

## Introduction

### Digital Health Literacy (DHL)

"ability to seek, find, understand, and appraise health information from electronic sources and apply the knowledge gained to addressing or solving a health problem" (4)



#### Worldwide trend

essential to improve the access and utilization of healthcare services, patient interaction, and self-care



#### Low DHL

could result in health inequities, where certain individuals can fully utilize patient engagement technologies while others are unable to do so



#### Previous study

- limited health literacy level highest among the elderly (1)
- DHL among primary care patients in Malaysia was low (2)



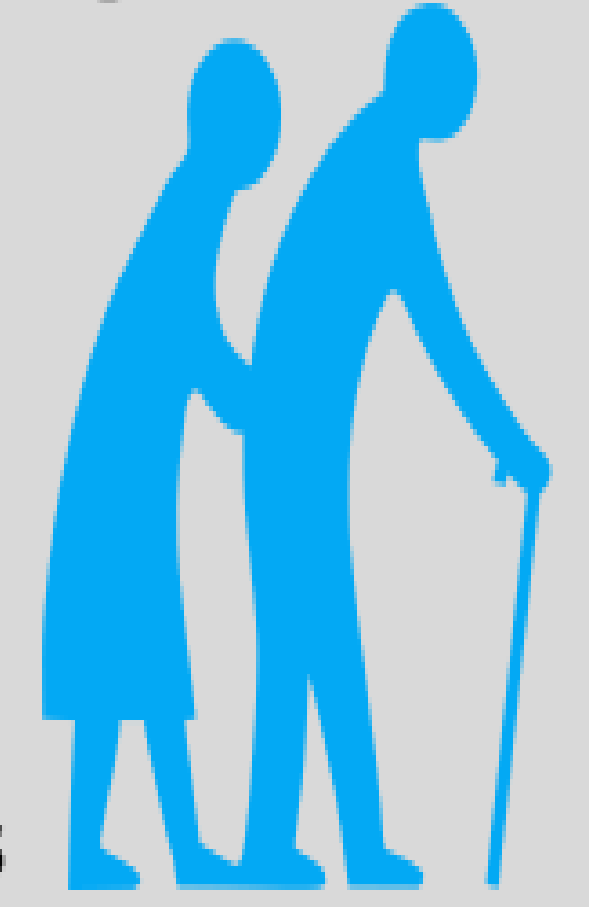
#### Study Purpose

to determine the level of digital health literacy and its associated factors among elderly in Jempol, Negeri Sembilan.

