

NAPCRG 52nd Annual Meeting — Abstracts of Completed Research 2024.

Submission Id: 5945

Title

Involvement in Health-Related Decision Making Among US Adults: Findings from the Health Information National Trends Survey

Priority 1 (Research Category)

Population health and epidemiology

Presenters

Aisha Langford, PhD, MPH, Jinping Xu, MD, MS, Nancy Buderer, MS

Abstract

Context: Involvement in health-related decisions is an important aspect of patient-centered care and a key component of shared decision making, a communication process by which patients and clinicians work together to make optimal health care decisions that align with what matters most to patient.

Objective: To evaluate sociodemographic, medical condition, and medical experience correlates of feeling involved in decisions about health care.

Study Design and Analysis: Secondary, cross-sectional data analysis of the 2022 Health Information National Trends Survey (HINTS 6, N=6252). We evaluated participants with complete data for all variables of interest, therefore analyses are based on a sample size of 4565. The present study explored univariate and multivariate associations between key correlates of interest and involvement in health-related decisions (main outcome).

Dataset: National Cancer Institute's HINTS 6 data, which were collected from March through November 2022.

Population Studied: Non-institutionalized US adults aged 18 years and older.

Instrument: Self-administered paper or web survey.

Outcome measure: “In the past 12 months, how often did your doctors, nurses, or other health professionals involve you in decisions about your health care as much as you wanted?” Response options were always, usually, sometimes, and never. We compared ‘always’ (n=2425, 52.9% weighted) to all other responses (n=2140, 47.1% weighted), as Healthy People 2030 has a goal to increase the proportion of US adults whose health care providers ‘always’ involve them in health-related decisions.

Results: Hispanic and Asian adults (compared to White adults) and those who had been racially discriminated against when getting medical care had lower odds of ‘always’ being involved in their health care decisions. Respondents with a medical history of depression and those under or normal weight (compared to obese) also had lower odds of ‘always’ being involved. Higher odds of ‘always’ being involved in health care decisions were found for respondents who were very confident filling out medical forms, completely confident in their ability to take good care of their health, had very easy/easy understanding of medical statistics, or were very trustful of the healthcare system.

Conclusions: Strategies to improve health literacy and perceived trustworthiness of healthcare systems and clinicians may enhance perception of involvement in health-related decisions among US adults

Downloaded from the Annals of Family Medicine website at www.AnnFamMed.org. Copyright © 2024 Annals of Family Medicine, Inc. For the private, noncommercial use of one individual user of the Web site. All other rights reserved. Contact copyrights@aafp.org for copyright questions and/or permission requests.