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On-line health seeking activity of older adults: an integrative review of the literature

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ABSTRACT

The internet is increasingly used to provide health information. Supporting older people to access on-line health information requires understanding their current usage and possible barriers and facilitators. Methods involved searching three databases. Inclusion criteria were: (i) articles published within 10 years; (ii) people aged >65; (iii) explored reasons for older people accessing on-line health information and (iv) in English. Eight articles met these criteria. Older people use on-line health information to learn about a disease, medication, treatment, or healthy living. Factors influencing usefulness of on-line health information included demographics, health status, trust in the information, lack of skills using the internet and attitudes of health professionals. Findings indicate that while older people access on-line health information there are barriers: Low trust, financial barriers, lack of familiarity with the internet and low health literacy levels. Implications for nursing include working in partnership with older people to assist them to identify appropriate on-line information.

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Introduction

In the modern digital era healthcare is seeing increasing use of on-line information from the internet despite the variance in its quality and trustworthiness.¹ On-line information is being increasingly used to promote patient self-management and enhance communication between health professionals and patients. There is evidence that people are using health information on the internet to make decisions about their health and in self-diagnosis, which may or may not lead them onto seeing a health professional.² Using on-line information in the context of this article means that the older person, defined as over 65 years of age, can access, retrieve and understand appropriate health information available on the internet/websites. Importantly for older people to be well placed and involved in using on-line information for their healthcare, they need to be prepared and ready for changes in healthcare service delivery and the increased use of the internet. Therefore the aim for this integrative review was to explore how older people are accessing health information on-line and what are the barriers and facilitators they face.

Conflicts of interest: None.

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Background

Developing older people's skills in accessing reliable health information on the internet aligns with promoting healthy ageing, as a priority set by the World Health Organization.³ Indeed on-line information can be a gateway to meet the healthcare needs of a growing older population,⁴ particularly as access to health professionals and health information has been identified as problematic for some older people and this can be improved, particularly for those living in isolated rural communities.⁵ However, there is some evidence that unfamiliarity with the internet is a powerful barrier for not going on-line to seek health information and physical health problems such as problems with vision, hearing or movement discourage older people from accessing the internet to seek health information.^{6,7}

Approaches to limiting the cost of health care provision are also key drivers for health system transformation and on-line information is viewed as one approach to achieve this.⁸ Accessibility of health services has been identified as a key issue for older people particularly those with multi-morbidity as the range of health professionals they have to consult with increases their workload in managing their multiple conditions and adds disruption to their lives.⁹ The increasing rise in the number of older adults requiring health information will mean that accessing free health information on-line would provide a more convenient and financially appropriate approach, providing the opportunity to maintain health and support optimal ageing.¹⁰ However, there is a need to understand how older people,

| | | | | | | |
|--|------------|---|------------|--|------------|--|
| Older people OR Elder* OR Geriatric* OR Aged OR Older person* OR Senior* OR Older adult* OR 65 plus OR 65+ | AND | Online OR On-line OR Internet OR Information technolog* OR ICT OR Digital technolog* OR Computer* OR Mobile device* OR Web* OR Electronic | AND | Health information OR Health support OR Information resource* OR Information source OR Literacy OR Information seek* | AND | Experienc* OR Effect* OR Useage OR Use* OR Access* OR Barrier* OR Facilitat* OR Attitude* OR Utili* OR Percept* OR Perspect* |
|--|------------|---|------------|--|------------|--|

Fig. 1. Search terms (* denotes truncation or a wildcard was used).

referring to adults over 65 years, are currently using the internet for accessing health information, and the possible barriers and facilitators for them seeking on-line health information.

Research questions

The overall research question addressed in this integrative review is, "What are the issues of older people accessing health information on-line?" Within this there are two sub-questions:

1. What on-line health information do older people access?
2. What are the barriers and facilitators for accessing health information on-line?

Methods

An integrative review enables data from disparate areas to be considered.¹¹ We adopted the integrative literature framework developed by Whittemore & Knafel¹² which is recognised as a methodology to ensure a systematic approach, with stages to guide the review. These stages are; problem identification, literature search, data evaluation, data analysis, presentation. At the initial problem identification stage¹² we identified the research problem and our aims.

Literature search

Literature was primarily searched from on-line electronic resources through three databases: CINAHL, PubMed, and Medline during January 2017. Search terms were identified in consultation with our subject librarian and these are shown in Fig. 1. The search terms were combined using the Boolean logical operators AND/OR. Additionally, the search was widened using truncation (wildcards). Truncation involves using the first part of a word followed by symbol thereby allowing for different endings. Bibliographies of articles identified from the electronic search were also reviewed to find additional relevant literature.

An article was eligible in our review if it met our inclusion criteria by focusing on older people aged 65 years or older, was published between 2006 and 2016 and explored the reasons for older people using the internet for accessing health information. We excluded studies that focused on the Electronic Health Record (EHR) and portals as we were aware that the information provided from these sources is different. Details of the literature search process are summarised in the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) flowchart¹³ in Fig. 2.

References were exported to Endnote, as the citation manager, and each reviewer had a copy of this file. Using Endnote we were able to remove duplicates (Fig. 2).

Data evaluation stage

Initial evaluation involved screening the titles and abstracts (Fig. 2). At this stage we excluded studies which provided details of the age of participants who were under 65. However, for a number of studies this level of detail was not present in the abstract and required reading of the full text. All the articles we excluded at this point (n2195) did not specifically include 'only older adults over 65 years'. Evaluating the quality of the articles is recognised as complex¹² and specific tools are required to achieve this. There are a large number of critical appraisal tools available, and no international standardised approach. We used a recognised valid and reliable programme referred to as the Critical Appraisal Skills Programme Checklist (CASP).¹⁴ This consists of a set of criteria in the form of checklists which are specific for each study design considering the following;

Is the study valid?
What are the results?
Are the results useful?

The checklists provide no numerical calculation to rate each study, but the studies were assessed independently by two nurse researchers.

Data analysis

Information from each study included in the review was entered into a data extraction table (Table 1). Detailed analysis using the integrative review methodology¹² included reducing the data to identify what on-line health information older people were accessing, and their barriers and facilitators for accessing health information on-line. The data is presented in the data extraction table (Table 1) and from this we were able to compare data from the articles, noting countries conducting research, methods used and the themes related to access, barriers and facilitators.

Presentation

A final number of eight articles addressed the specific focus of the review (Table 1). All the studies met the CASP criteria for

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