



Within the selected audience journey map, each stage of the life-course approach of citizens/patients and healthcare professionals is represented by a custom illustration to visually anchor the content (Figure 8 and Figure 9, respectively). Motion effects applied to flag icons and stage labels are used to encourage exploration and engagement. At each stage of the navigation process, users are provided with clear orientation and control. A persistent “Return to Main Map” button allows users to return directly to the opening page at any time, while a contextual “Go Back” option supports local navigation when users are deeper within the navigation hierarchy. The purple colour indicates the local navigation and context-level reset actions.

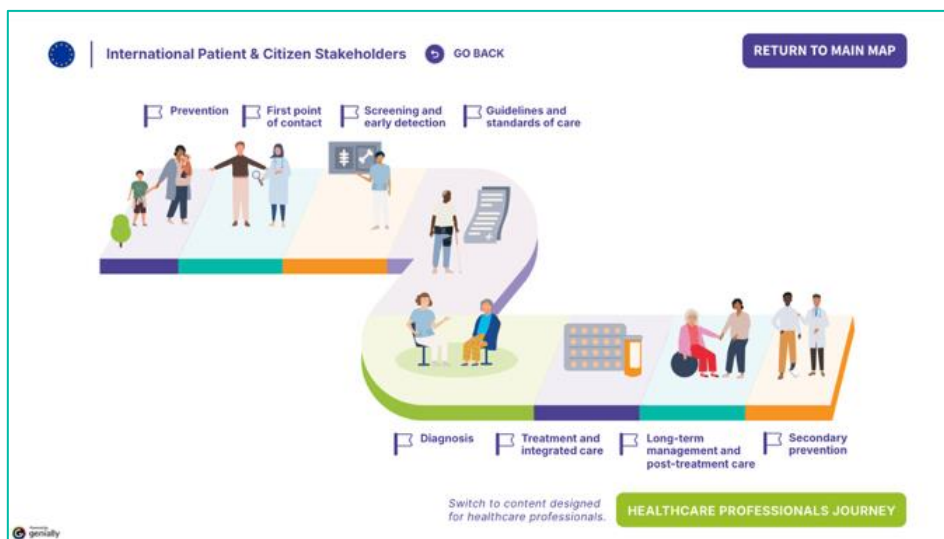


Figure 8. Screenshot of the life-course journey map for citizens and patients.



Figure 9. Screenshot of the life-course journey map for healthcare professionals.

Once the life-course stage is selected, the penta-helix stakeholder groups are displayed using established CURTAIN project iconography as shown in Figure 10 (please refer to *D7.1 Visual Identity and project website* for the visual identity of the project). Upon selection, stakeholder data is presented in a structured list format, with hover-enabled links directing users to relevant resource URLs (Figure 11).

