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Health Visitors as leaders in overcoming the 'digital divide'

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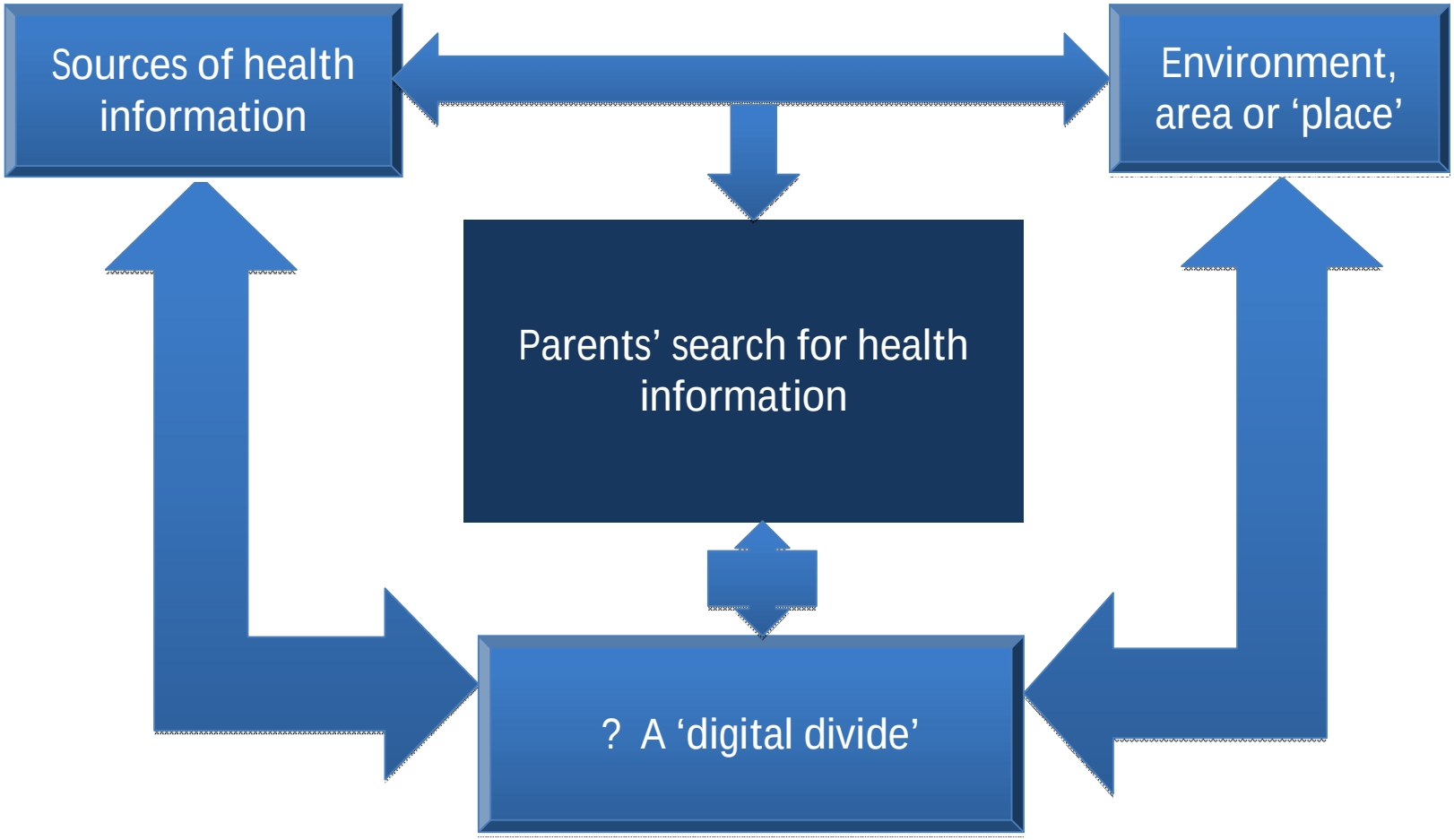
Background to this research study

- Findings from a doctoral study investigating patterns of health information seeking by families with children under five years of age and living in an inner city area

- The study was particularly concerned with families' use of the internet for child and family health information

Four areas of investigation



Research questions

- Which sources of health information do parents use to promote child and family health?
- Which sources of health information are most valued by parents ?
- How important is the ‘internet’ as a source of health information for parents with young children?
- Is access to health information related to family characteristics (social, economic, educational) and / or ‘area’ or local environment

Professional questions

- Is there a modern ‘inverse care law’ in child and family health information seeking, retrieval and use?
- Does this have any relationship with the advent of ‘new technologies’ (eg. the internet)
- What is the particular contribution of health visiting in promoting equitable access to, and use of, information in the ‘internet age’?

