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Determinants of the Adoption of Self-healthcare Monitoring Mobile Applications

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The pervasiveness of technology has engendered self-healthcare practices. The latest technological advancements in smartphones present a platform for assisting people to monitor their wellbeing on a daily basis. Indeed, there are numerous mobile applications that assist to monitor one's health such as blood pressure, glucose level, stress and anxiety levels, to name a few. In South Africa, the adoption of mobile technologies for healthcare awareness has been effective amongst the youth whose number of cellphone users is increasing rapidly (Reddy, Sewpaul and Jonas, 2016). The adoption of cellphones as means of communication is increasing by 20% a year, and it was predicted that before the end of 2015, smartphones would be the most used types of phones in South Africa (Dalvit, 2015). Cell phones and other mobile devices are currently being used to respond to emergencies, consult with peers and health experts about medical problems as they emerge, and access healthcare services through mobile platform-enabled systems (Mechael, 2009). Although much research have investigated factors that influence the adoption of mobile health applications, there is still a dearth of research that investigate youth's adoption of such applications. In addition, most of research on mHealth adoption used theoretical or conceptual frameworks without testing whether these frameworks actually fit the data. It is in this context that this paper investigated the determinants of youth's adoption of mobile applications that enable one to self-monitor his/her health. The paper aimed to explore whether the constructs of the Unified Theory of Acceptance and Use of Technology (UTAUT) have a significant effect on youth's adoption of mobile applications that could help them to monitor their health. Using a Structural Equation Modelling technique (PLS-SEM), the paper further tested whether the UTAUT framework is a best fit for data pertaining to the adoption of mobile applications that help self-monitor one's health. Findings revealed that performance expectancy and social influence constructs of the UTAUT framework are the highest predictors of the youth's behavioural intention to adopt mobile applications for self-healthcare monitoring. In addition, youth's behavioural intention to adopt mobile applications for self-healthcare monitoring has a positive effect on the youth's use behaviour of such applications. Thus the paper recommended that any intervention that aims to encourage youth's adoption of such applications should focus on performance expectancy and social influence factors.

References

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