Person-centred e-support

Foundations for the development of nursing interventions in outpatient cancer care

Avhandlingen baseras på följande arbeten

I.   Ventura F., Öhlén J., Koinberg I.
      An integrative review of supportive e-health programs in cancer care
      European Journal of Oncology Nursing 2013; 17: 499–507.

II.   Ventura F., Sawatzky R., Öhlén J., Karlsson P., Koinberg I.
      *Challenges of evaluating a computer-based educational program for
      women diagnosed with early-stage breast cancer:
      a randomised controlled trial*
      Submitted

III. Ventura F., Koinberg I., Karlsson P., Sawatzky R., Öhlén J.
      *Purposeful agency in support seeking during cancer treatment from a
      person-centered perspective*
      Accepted for publication in Global Qualitative Nursing Research,
      2015

IV.   Ventura F., Koinberg I., Sawatzky R., Karlsson P., Öhlén J.
      *Exploring the person-centeredness of an innovative e-supportive
      system aimed at person-centered care: prototype evaluation
      of Care Expert*
      Accepted for publication in Computers, Informatics, Nursing, 2015

UNIVERSITY OF GOTHENBURG

Person-centred e-support: foundations for the development of nursing interventions in outpatient cancer care

Filipa Ventura

Institute of Health and Care Sciences at Sahlgrenska Academy
University of Gothenburg

Abstract

This thesis explores the foundations of person-centred e-support for women undergoing treatment for early-stage breast cancer. It is designed to enhance the knowledge base on how nursing interventions, in the form of interactive health communication applications, might assist the provision of support tailored to the unique needs and preferences of the patient, in the shifting cancer care context from inpatient to outpatient settings.

In *Study I*, an integrative systematic review of literature was conducted on the design of e-supportive systems in cancer care. Analysis and synthesis of 28 studies revealed that e-supportive systems allowed meeting cancer patients' supportive needs. However, transferability across target populations was constrained by differences in features, theoretical structure and study designs. In *Study II*, a two-group (n=226), multi-centre, randomised, controlled trial was conducted to evaluate the impact of a computer-based educational programme on: health self-efficacy, healthcare participation, anxiety and depression of women undergoing treatment for early-stage breast cancer. Multi-level modelling revealed no statistically significant improvement in outcomes. Subsequent exploratory regression analysis revealed factors associated with use of the programme. *Study III* explored patients' efforts to satisfy their supportive needs throughout the treatment course. Guided by Interpretive Description, 19 women undergoing treatment for early-stage breast cancer participated in five focus groups. Through constant comparative analysis the results disclose women as self-driven resourceful agents as they seek knowledge and support from their network in a continuum of reaching-out behaviours. *Study IV* explored the early-stage development of a prototype of the *Care Expert,* a person-centred e-supportive system, and its usability for women undergoing chemotherapy for early-stage breast cancer. Subjective assessment and diagnostic evaluation of the prototype were conducted in four individual usability sessions. The prototype's supportive communication functions were perceived by women to support their self-driven and cooperative agencies.

Integration of the results suggests that interactive health communication applications have potential to complement care in meeting women's supportive needs. However, the exclusive provision of reliable and evidence-based information via a computer-based programme is not enough. Integration of person-centred dimensions and user involvement early on in the development process may be the key to ensuring effectiveness of the application. Person-centred e-supportive systems may bridge the communication gap between the hospital setting and patients' homes by fostering a reciprocal partnership in care that acknowledges and reinforces patients' expertise and agency.