The Study : sources of data

- 224 Parents using child health and welfare services in two Sure Start areas completed a researcher administered structured survey questionnaire
- 4 Focus groups of parents (eight parents in each group) (qualitative data)
- 20 opportunistic conversations with parents attending child health clinics (qualitative data)
- Data from Office of National Statistics

The study : data analysis

- Survey data were analysed according to the LA wards in which questionnaire administered
- Logistic regression for quantitative data analysis
- Constant comparative technique for qualitative data
- All data, when analysed, were combined within a hypothesis generating framework

Findings

- 61% of respondents used the internet for child health information
- The GP was the most favoured sources of health information
- Followed by :
- i) family and friends
- ii) the health visitor
- Iii)the internet

Findings : population level

- Internet use was significantly associated with increased use of 14 other sources of health information : ‘active’ health information seeking
- Home access to the internet :
- i) increased the likelihood of internet use for health information six fold
- ii) it also increased the use of the 14 other sources of health information

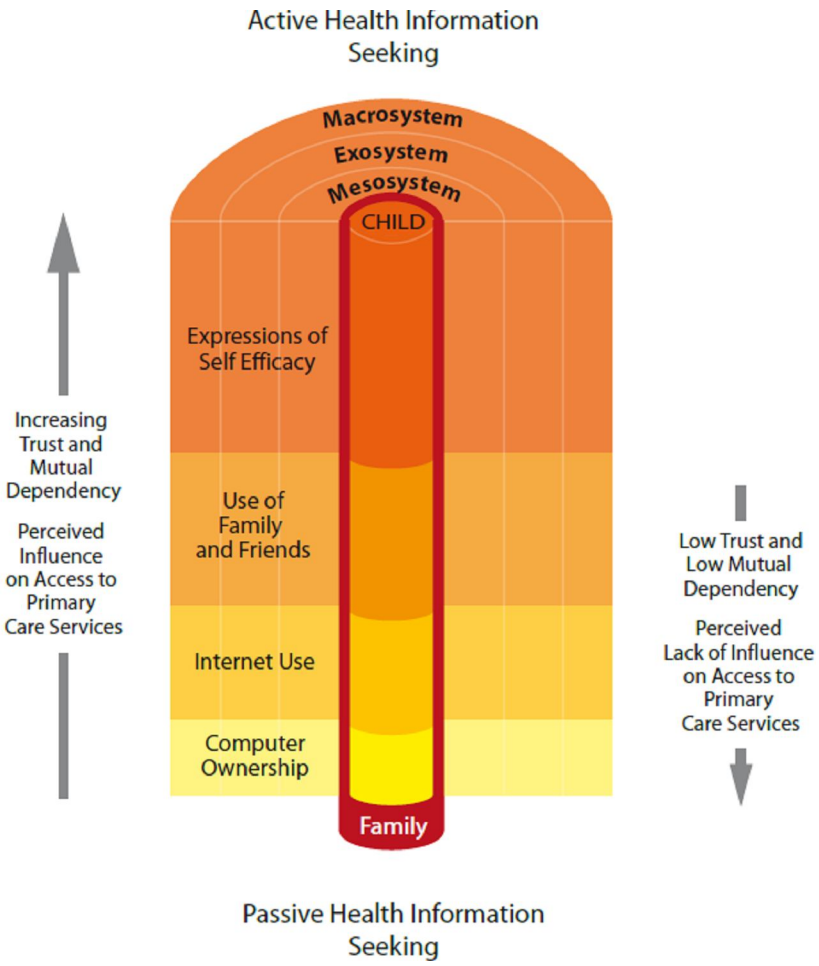
Findings : Environment, area or ‘place’

- At local level ‘active’ health information seeking was not determined solely by home internet access
- Two other local area features were also important :
- i) use of family and friends for health information
- ii) perceptions of access to primary health care services

Family and friends and access to primary care services

- These two environmental characteristics produced a pattern of ‘active’ health information where individual family characteristics would have predicted a more ‘passive’ approach

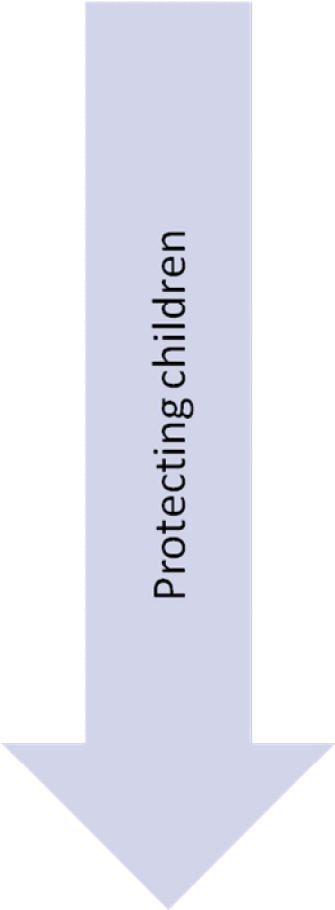
Eco-cultural determinants of health information seeking



