

Exploring Patient Activation through Photovoice and Photo-Sharing in the Primary Care Setting among Older Adults with Multiple Chronic Conditions and Food Insecurity

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BACKGROUND

- Patient activation (PA) is important in the self-management of multiple chronic conditions (MCC).
- The impact of Photovoice and implementation of Photovoice components into the clinical setting has not been studied in the context of PA.

METHODS

Recruitment

- Patients who are 60+, food insecure, have 2+ chronic conditions, and speak English, Mandarin, Cantonese, and/or Spanish

Procedures

- Photo-taking: Photos were taken based on the prompt “What aspects of your everyday life affect what you eat and how much you have to eat?”
- Photovoice-guided interview: interviews where photos were shared and discussed with a research assistant
- Photo-based communication clinic visit: clinic visit where the same photos were shared and discussed with patients’ primary clinician followed by separate exit interviews with patient and primary clinician
- All interviews and clinic visits were audio-recorded

Analysis

- Transcripts were analyzed using a constructivist-grounded theory approach
- Photos were analyzed using a 2-step systematic process

DISCUSSION

Photo-based clinical interventions may be used to understand how older patients with MCC and medical and social complexity are active in their health and uncover complex socio-economic and environmental factors that impact patient care.

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A photo-based communication intervention can show how patients are actively managing their health and the impact of different factors



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RESULTS

Table 1. Characteristics of patients (n=8)

Age, mean (years)	66
Female, %	62.5
Black/African American, %	50
Latinx, %	25
Number of chronic conditions, mean	4.875
Food insecurity score, mean	4
Score 1-2 suggests marginal food security	
Score 3-5 suggests low food security	
Score 6-10 suggests very low food security	

Theme 1: Skills important to PA in chronic disease self-management and in patient’s adaptability living with food insecurity

Resourcefulness

Patient: “...my money was low so I tried to get something that would stretch... Does that have some popcorn there?...”
Interviewer: “Yeah, a bag of popcorn.”
Patient: “Yeah. I had some instant popcorn. Stuff that kind of swells in our stomach to fill you up.”



Utilizing Technology

Interviewer: “and why were you seeking delivery?”
Patient: “Well, because I can't drive anymore. ...they won't let me drive anymore because my legs are too weak.”
Interviewer: “Okay. You needed some delivery services because of that?...”
Patient: “Well...Instacart came online”

Figure 1: A patient’s grocery haul when finances are low

Theme 2: Behavioral habits related to patients’ MCCs, including both adherent and non-adherent actions

Adherence

Patient: “He made me a list... It has all the stuff I can and cannot eat.”
Interviewer: “Do you take that list with you when you go grocery shopping?”
Patient: “No, it's in my mind.”

Non-adherence

Patient: “Like I will have a little sweet... Which is not good, right? Desserts. But they're so tiny. They're little, like almost petite food. They're like tiny little cheesecake, tiny. Like little bites.”

Theme 3: Expressions of knowledge (or lack thereof) of patients’ MCCs in relation to diet, enabling both patient and clinician to recognize and respond to gaps of knowledge

Understanding of recommendations and MCCs

Patient: “...they just teach you how to eat in proportions...I like tacos but I prefer to make my own...you just have to realize because every taco is like 15g so if you eat three, that's 45g. I kind of work with the grams. That way you can control the proportions that you're eating...you can balance your weight too.”

Theme 4: Beliefs patients hold regarding the self-management of their MCCs

Sub-theme 1: Descriptions of practices patients learned outside of the health care system

Patient: “It's one of those anti-inflammatory lists.”
Interviewer: “...is that a list that your doctor gave you?”
Patient: “No, I made that for me. One is anti-inflammatory. The other is fiber. I just read that on the internet”

Sub-theme 2: Discussions of patient’s beliefs in their self-management and challenges in their care

Patient: “...I'm trying to follow the kidney diet... Those foods that I'm eating on a kidney diet are more expensive... I'm trying to find the balance because sometimes I don't like those foods at all and then I end up giving them away...so that's just wasting money.”

Theme 5: Photos provide additional details that may contribute to PA



Figure 2: Background of photo shows cookware and appliances underneath a dining table, which may suggest a patient’s capacity to make home-cooked meals



Figure 3: Snacks were present in the background of photos (cookies above), which may prompt questions about behavioral habits outside of regular meals