Chapter 59
Toward an Informed-Patient Approach to E-Health Services

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ABSTRACT
With the expanding utilization of digital and technological media by public health providers and healthcare consumers, there is a need to evaluate the patients’ role. There is good evidence of the growing acceptability of the Internet in seeking health information. This paper aims to evaluate the patients’ role as an informed-patient. This role, albeit, with its limitations, affects the ways by which people consume health, consult their doctors and also influence health policy. This paper is a sociological and anthropological analysis of the effect of e-health services on the informed-patients’ role and their ability to bring about social change through the Internet and their use of e-healthcare services. Through analyzing current literature and examples of health-related websites, this analysis focuses on informed-patients and how they are able to demand better health services for themselves and for their communities.

INTRODUCTION
This conceptual paper is a sociological and anthropological analysis of the effect of e-health services on the informed-patients’ role and their ability to bring about social change through the Internet and their use of e-healthcare services through online community-growth dynamics. In this paper, the term e-health services refers to all new electronic means (the Internet and telecommunications) providing health resources, information and a platform for interaction between institutions, health professionals, health providers, health consumers and the public. Through examples of health-related websites, this analysis focuses on informed-patients and how they are able to seek health information and to demand...
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better health services and standards for themselves and for their communities. This article focuses on
the empowering role of the Internet for informed-patients to become active agents.

In the following sections, this paper provides examples from different websites to illustrate the use
of e-health services, the social implications of this usage upon the physician-patient interactions and the
limitations of the e-health services. The paper focuses on the basic interaction between physician and
patient, in spite of the fact that their physicians are not necessarily the primary providers of information
of health-services accessed from these online resources.

With the expanding utilization of digital and technological media by public health providers and
healthcare consumers, there is a need to evaluate the patients’ role. There is good evidence of the grow-
ing acceptability of the Internet in seeking health information (Ahmann, 2000; Diaz et al., 2002; Hardey,
USA nearly one third of the population search for health information online. According to Schwartz et
al (2005), it was estimated by the Pew Internet and American Life Project that on a typical day in 2004,
70 million Americans went online and seven million searched for health or medical information. The
Pew survey also estimated that 75% of online men and 85% of online women had searched for health
information at least once in the past. Consequently, Schwartz argues that as long as more people gain
access to the Internet, the numbers seeking healthcare information are likely to increase. This rapid rise in
health information technology (HIT) is reflected, for example, in American expenditure on the growth in
health information technology- from $19 to $31 billion between 2000 and 2006 (Miller and West, 2009).

The question is: what makes the Internet more attractive than other media channels? Its attractiveness
is intrinsic to its unique infrastructure. In their review, Azy and Fisher (2001), suggest that the Internet
possesses a “Triple A Engine”: affordability, availability, and anonymity: “Affordability refers to the
Internet’s low cost, which has permitted it to penetrate many segments of society. Availability refers to
the Internet’s ease of use at any time and in many locations. Anonymity refers to the apparent obscurity
Acceptability which refers to the Internet’s legitimacy; and, a fifth factor aloneness, which refers to the
fact that the Internet is typically used privately “in unobserved human-computer transactions.” (2001:325).
These factors are most useful for healthcare information seekers.

Recent research has explored the effect of the availability of Internet-based health information on
patients’ healthcare education and knowledge. Studies found that a significant proportion of people rely
on the Internet to make critical health decisions and often bring information retrieved from the Internet
into medical consultations (Anderson, Rainey, & Eysenbach 2003; Friedewald, 2000). Fox and Rainie’s
(2002) study found that 61% of the American public said the Internet had improved the way in which
they take care of their health: 93% of health seekers have gone online to look for information about a
particular illness or condition and 65% of health seekers have looked for information about nutrition,
exercise, or weight control. Azy and Fisher (2001) conclude that the advantages of Internet-driven edu-
cational technology are applicable to any area of instruction, but emphasise the benefits of its usefulness
for sex education. It appears that the process of seeking health information takes the searcher through
interactive and hyper-connective processes that address specific questions and motives, and engage
behavioral-skills associated with particular concerns about well-being. In other words, we can, with
confidence, and in complete privacy, look up readily accessible material in a comprehensible language
about our deepest fears, most embarrassing illnesses and most personal of habits, for only a fraction of
the cost our monthly telephone lines or electricity supply.
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