

Acceptance of the Artificial Pancreas: Comparing the Effect of Technology Readiness, Product Characteristics and Social Influence between Invited and Self-Selected Respondents

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BACKGROUND

- Human factors that may affect acceptance of artificial pancreas (AP) systems have been investigated in small samples of highly motivated, self-selected persons with type 1 diabetes (T1DM) with a focus on product characteristics.
- A robust and standardized questionnaire to investigate the effect of human factors on AP acceptance is lacking.

Aims

- To investigate the impact of technology readiness, product characteristics and social influence on AP acceptance in a larger sample, including both self-selected and invited respondents with T1DM.
- To develop a reliable and valid questionnaire.

METHODS

Subjects

- Self-selected group: convenience sample of 601 persons with T1DM from >3000 persons who had indicated their wish to participate in scientific research into the AP on the website of Inreda Diabetic (Goor, The Netherlands).
- Invited group: 270 persons with T1DM listed using insulin pump therapy at the Rijnstate Hospital (Arnhem, The Netherlands).

Survey

- Intention to use the AP was chosen as measure of AP acceptance.
- The variables (Table 1) were grounded in well-established theories: the Technology Readiness Index [1], the Technology Acceptance Model [2], Innovation Diffusion Theory [3] and Theory of Planned Behavior [4].
- Questions were answered on a 7-point Likert scale (1 to 7).
- Score per variable were calculated as mean of the questions.
- Also information about demographics, current diabetes treatment, and the satisfaction with the current treatment (Diabetes Treatment Satisfaction Questionnaire [5]) was collected.
- The introduction to the questionnaire described and showed the AP system of Inreda Diabetic [6].

Measured variables with the number of questions and Cronbach's α

| Table 1 | Variable | Nr. of questions | Cronbach's α |
|-----------------------------|------------------|------------------|---------------------|
| Technology readiness [1] | Optimism | 6 | .866 |
| | Innovativeness | 5 | .886 |
| | Discomfort | 5 | .792 |
| | Insecurity | 7 | .814 |
| Product characteristics [7] | Usefulness | 6 | .906 |
| | Compatibility | 3 | .854 |
| | Complexity | 4 | .893 |
| Social influence [7] | Social influence | 2 | .819 |
| Acceptance [2] | Intention to use | 2 | .895 |

REFERENCES

- Parasuraman A. Technology Readiness Index (TRI) a multiple-item scale to measure readiness to embrace new technologies. *Journal of service research*. 2000;2(4):307-320.
- Venkatesh V, Davis FD. A theoretical extension of the technology acceptance model: Four longitudinal field studies. *Management science*. 2000;46(2):186-204.
- Moore GC, Benbasat I. Development of an instrument to measure the perceptions of adopting an information technology innovation. *Information systems research*. 1991;2(3):192-222.
- Ajzen I. The theory of planned behavior. *Organizational behavior and human decision processes*. 1991;50(2):179-211.
- Bradley C. The diabetes treatment satisfaction questionnaire: DTSQ. *Handbook of Psychology and Diabetes: a guide to psychological measurement in diabetes research and practice*. 1994:111-132.
- Blauw H, van Bon AC, Koops R, DeVries JH. Performance and safety of an integrated bihormonal artificial pancreas for fully automated glucose control at home. *Diabetes, Obesity and Metabolism*. 2016;18(7):671-677.
- Venkatesh V, Morris MG, Davis GB, Davis FD. User acceptance of information technology: Toward a unified view. *MIS Quarterly*. 2003;27(3):425-478.

RESULTS

Baseline characteristics

- The survey was completed by 425 self-selected persons (response rate: 69.7%) and 109 invited persons (response rate: 42.2%).
- Compared to the self-selected respondents, the invited respondents were older, had diabetes for a longer period, were more satisfied with their treatment, perceived less frequently hyperglycemia and more often used insulin pump therapy.

Comparison of the variables between self-selected and invited respondents

| Table 2 | Self-selected respondents | Invited respondents | p-value |
|----------------------|---------------------------|---------------------|---------|
| Optimism | 5.90 ± 0.86 | 5.61 ± 1.00 | .007 |
| Innovativeness | 4.99 ± 1.24 | 4.66 ± 1.40 | .025 |
| Discomfort | 2.97 ± 1.21 | 2.86 ± 1.16 | .397 |
| Insecurity | 3.13 ± 0.97 | 3.18 ± 0.89 | .671 |
| Perceived usefulness | 6.06 ± 0.84 | 5.66 ± 1.04 | <.001 |
| Compatibility | 6.21 ± 0.85 | 5.88 ± 1.14 | .006 |
| Complexity | 2.13 ± 1.04 | 2.31 ± 1.06 | .129 |
| Social influence | 4.95 ± 1.66 | 4.66 ± 1.65 | .105 |
| Intention to use | 6.49 ± 0.82 | 6.10 ± 0.99 | <.001 |

Data are mean ± SD. Independent t-tests, two-tailed.

Relationship between the variables and the intention to use the AP

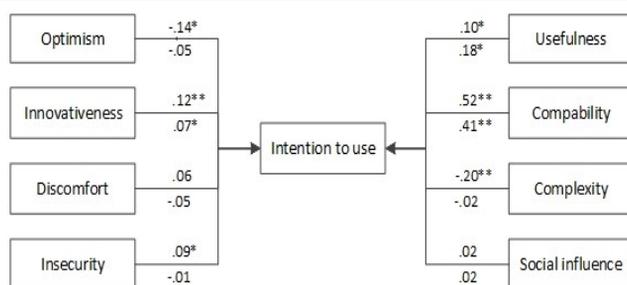


Figure 1. Multiple regression with intention to use as dependent variable for invited (above the line) and self-selected (below the line) respondents separately. Data represent standardized β , * $p < .05$, ** $p < .001$.

CONCLUSIONS

- Product characteristics have a larger impact on AP acceptance than technology readiness, while social influence does not seem to impact AP acceptance.
- As the (strength of) influencing factors differ between self-selected and invited persons, researchers and product developers should be cautious when relying on self-selected persons with T1DM in the design, development, and testing of AP systems.
- A valid and reliable questionnaire to measure AP acceptance and potentially explanatory factors was developed.