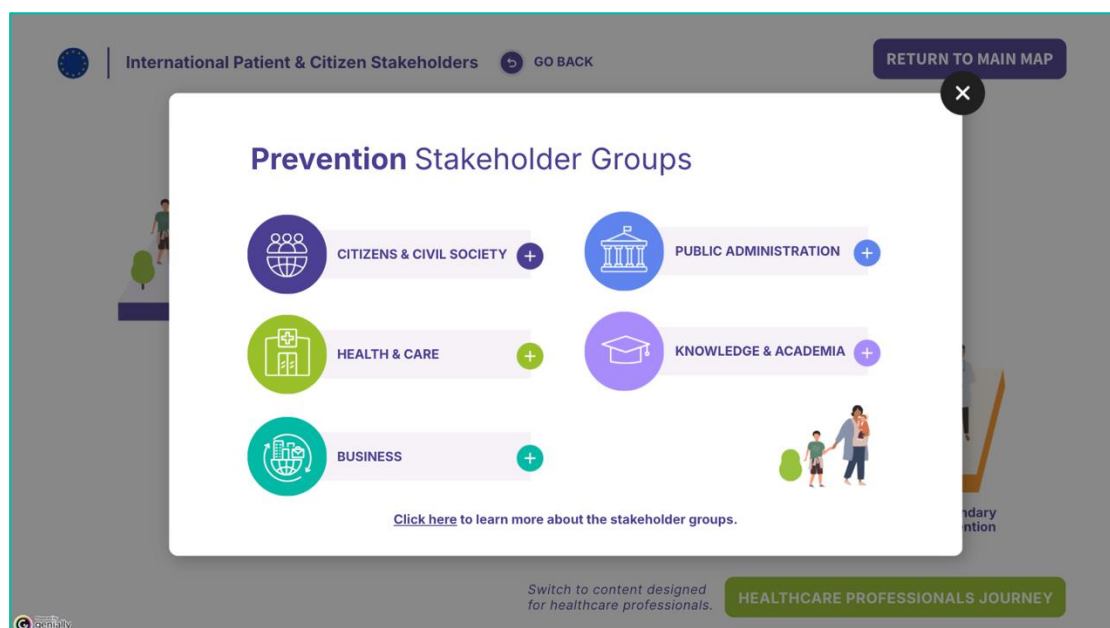


Figure 10. Screenshot of a selected stage in the life-course approach of the citizens & patients journey, previewing the penta-helix stakeholder groups.



Throughout the life-course stages, and selected penta-helix stakeholder groups, a dedicated button located in the bottom-right corner functions exclusively as an audience switch, displaying only the alternative audience group to maintain contextual clarity.

Overall, navigation follows a linear progression at the entry stages and gradually transitions into a free exploration model, allowing users to engage with the content of their exact interest.

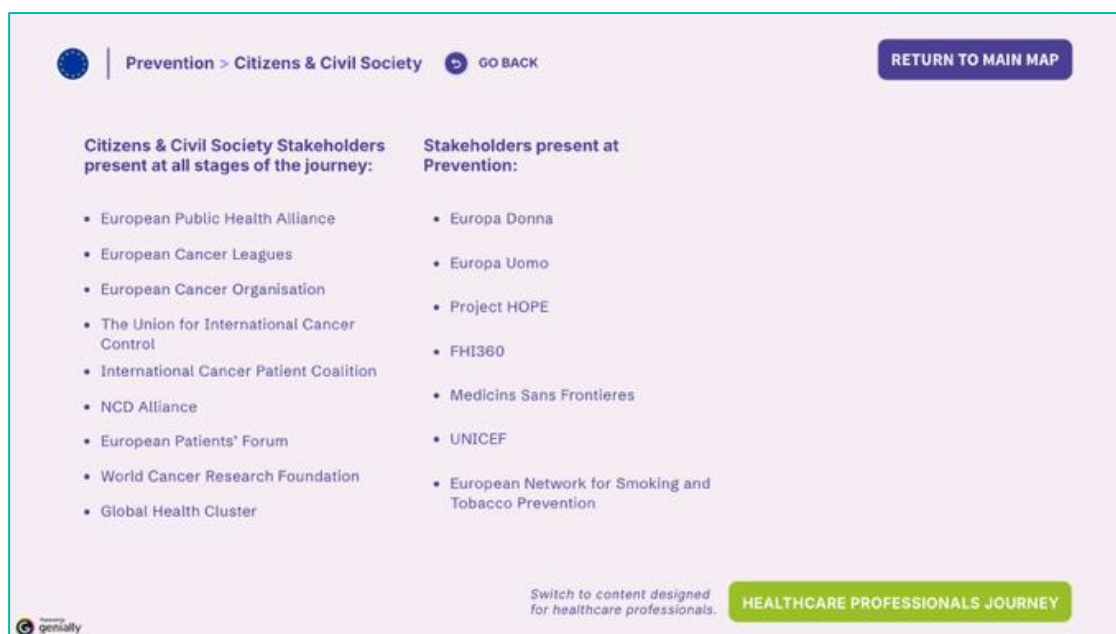


Figure 11. Screenshot of the list of relevant European stakeholders belonging to the Citizens & Civil Society stakeholder groups, at the Prevention stage of the citizens/patient journey.

Accessibility and Usability Considerations

The Interactive European Cancer Literacy Stakeholder Map was developed in consideration of accessibility guidelines, e.g., using consistent iconography, graphics, pop-up tooltips for clarification, fully spelled and intuitive labels, and subtle helper text where necessary, all of which reinforce user confidence and ease of use. Usability is further supported through consistent navigation patterns and clear recovery mechanisms, including a persistent “Return to Main Map” button. Cognitive load is



reduced by enabling users to access stakeholder information through a structured, step-by-step navigation approach.

