
POLICY BRIEF

Access to and use of digital health services – how to ensure they support health equity

Digital health services are any health services or health information that is provided online, through a mobile phone app or otherwise requires digital technology to access. Examples include telehealth, health information websites like HealthDirect Australia, and mobile phone apps aiming to improve users' health.

Australian and other governments have been shifting access to many public services onto digital platforms. This includes health information and services. The COVID-19 pandemic has accelerated this digital shift, and has highlighted the importance of digital access for social connectedness, access to services, and access to resources such as education, employment, and housing that are critical to people's health.

However, resources including equipment, finances, and digital literacy are not distributed equitably in the population, and so some groups will have more access to digital services than others.

It is therefore important to ensure that the growth of digital health services in Australia addresses equitable access, which in turn will contribute to equity in health outcomes.

The Southgate Institute conducted a series of research projects examining equity in access to, use of and benefits from digital health services. Our aim was to develop knowledge about who in Australia uses digital health services, how, and what benefits they gain from doing so. We have collaborated with HealthDirect Australia, two GP services, and two clinics in Northern Adelaide hospitals.

Key recommendations

Recommendation 1: Pursue strategies to increase accessibility or acceptability of digital health services, while ensuring there are alternatives to digital health services for people who cannot access them.

Without any change to the status quo, the increasing provision of digital health services is likely to exacerbate existing unfair and avoidable health inequities.

From an analysis of users of an online health service (HealthDirect Australia), we found that users of online health information services are:

- predominantly older than the general Australian population,

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- more likely to be tertiary educated,
 - more likely to live in an advantaged area of Australia, and
 - more likely to speak English at home.

Aboriginal and Torres Strait Islander peoples are underrepresented among users of digital health services. People from regional and remote Australia are more likely to use digital health services than those in major cities.

Technical or financial barriers to using digital health services can affect access. Not everyone had a viable internet connection, the right technology or equipment (such as smartphones or laptops), or felt confident that they could find trustworthy services or information online. Physical disabilities such as arthritis, or English language literacy made digital access more difficult.

It is clear that some groups under-utilise digital health services, which may reflect barriers to access or use. These groups include people living in areas of lower socioeconomic status, men, people speaking a language other than English at home, Aboriginal and Torres Strait Islander people, and people with lower levels of education.

Recommendation 2: Support GPs and other health professionals to feel comfortable recommending use of trusted digital health services to their patients.

A key finding of this research was that people saw their use of digital health services as complementary to their use of face to face health services. This finding is relevant to government aims to enable people living with chronic conditions to better manage their health, to optimise use of healthcare and reduce avoidable hospitalisations.

Because of this complementarity and because of inequitable barriers to digital health services, we argue that ***digital health services should not be regarded as a substitute for face to face services.***

Instead, there is scope to improve the contribution of digital health services through addressing barriers to access and use, and to the role of health professionals in supporting the use of digital health services.

People described a range of ways in which they used online health information before or after seeing a health professional. These included:

- To clarify if they needed to see a health professional
- To prepare beforehand to get the most out of a GP appointment
- To feel more empowered and informed when attending a face to face service
- To check information or get more detail after using a face to face service
- To increase their understanding of the nature and effects of medications
- To feel in control of their health and healthcare.

People who were recommended to use digital health services by a GP or other health professional were more likely to trust and use digital health services. Further, people took health professional advice into consideration when choosing which sites to visit and use.

Most people reported feeling comfortable discussing their online health information use with their health professional, while some people were hesitant, or reported health professionals reacting negatively to their online searching. Our research suggests there is

great value for health service users in health professionals feeling able to recommend trustworthy sites.

Recommendation 3: Digital health services should use search engine optimisation to ensure information appears on the first page of search results as many participants reported only clicking on links on the first page of search results in a google search.

Recommendation 4: Government-supported digital health services should promote 'high trust' features to extend awareness, appeal or trustworthiness of their services.

One of the key issues for users to feel confident in using online health information was their self-assessed ability to distinguish between reliable and unreliable information. Key factors used to identify trustworthy sites included if they were Australian sites or '.gov.au' sites, and if they had clean, uncluttered page design, and included links to detailed information sources on particular conditions or issues. Trust was a key predictor of the extent to which participants use digital health services.

Recommendation 5: Consider strategies to develop and promote forum formats for people with specific chronic conditions.

Study participants generally saw online forums as less trustworthy or otherwise less appealing as a source of online health information. Conversely, those with chronic conditions frequently identified forums as a preferred medium, especially to contact and share information with people who had similar conditions/experiences. They tended to be used to work out practical ways of putting health advice into action, rather than as a replacement for health advice.

Publication:

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For further information visit [Stretton Health Equity](#) at the University of Adelaide, or email: strettonhealth@adelaide.edu.au.