A Qualitative Study Exploring Factors Influencing the Uptake of and Engagement with Health and Wellbeing Smartphone Apps

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Abstract: Background: The uptake of health and wellbeing smartphone apps is largely influenced by popularity indicators (e.g., rankings), rather than evidence-based content. Rapid disengagement is common. This study aims to explore how and why potential users 1) select and 2) engage with such apps, and 3) how increased engagement could be promoted. Methods: Semistructured interviews and a think-aloud approach were used to allow participants to verbalise their thoughts whilst searching for a health or wellbeing app online, followed by a guided search in the UK National Health Service (NHS) 'Apps Library' and Public Health England's (PHE) 'One You' website. Recruitment took place between June and August 2019. Adults interested in using an app for behaviour change were recruited through social media. Data were analysed using the framework approach. The analysis is both inductive and deductive, with the coding framework being informed by the Theoretical Domains Framework. The results are further mapped onto the COM-B (Capability, Opportunity, Motivation - Behaviour) model. The study protocol is registered on the Open Science Framework (https://osf.io/jrkd3/). Results: The following targets were identified as playing a key role in increasing the uptake of and engagement with health and wellbeing apps: 1) psychological capability (e.g., reduced cognitive load); 2) physical opportunity (e.g., low financial cost); 3) social opportunity (e.g., embedded social media); 4) automatic motivation (e.g., positive feedback). Participants believed that the promotion of evidence-based apps on NHS-related websites could be enhanced through active promotion on social media, adverts on the internet, and in general practitioner practices. Future Implications: These results can inform the development of interventions aiming to promote the uptake of and engagement with evidence-based health and wellbeing apps, a priority within the UK NHS Long Term Plan ('digital first'). The targets identified across the COM-B domains could help organisations that provide platforms for such apps to increase impact through better selection of apps.

Keywords: behaviour change, COM-B model, digital health, mhealth

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