Chapter 7

Using the Communication AssessmenT Checklist in Health to Assess the Communication Quality of Web Based Resources for Prostate Cancer

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ABSTRACT

Introduction: The communication quality of web resources for patients is unknown. The purpose of this study was to assess prostate cancer websites using the Communication AssessmenT Checklist in Health (CATCH). Methods: CATCH is a theory-based tool consisting of 50 elements nested in 12 concepts. Two raters independently applied it to 35 HON certified websites containing information on prostate cancer treatment. Results: Websites contained a mean 24.1 (SD = 3.6) CATCH items. The concepts Language, Readability, Layout, Typography and Appearance were present in over

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INTRODUCTION

There is a growing emphasis on shared decision-making (Makoul & Clayman, 2006; Wong et al., 2000) as a means to enhance patient care. Partnerships with patients can improve the planning and carrying out of therapies (Brett et al., 2014; Brown, Brown, & Sharma, 2000), facilitate adaptation of new knowledge to specific patient communities (Brett et al., 2014; Collier, 2011; Fagerlin, Zikmund-Fisher, & Ubel 2011; Frank, Basch, & Selby, 2014) and make information more accessible to patients by making it more user-friendly (Brett et al., 2014).

There is, however, a gap in our understanding of the process that occurs between the creation of knowledge and its use (Bero et al., 1998; Dopson, Locock, Gabbay, Ferlie, & Fitzgerald, 2003; Lang, Wyer, & Haynes, 2007). In fact, academic researchers have often studied knowledge dissemination and implementation as a two-step process, the first step of which is distilling and packaging the evidence (Cohen et al., 2008; Grimshaw et al., 2006), and the second step is studying the adoption of evidence, taking into consideration behaviour-change factors (Ajzen & Albarracen, 2007; Ajzen, Czasch, & Flood, 2009; Michie, Johnston, Abraham, & Walker, 2005; Michie, van Stralen, & West, 2011). Those steps overlap and are well documented. But the factors affecting the effectiveness of the resources used to communicate new health knowledge and influence behaviour remains largely unexplored.

There are several instruments designed to help streamline health information, filter it and make it more usable. Four instruments evaluate the implementability of clinical guidelines and incorporate a communication dimension. The Guideline Implementability Appraisal tool (GLIA) (Shiffman et al., 2005) proposes a “Presentation and Formatting” dimension comprising two items, while ADAPTE (T. A. Collaboration, 2009) highlights the importance of Context of Use”, “Strength of Evidence” and “ Risks and Benefits”. Two others– Appraisal of Guidelines for Research & Evaluation (AGREE) (Brouwers et al., 2010; A. Collaboration, 2001; Klazinga, 2003) and GRADE (Guyatt et al., 2011; Guyatt et al., 2012; Oxman & GRADE Working Group, 2004) assess the scientific value of the evidence, its scope and purpose, rigor of development, clarity and presentation. Another set of instruments analyses the quality of information provided in web resources for prostate
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