Is research on patient portals attuned to health equity?

What you need to know:
This scoping review examined how research on patient portals addresses health equity. “Health equity” means that people get the health care and resources needed to support their health, and are not disadvantaged because of socio-economic factors (e.g., gender, race, ethnicity, income, etc.). The main focus on barriers in patient portal research may be unintentionally placing responsibility with the patient populations already experiencing the most health inequities.

What is this research about?
Patient portals are a digital health technology that links patients to administrative functions and information in their electronic health record. With the advancement of patient portals, there are growing concerns of increasing health inequities. The populations that could potentially gain the most benefits from patient portals, could also be at further risk of poorer health outcomes if health equity is not considered when implementing and designing patient portals.

This scoping review examined how research on patient portals addresses health equity guided by these questions:

1. What health equity concepts are addressed in patient portal research?
2. What are the gaps?
3. Is health inequity explicitly addressed in studies on patient portals?
4. What novel approaches and interventions to reduce health inequities are being done in patient portal research?

What did the researcher do?
As part of the review, the researchers searched four databases with the search terms “patient portal” in combination with a list of health equity terms relevant in the digital health context. The researchers independently reviewed the literature, and then applied the eHealth Equity Framework to develop search terms and analyze the included studies for key themes and recommendations.
What did the researcher find?

The researchers included 65 articles in the review and applied the eHealth Equity Framework for four key findings:

1. Lack of system-level, such as policies and governance structures may further inequities;
2. Healthcare providers’ assumptions on who uses technology can influence the populations that use patient portals;
3. Equitable portal implementation can be supported through diverse user-centered design; and
4. Most common recommendations for equitable portal use are focused on individual patient strategies, such as training and education to address health literacy.

The researchers recommend applying health equitable approaches in all stages of the portal lifecycle—policy, practice, research and implementation, to support equitable health outcomes related to patient portals.

Recommendations for future research:

- More diverse representation including Indigenous perspectives, gender and sex minorities and people with disabilities
- Unintended outcomes when caregivers and family members gain access to patient portals
- Strategies for patients with limited social supports

How can you use this research?

This research will help policymakers, practitioners, researchers and other stakeholders develop policies to support equitable health outcomes related to the lifecycle of patient portal aims, legislation, implementation and use. The full article includes suggestions for adapting portal design for different populations, privacy and security concerns, concerns around caregiver access and training.

About the researchers

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Keywords

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