

The acceptance of E-health interventions in dementia care: a concept analysis

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Acceptance integrates willingness and engagement across various dementia care stakeholders. Addressing cognitive barriers and caregiver burden ensures sustainable, equitable implementation. Four sequential stages include acceptance, usability, adoption, and adherence demanding technical proficiency, clinical utility, and relational support to ensure effective long-term care sustainability.

INTRODUCTION	METHODS	RESULTS	CONCLUSIONS	REFERENCES																																			
Dementia care is complex and e-health offers solutions but faces low adoption rates.¹ It is essentially critical to understand the concept of "acceptance" in dementia related e-health interventions because the care process inherently involves multiple stakeholders such as individuals living with dementia and their caregivers, families and aged care staff.² With a specific definition of acceptance, developers can map out how technologies affect these targeted groups.³ However, "acceptance" is frequently used but poorly defined in dementia literature.^{2,3} Acceptance Willingness Active engagement Intention for use Facilitating and usage factors Figure 1: The determinants of acceptance based on two indicators: willingness (behavioural intention) and active engagement (actual facilitating conditions and habit behaviours)	The model of Walker and Avant's 8 steps concept analysis is used to provide the key concepts of acceptance including willingness and active engagement of e-health interventions in healthy older adults, individuals with dementia, their caregivers, and aged care professionals for dementia care implementation. Walker & Avant's 8 steps Systematic search Select a concept Determine research's aim Identify all applications of the concept Determine attributes Identify a model case Identify contrary case Identify antecedents and consequences Define empirical referents Use PRISMA 2020 Keywords: e-health acceptance, intervention acceptance, technology acceptance, dementia Databases: Web of Science, PubMed, Google Scholar Date of publications: 01/01/2010 - 31/01/2026 Found 70 articles, excluded 40 Final inclusion of 30 articles	<table><tr><th>Population</th><th>Intention for Use (Willingness)</th><th>Active Engagement</th><th>Primary Thematic Attributes</th></tr><tr><td>Healthy Older Adults</td><td>●</td><td>●</td><td>Ease of use, reliability, enjoyment, learnable technology curiosity.</td></tr><tr><td>People Living with Dementia</td><td>○</td><td>●</td><td>Ease of use, assistance-dependency emotional rewards, personalise voice support</td></tr><tr><td>Family Caregivers</td><td>●</td><td>●</td><td>"Peace of mind," burden reduction, and peer support systems.</td></tr><tr><td>Aged Care Staff</td><td>●</td><td>○</td><td>Job relevance, diagnostic utility, and professional care standards.</td></tr></table>	Population	Intention for Use (Willingness)	Active Engagement	Primary Thematic Attributes	Healthy Older Adults	●	●	Ease of use, reliability, enjoyment, learnable technology curiosity.	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Aged Care Staff	●	○	Job relevance, diagnostic utility, and professional care standards.	<table><tr><th>Stage</th><th>Key Informatics Construct</th><th>Caregiver Example (e.g., Support App)</th></tr><tr><td>Acceptance</td><td>Behavioral Intention</td><td>Deciding to sign up for an app because of a "felt need" for support.</td></tr><tr><td>Usability</td><td>Effort Expectancy</td><td>Finding the interface intuitive and easy to learn during the first log-in</td></tr><tr><td>Adoption</td><td>Actual Utilization</td><td>Using the app's features regularly to track patient symptoms.</td></tr><tr><td>Adherence</td><td>Sustained Integration</td><td>Integrating the app into daily routines for 6+ months, resulting in lower stress</td></tr></table> E-health interventions in dementia care integrate technical proficiency and critical thinking to bridge the digital divide. Key antecedents, including cognitive status and caregiver burden, moderate the transition from initial willingness to sustained engagement. Targeted design and support enhance psychosocial outcomes, promoting social connectedness and digital equity	Stage	Key Informatics Construct	Caregiver Example (e.g., Support App)	Acceptance	Behavioral Intention	Deciding to sign up for an app because of a "felt need" for support.	Usability	Effort Expectancy	Finding the interface intuitive and easy to learn during the first log-in	Adoption	Actual Utilization	Using the app's features regularly to track patient symptoms.	Adherence	Sustained Integration	Integrating the app into daily routines for 6+ months, resulting in lower stress	1. Cho H, Cho E, You SB, Sefcik JS, Hodgson NA, Demiris G. Understanding Digital Literacy of Persons With Dementia and Their Caregivers: A Scoping Review and an Evolutionary Concept Analysis of Empirical Studies. <i>J Appl Gerontol</i>. 2026;45(4):742-766. doi:10.1177/07334648251348703 2. Yamato N, Sumioka H, Ishiguro H, Shiomi M, Kohda Y. Technology acceptance models from different viewpoints of caregiver, receiver, and care facility administrator: lessons from long-term implementation using baby-like interactive robot for nursing home residents with dementia. <i>Journal of Technology in Human Services</i>. 2023;41(4):296-321 3. Madeira R, Esteves D, Pinto N, Vercelli A, Vaz Patto M. Acceptance Factors and Barriers to the Implementation of a Digital Intervention With Older Adults With Dementia or Caregivers: Protocol for an Umbrella Review. <i>JMIR Res Protoc</i>. 2025;14:e56584. doi:10.2196/56584 CONTACT  LinkedIn ORCID Research Gate ISTAART Email 1: u114048102@cmu.edu.tw Email 2: phucnguyen@ump.edu.vn ALZHEIMER'S ASSOCIATION AAIC>26
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