## **PAPER**

## **Technology for Health**

J.N. HAUN, M. CHAVEZ, C. MELILLO, B.A. COTNER, W. HATHAWAY. Improving chronic condition self-care management for older adults levering user designed electronic health information technology. Gerontechnology 2018;17(Suppl):131s; https://doi.org/10.4017/gt.2018.17.s.127.00 Purpose To describe older patient's experiences and preferences for using electronic health information technology (e.g. electronic health portal, mobile applications, secure electronic messaging, stand alone kiosks, telehealth, etc.) for chronic condition self-care management. Method This participatory study used a descriptive mixed-methods design<sup>1</sup>. Two rounds of focus groups were conducted with a cohort of 47 veterans with chronic conditions (and one female caregiver) who participated as expert informants<sup>2</sup>. Focus groups included a self-administered survey, a pairwise comparison activity and simulation modeling activities. Participant data from the first round of focus groups was used to develop high-fidelity interactive simulations, and then presented for feedback at the second round of focus groups. The pairwise comparison activity was also conducted at the second round of focus groups. Rapid iterative content analysis was used to analyze qualitative data. Descriptive statistics summarized quantitative data. Results & Discussion Participants informed several data themes including their current use of electronic health information technology to manage self-care, and their preferences for using electronic health information technology in the future<sup>3</sup>. Data indicated that a full range of electronic health information technology options are needed. Data were used to develop participant-driven simulations that illustrate user needs and expectations when using electronic health information technology. Data indicate older adults with chronic conditions are invested in using electronic health information technology for chronic condition selfcare management. Expert informants reported preference for standardized, integrated, and synchronized userfriendly interface designs. Participant driven redesign efforts will inform the development of a user-centered electronic health information technology system that will engage users and their sustained use for self-care management of their chronic conditions to promote quality of life and wellness and maintain their independence.

## References

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