



ScholarWorks

[IUPUIScholarWorks Repository](#) → [Open Access Faculty Articles](#) → [Open Access Policy Articles](#) → [View Item](#)

Self-care Barriers Reported by Emergency Department Patients With Acute Heart Failure: A Sociotechnical Systems-based Approach

[Holden, Richard J.](#) ; [Schubert, Christiane C.](#) ; [Eiland, Eugene C.](#) ; [Storrow, Alan B.](#) ; [Miller, Karen F.](#) ; [Collins, Sean P.](#)

Permanent Link: <http://hdl.handle.net/1805/5913>

Link:

Keywords:

[acute heart failure](#) ; [self-care barriers](#) ; [sociotechnical systems model](#)

Date: 2015-01

Cite As:

Holden, R. J., Schubert, C. C., Eiland, E. C., Storrow, A. B., Miller, K. F., & Collins, S. P. (2015). Self-care Barriers Reported by Emergency Department Patients With Acute Heart Failure: A Sociotechnical Systems-Based Approach. *Annals of Emergency Medicine*.

Abstract:

Study objective We pilot tested a sociotechnical systems-based instrument that assesses the prevalence and nature of self-care barriers among patients presenting to the emergency department (ED) with acute heart failure. **Methods** A semistructured instrument for measuring self-reported self-care barriers was developed and administered by ED clinicians and nonclinician researchers to 31 ED patients receiving a diagnosis of acute heart failure. Responses were analyzed with descriptive statistics and qualitative content analysis. Feasibility was assessed by examining participant cooperation rates, instrument completion times, item nonresponse, and data yield. **Results** Of 47 distinct self-care barriers assessed, a median of 15 per patient were indicated as “sometimes” or “often” present. Thirty-four specific barriers were reported by more than 25% of patients and 9 were reported by more than 50%. The sources of barriers included the person, self-care tasks, tools and technologies, and organizational, social, and physical contexts. Seven of the top 10 most prevalent barriers were related to patient characteristics; the next 3, to the organizational context (eg, life disruptions). A preliminary feasibility assessment found few item nonresponses

My Account

[Login](#)
[Register](#)

Statistics

[View Usage](#)

or comprehension difficulties, good cooperation, and high data yield from both closed- and open-ended items, but also found opportunities to reduce median administration time and variability. Conclusion An instrument assessing self-care barriers from multiple system sources can be feasibly implemented in the ED. Further research is required to modify the instrument for widespread use and evaluate its implementation across institutions and cultural contexts. Self-care barriers measurement can be one component of broader inquiry into the distributed health-related “work” activity of patients, caregivers, and clinicians.

Files in this item



Name: holden-2015-self- ...

[View/Open](#)

Size: 1.053Mb

Format: PDF

This item appears in the following Collection(s)

- [Department of BioHealth Informatics Articles](#)
- [Open Access Policy Articles](#)

[About Us](#) | [Contact Us](#) | [Send Feedback](#)

Fulfilling the Promise

[Privacy Notice](#)

 [Copyright](#) ©2015 The Trustees of [Indiana University](#), [Copyright Complaints](#)