## Materials & Methods

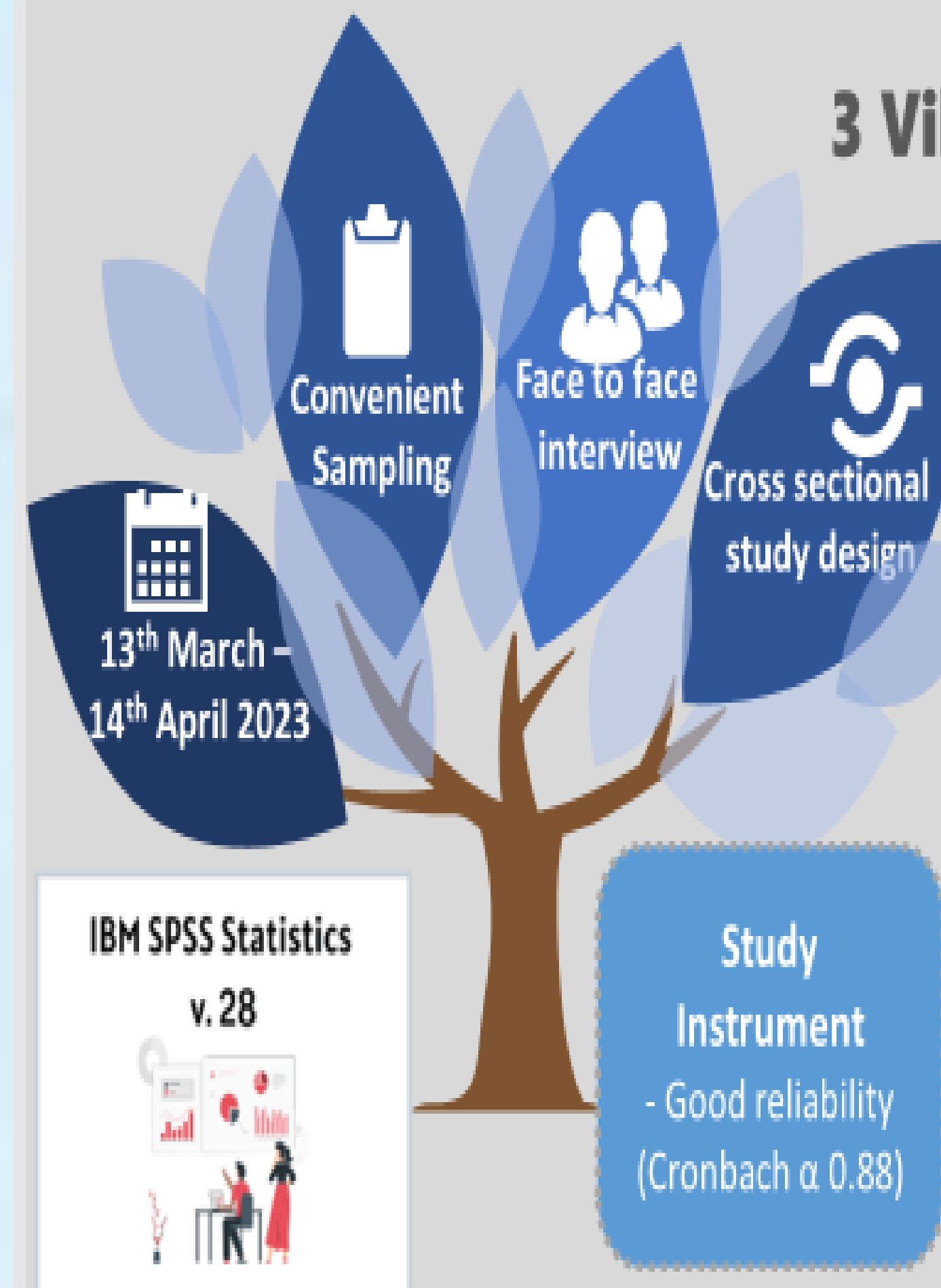
### 3 Villages in Jempol, Negeri Sembilan

- 1 Kg. Jempol
- 2 Kg. Serting Ilir
- 3 Kg. Mahsan



281 elderly aged ≥60 years

- Sociodemographic factors
- Internet usage behaviour (3)
- eHealth Literacy Scales (eHEALS) (4)