The selected development platform, Genially, provides baseline accessibility features that further support inclusive use of the mapping tool. These include compatibility with most screen readers, which can convey information about navigation elements, interactive components, and content structure. Alternative text (ALT text) can be applied to visual elements, enabling screen readers to interpret non-text content. Text elements may be categorised (e.g., titles, subtitles, body text), allowing assistive technologies to communicate both structure and content effectively. Interactive elements containing external links can include descriptive information about their destinations. In addition, keyboard navigation is supported, allowing users to navigate between elements using the Tab key, move between pages using arrow keys, and activate interactive elements using the Enter key. These platform-level capabilities contribute to improved accessibility and usability across a range of user needs and contexts.

Future Use and Maintenance of the Interactive Map

While the Interactive European Cancer Literacy Stakeholder Map described in this deliverable is currently available as a page from the CURTAIN project website, it is foreseen that it will be integrated into the Virtual Cancer Literacy Library being developed within WP6.

This integration has been discussed and coordinated with All.Can, the partner leading the development of the Virtual Cancer Literacy Library, and with the GHC team, responsible for the project's visual identity. Early coordination between partners has enabled anticipation of technical and design requirements, ensuring consistency, interoperability, and visual coherence across CURTAIN outputs.

To ensure that the interactive stakeholder map remains accurate and relevant throughout the project duration, SHINE will invite consortium partners every six months to review and, where appropriate, update the stakeholders associated with their respective countries as well as the international layer. Consortium partners retain responsibility for the identification, validation, and relevance of the stakeholders proposed for their national contexts. Requested updates will be incorporated following a light quality assurance procedure, including verification of completeness of information, consistency of stakeholder categorisation, and alignment with the agreed methodological framework. SHINE's role is within the coordination and collection of



updates and implementing the requested changes within the Interactive European Cancer Literacy Stakeholder Map.



Conclusion

The stakeholder mapping exercise conducted under WP2 and presented in this deliverable resulted in the identification of more than 150 stakeholders at international level and approximately 1000 stakeholders across participating countries. This achievement reflects the strong collaborative effort of the CURTAIN consortium and provides a comprehensive overview of key actors involved in the cancer research and care continuum across nine European countries. The resulting Interactive European Cancer Literacy Stakeholder Map constitutes an important project asset, supporting stakeholder engagement, knowledge exchange, and coordination across cancer literacy ecosystems. To maintain its relevance throughout the project lifetime, consortium partners will be periodically invited to review and update the stakeholders associated with their respective contexts, with updates incorporated into the interactive map accordingly. Looking ahead, the mapping framework developed within CURTAIN offers the potential for further expansion to additional countries or stakeholder groups, where relevant and feasible, thereby strengthening the long-term usability and scalability of this resource.

The work presented also has direct implications for the implementation of subsequent CURTAIN activities. This work provides a strong empirical foundation for tasks aimed at capacity building (**WP4-5**) and policy uptake (**WP6**).

In particular, the results of Task 2.4 directly inform **Task 5.5**, which focuses on the establishment of CURTAIN's International Stakeholder Group. The mapped stakeholders enable the identification and selection of candidate organisations across participating countries, ensuring balanced representation all groups of the penta-helix model. The diversity of stakeholders identified in the mapping exercise supports the creation of stakeholder groups that reflect the complexity of cancer literacy environments and the multiple actors involved in shaping them.

Furthermore, the stakeholder mapping provides essential contextual insight for the assessment of organisational health literacy foreseen in Task 5.5. Information on stakeholder roles, levels of engagement across the cancer care continuum, and relevance to specific life-course stages supports the targeted selection of organisations for in-depth analysis.

Moreover, identified gaps, such as the limited visibility of public administration actors or the uneven representation of certain cancer types, also serve as background knowledge to Task 5.5. These findings can guide corrective strategies during stakeholder selection, ensuring that the International Stakeholder Group does not



merely reflect existing engagement patterns, but actively contributes to strengthening underrepresented perspectives and fostering more inclusive cancer-literate environments.

The stakeholder mapping also provides relevant input to **T6.2 Recommendations for policy action regarding cancer literacy in Europe** by supporting the development of policy recommendations that strengthen coordination on cancer literacy across national and European levels, in line with the objectives of Europe's Beating Cancer Plan.

Relevant Links

- ⇒ List of key stakeholders across the cancer research and care (Milestone #9):
<https://curtainproject.eu/public-deliverables/>
- ⇒ Interactive European Cancer Literacy Stakeholder Map:
<https://curtainproject.eu/interactive-stakeholders-map/>



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