Eco-cultural determinants of health information seeking

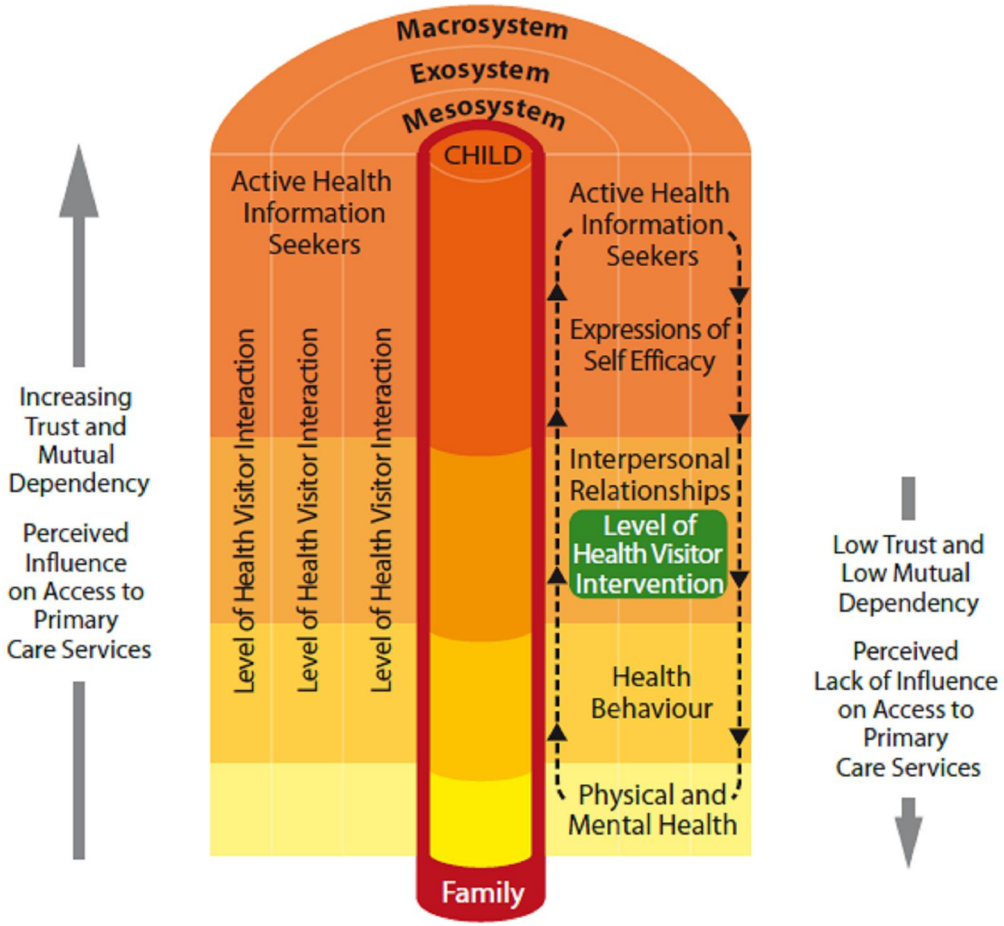
- Use of friends and family for child health information and perceived access to primary care services may draw materially disadvantaged families towards an ‘active’ search for health information
- Connections between individuals as well as computer ownership (economic affluence) determined the pattern of health information seeking.
- The internet contributed to these connections but didn’t create them

The service structure



New service vision levels	The service for families
Community level	HVs build capacity & develop community services
Universal services	Leading the Healthy Child Programme
Universal plus	Additional care packages
Universal partnership plus	Providing ongoing support for complex issues

A model for health visiting in the internet age



A model for health visiting in the internet age

- The four principles of health visiting remain relevant – they can help turn those who passively acquire health information into active health information seekers

- The four principles should be embodied in three activities :
- Health information giving
- Relationship formation
- Promoting feelings of familial and collective efficacy

- Primary goal – equitable child health promotion

Health visitors

- Work vicariously through the medium of the family which, in turn, is influenced by social, organisational and cultural worlds
- Health information given must be congruent with this world and reflect the choices available to parents
- Health visitors must be credible sources of health information
- The families in this study who had most choice used health information given within the context of trusted relationships this is a key feature of effective information giving
- Health visitors can work within the mesosystem, exosystem and macrosystem to improve equitable access to health information and, thereby, to promote equitable child health