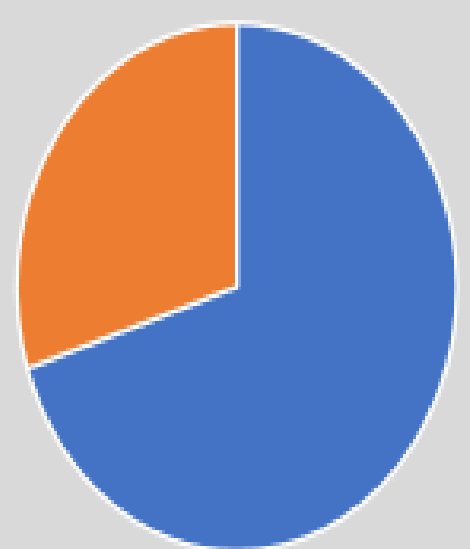


## Results & Discussion

### Descriptive Analysis

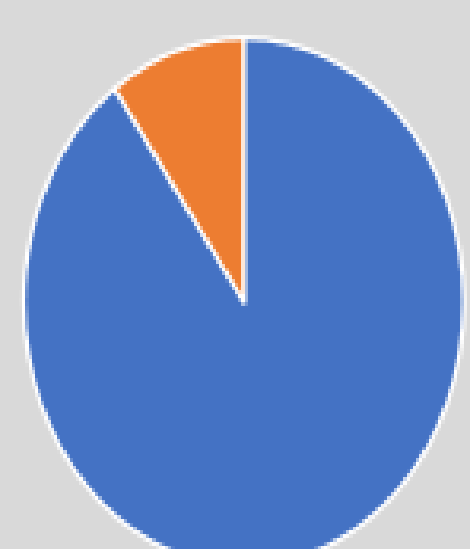
The median score of DHL was 12 (Interquartile range:18)

### Majority of the respondents are using



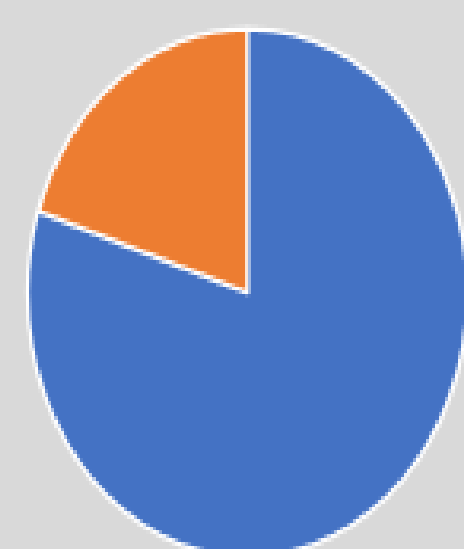
66.5%

Smart Phones



13.6%

Digital devices e.g. laptops, tablets, desktops



19.9%

Regular cellphone

### Bivariate Analysis

**Table 1.** Association between Sociodemographic Factors and Internet Usage Behaviour with DHL among Elderly using Spearman's rank Correlation (N=281)

Factors	Correlation coefficient (r)	p-value
<b>Sociodemographic Factors</b>		
Age (years)	-0.346	<0.001*
Monthly household income (RM)	0.440	<0.001*
<b>Internet Usage Behaviour</b>		
Duration of internet usage (years)	0.738	<0.001*
Time spent using the internet per day (hours)	0.703	<0.001*

(\*)-p<0.05 is significant

### Discussion

- The low prevalence of DHL among this study respondents is lower compared to previous study in developing country (3).
- This can be contributed to the rural demographic backgrounds:
  - lower education level
  - lower household income
  - unemployed
  - internet usage behaviour that is still limited.

### Main Purpose of Internet Usage

54.1%



Communication

News

40.6%

39.1%



Health Information

**Table 2.** Association between Sociodemographic Factors and Internet Usage Behaviour with DHL among Elderly using Mann-Whitney U and Kruskal Wallis test (N=281)

Factors	U <sup>a</sup> /H(df) <sup>b</sup>	p-value
<b>Sociodemographic Factors</b>		
Gender	8716.500 <sup>a</sup>	0.092
Ethnicity	18.749 (2) <sup>b</sup>	<0.001*
Marital status	20.103 (2) <sup>b</sup>	<0.001*
Highest education level	81.396 (4) <sup>b</sup>	<0.001*
Current occupational status	8.459 (2) <sup>b</sup>	0.015*
<b>Internet Usage Behaviour</b>		
Number of devices used	71.922 (2) <sup>b</sup>	<0.001*
Frequency of internet usage per week	130.929 (2) <sup>b</sup>	<0.001*
Frequency of receiving guidance	135.326 (3) <sup>b</sup>	<0.001*
Seeking health information	1347.000 <sup>a</sup>	<0.001*

(<sup>a</sup>)-Mann-Whitney U test. (<sup>b</sup>)-Kruskal-Wallis test. (\*)-p<0.05 is significant

