

Technology Readiness Index 2.0 as Predictors of E-Health Readiness among Potential Users: A Case of Conflict Regions in Libya

Abstract

The use of various e-health products to improve health care services delivery is a viable solution to health challenges all over developing countries and more importantly the regions battling with conflict. This is important considering the damages to the health record and the risk of attack during transit to healthcare facilities among several other challenges. While the sustainability of e-health is an issue that still poses a challenge to the developing world. That is, implementation framework to support the long-Term sustainability of E-Health systems in conflict regions and generally the developing countries faces enormous challenges. Accordingly, evidences abound among developing countries that several E-Health pilot projects could not progress to full-scale implementation. Several studies have indicated that the success of E-Health implementation is linked to the acceptance of such technology by end-users (Michel-Verkerke, Stegwee, Spil, 2015; Fanta Pretorius, 2018). This indicates that, while the adoption and implementation of innovative technology such as e-health is paramount, evaluating the effect of behavioral characteristics of potential users can be related to its success. Identifying those intrinsic individual factors responsible for technology readiness among potential users is paramount, so also is the evaluation of the likelihood of assigning users into distinct category base on the individual's perception about e-health readiness. The TRI approach principally developed for evaluating people's readiness is a prerequisite for systematically addressing these issues. Extant literature concerning the adoption of innovative technologies strongly recommends that a consumer concurrently poses favorable and unfavorable factors that shape their perception about using any technological products or services. Analysis was performed using SMART-PLS, to assess the TRI 2.0 constructs in e-health domain Thus, determining the significance of the variables of the current research. The outcome is that insecurity was the only constructs that showed a significant and positive effect on e-health readiness. Other constructs innovativeness, optimism, and discomfort were found not to be statistically significant in determining E-health readiness for the case of Libya.