Chapter 3.6
Confirmatory Factor Analysis to Establish Determinants of Wireless Technology in the Indian Healthcare

Raj Gururajan
University of Southern Queensland, Australia

Tiana Gurney
University of Southern Queensland, Australia

Abdul Hafeez-Baig
University of Southern Queensland, Australia

ABSTRACT

This study reports the determinants of wireless technology in the Indian healthcare validated by a second order regression model. In order to assert the determinants, a qualitative study was conducted with 30 physicians using interviews to arrive at a set of barriers and drivers. Further analysis of the qualitative data indicated that there is a third component emerging, namely, clinical influence. The interview data was used to develop a survey instrument and this was administered on the Indian clinicians with 200 completed surveys. This data was used to establish the sub-components of the three major determinants as identified in the qualitative study. This is reported in this article.

INTRODUCTION

In the last few years, high expectations, technological developments, and effective and efficient services have been shown to be prerequisites for improvements in the healthcare domain (Rogoski, 2005; Versel, 2008). Latest trends in the healthcare sector include the design of more flexible and efficient service provider frameworks aimed at providing health services to all stakeholders. In order to implement such frameworks, wireless technology is increasingly being used in the healthcare sector. A decrease in the cost of wireless devices and improved awareness of the benefits by using related wireless applications are two of the contributing factors towards the increased use of wireless technology in this sector (Gururajan,
LITERATURE REVIEW

The concept of wireless technology in healthcare is discussed in many studies (Dyer, 2003; Hu, Chau, & Sheng, 2002; Sausser, 2003; Simpson, 2003; Siracuse, Pharm., & Sowell, 2008; Versel, 2008; Wisnicki, 2002; Wu & Wu, 2007; Zhang, 2007). For example, Wisnicki (2002) provides details of how broadband technology, an essential component of wireless technology, can be used in healthcare. While prior studies agree that wireless applications have the potential to address the endemic problems of healthcare, very limited information can be found about the determinants of such applications (Gururajan, Toleman, & Soar, 2004; Gururajan, Moloney, & Kerr, 2005). In general, the majority of the works reviewed are descriptive about the benefits of wireless handheld devices in healthcare in general, and medicine in particular. There are only a small number of studies that provide evidence-based information concerning these devices in healthcare (Fischer et al., 2003; Sax et al., 2005)(Hafeez-Baig, 2007). Furthermore, five major studies in the area of healthcare (evaluated by (Spil & Schuring, 2006) testing the Technology Acceptance Model (TAM) produced findings which were inconsistent with the body of knowledge in non-healthcare settings. With 'Perceived Ease of Use' and 'Perceived Usefulness' as the major TAM attributes, these studies found that in the health environment, 'Perceived Usefulness' is an important attribute in technology adoption, while 'Perceived Ease of Use' was found to have no effect (Spil & Schuring, 2006). This is different to findings reported in non-health IS studies, where both attributes were found to be reliable technology adoption predictors. Therefore, further empirical investigation is required to explain the reasons why this variation exists in healthcare. In addition, there is a need to explore if further attributes exist which may influence the adoption of wireless applications in the healthcare environment.
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