## Summary

DHL is essential to improve the access and utilization of healthcare services, patient interaction and self-care management for better outcome of healthcare services. The purpose of this study was to determine the level of DHL among elderly in Jempol and its associated factors. The level of DHL among elderly was considerably low with median of 12 (Interquartile range:18). Factors associated with higher level of DHL among elderly:

#### Sociodemographic Factors

↓Age

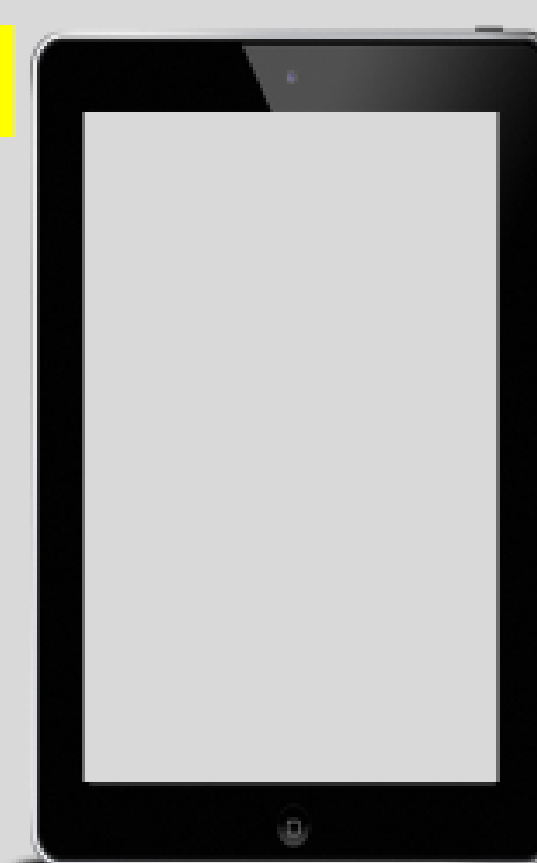
Malay

Married

↑Education level

↑Monthly household income

Currently working



#### Internet Usage Behaviour

↑Number of devices

↑Duration of Internet usage

↑Frequency per week Internet usage

↑Time spent per day using Internet

Keywords: Digital health literacy, health literacy, elderly, sociodemographic, Internet usage

## Conclusion & Recommendation

There is significant association between all the factors studied and DHL among elderly in this study except gender. This gives new insight into DHL among elderly in rural areas that can be used in future intervention programmes improvements. Health authorities should include the elderly population in digital health strategies for better health access, in line with the development of the digital age.

## References

1. Jaafar, N., Perialathan, K., Krishnan, M., Juatan, N., Ahmad, M., Sui Mien, T. Y., Salleh, K. Z., Isa, A., Mohamed, S. S., Abu Hanit, N. H., Rodzlan Hasani, W. S., Wati Mohamad, E. M., & Johari, M. Z. (2021). Malaysian Health Literacy: Scorecard Performance from a National Survey. *International Journal of Environmental Research and Public Health*, 18(11). <https://doi.org/10.3390/ijerph18115813>
2. Wong, S. S., Lim, H. M., Chin, A. J. Z., Chang, F. W. S., Yip, K. C., Teo, C. H., Abdullah, A., & Ng, C. J. (2022). eHealth literacy of patients attending a primary care clinic in Malaysia and its associated factors: A cross-sectional study. *DIGITAL HEALTH*, 8, 2055207622113533. <https://doi.org/10.1177/2055207622113533>
3. Liu, S., Zhao, H., Fu, J., Kong, D., Zhong, Z., Hong, Y., Tan, J., & Luo, Y. (2022). Current status and influencing factors of digital health literacy among community-dwelling older adults in Southwest China: a cross-sectional study. *BMC public health*, 22(1), 996. <https://doi.org/10.1186/s12889-022-13378-4>
4. Norman, C. D., Skinner, H. A. (2006). eHealth Literacy: Essential Skills for Consumer Health in a Networked World. *Journal of Medical Internet Research*, 8(2):e9. <https://doi.org/10.2196/jmir.8.2.e9>