

Web-based support in long-term illness – a person-centred care approach

Ulrika Josefsson^{1,2}, Marie Berg¹, Anna-Lena Hellström¹, Ingalill Koinberg¹, Margaretha Jenholt Nolbris¹, Agneta Ranerup³, Carina Sparud-Lundin¹, Ingela Skärsäter^{1,4*}

¹The Sahlgrenska Academy at University of Gothenburg, Institute of Health and Care Sciences,
Box 457, SE-405 30, Gothenburg, Sweden

²Angered Hospital, Box 63, SE-424 22 Angered, Sweden

³Department of Applied IT, University of Gothenburg, SE-412 96 Gothenburg, Sweden

⁴University of Halmstad, SE- 301 18 Halmstad, Sweden

*Corresponding author

Introduction

The poster outlines a research project that aims to develop and evaluate a person-centred model of web-based learning and support for people with long-term illness. Departing from the widespread use of the internet in modern society and the emerging use of web interventions in healthcare¹⁻³ the multi-case project captures persons' needs and expectations in order to develop highly usable web recourses. To support the underlying idea to move beyond the illness, we approach the development of web support from the perspective of the emergent area of person-centred care (PCC).

Materials and Methods

The research design uses a meta-analytical approach through its focus on synthesizing experiences from four Swedish regional and national studies/cases of design and use of web-based support in long-term illness. The cases include children (bladder dysfunction and urogenital malformation), young adults (living close to persons with mental illness), and two different cases of adults (women with breast cancer and childbearing women with type 1 diabetes). All of the cases are ongoing, though in different stages of design, implementation, and analysis.

An inductive approach characterizes the analysis of the results of the cases. By means of a step-wise analysis a shared knowledge and understanding of each separate case is created followed by the development of central categories (such as types of needs and expectations, types of theories, conceptual framework, etc).

Results

To allow valid comparisons between the four cases we explore and problematize them in relation to four main aspects: 1) The use of people's experiences and needs; 2) The role of use of theories in the design of person-centred web-based supports; 3) The evaluation of the effects of health outcomes for the informants involved and 4) The development of a generic person-

centred model for learning and social support for people with long-term illness and their significant others.

Discussion

Person-centred web-based support is a new area and no available study focus on how web-based interventions can contribute to the further development of PCC. In the four cases within this project the evaluation model is characterized by evaluation of web support in real settings, and data will be analysed using both within-case and across-case statistical analyses. Therefore, our multiple-case method, in which overlapping results from different contexts will provide comprehensive experiences, will contribute to the design of a more generally applicable, individually modifiable model. However, the multiple case method is also a challenge of validity, as the use of different case experiences and environments, involves an endeavour to understand what types of experiences are actually being captured in the process of developing a web-based support and what this means in relation to PCC. In summary, the main intention of the project outlined here is to contribute with both a synthesis of results on meta-level from four cases and a substantial contribution to the field person centred care.

Acknowledgments

This work was supported by the University of Gothenburg Centre for Person-Centred Care (GPCC).

Address for correspondence

Ingela Skärsäter, ingela.skarsater@gu.se The Sahlgrenska Academy at University of Gothenburg, Institute of Health and Care Sciences, Box 457, SE-405 30, Gothenburg, Sweden

References

- ¹.Vernmark K. et al. Behav Res Ther 2010;48:368–76.
- ².Ekberg J. et al. J Med Syst 2010;34:107–117.
- ³Ruland CM. et al J Am Med Inform Assoc 2010;17:403–410.