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# Technology acceptability, acceptance and adoption - definitions and measurement

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**ABSTRACT**

There is much interest in the development of personal health technologies, but many health technologies involve the capture and use of deeply personal and sensitive data, particularly in the space of mental health. For many years, technology researchers have examined concepts such as acceptability and acceptance, but we argue that these are even more important in the health domain, as the possible intrusiveness of technologies could lead to users refusing to even try a technology. During the design process of technology and in formative and summative evaluation, researchers may wish to explicitly address and measure acceptability and related constructs, as well as at different points in the user experience (before use, on first use, after some period of usage). While a range of definitions have been offered independently, many researchers conflate related terms and may benefit both from a coherent set of definitions, and associated approaches to measurement. In this paper, we describe a systematic review of the usage of acceptance, acceptability, and adoption within the mobile health literature, and present a preliminary analysis of the most recent literature.

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## INTRODUCTION

Technology acceptance is one of the major challenges faced by the designers of new technologies. This is particularly true in healthcare: although technology is becoming increasingly pervasive, patients are a vulnerable population and their data is considered sensitive. This sensitivity is greater in the case of stigmatized health conditions such as mental health [6, 23]. In addition, the perception of a technology by healthcare providers is likely to affect delivery, especially if it is not considered to be sufficiently acceptable [24]. In the last 10 years, we have seen an increasing number of studies addressing the issue of acceptance of mobile health systems. However, this is not an easy task as the user journey towards technology acceptance is complex and often non-linear. A patient who decides to try an application may not use it in the long run; similarly, we cannot be sure that someone who has stopped using a system will not go back to it later [17]. Different stages punctuate the user journey with technology where they, consciously or not, repeatedly make the decision to keep using the system or to give up on it [22]. Technology developers and researchers must address these issues in the design and evaluation of new healthcare technologies, and across the different stages of the users experience of the system.

## BACKGROUND

An evolving terminology and range of definitions for these stages can be found in the literature. According to [9, 16, 20], technology *acceptability* is one's perception of a system before use, while technology *acceptance* is one's perception of the system after use. According to Renaud *et al.* [21] technology *adoption* is a multi-phase process starting with “deciding to adopt (selecting, purchasing or committing to use it) and then achieving persistent use”. In Karahanna *et al.*, a distinction is made between “pre-adoption and post-adoption (continued use)” [13]. Thus, both phases of adoption, and sustained engagement [10] are distinctive characteristics. While definitions of these terms are available, it would be interesting to know whether recent studies have adopted a common terminology to refer to the different stages of the user journey with a technology. If consistent definitions are not used, this can result in misunderstanding of what studies actually measure and makes comparison of results difficult. Even within the use of single terms, there may be confusion, and a review conducted by Sekhon *et al.* [24] shows the ambiguity around the concept of technology acceptability in the healthcare literature. Building on this, we present in this paper the preliminary results of a systematic review of how the 3 intertwined concepts of technology *acceptability*, *acceptance* and *adoption* are referred to and measured in mobile health, focusing on literature published in the last 2 years. We hope to gain insight into the different meanings associated with these concepts and see to what degree they match the definitions offered within the literature.

To gain a better understanding of what motivates a person's choice to use a system, a number of studies have explored the factors influencing technology acceptance. The most well-known model articulating those factors is probably the Technology Acceptance Model (TAM) [8]. More recent variations of this model such as TAM2 [25] and UTAU [26] exist along with other models specific to healthcare [7, 11, 12, 14]. However, none of these models differentiate the specific stages of technology acceptance in the user journey, or evoke a possible evolution of the influencing factors over time.

**Table 1: Distribution of main codes (n=30)**

Codes	Frequency (%)
<b>Definition</b>	
<b>Cited reference</b>	
Yes	5 (16.7%)
No	25 (83.3%)
<b>Domain</b>	
Health	6 (20.0%)
Mental health	23 (76.7%)
Both	1 (3.3%)
<b>Goal</b>	
Inform design	5 (16.7%)
Evaluate a system	24 (80.0%)
Review the literature	1 (3.3%)
Define a concept	0 (0.0%)
<b>Measurement</b>	
Standardised survey	11 (31.4%)
Customised survey	15 (42.9%)
Qualitative feedback	3 (8.6%)
Usage	4 (11.4%)
Adherence	0 (0.0%)
<b>Timeline</b>	
Pre-use	6 (17.1%)
Initial use	5 (8.6%)
Post-use	20 (74.3%)
<b>Concept as in literature</b>	

## METHOD

### Search strategy

We searched the PubMed database for papers that address technology acceptance in the broad sense. Following preliminary searches to assess the relevance of search criteria, a search of the MeSH terms "Patient Acceptance of Health Care" and "mobile applications" resulted in a corpus of 287 articles. We present here a preliminary analysis of the subset of papers published since 2017 (116 papers). The aim was to obtain a broadly representative and recent sample from the digital health literature rather than an exhaustive one.

### Relevance criteria and coding

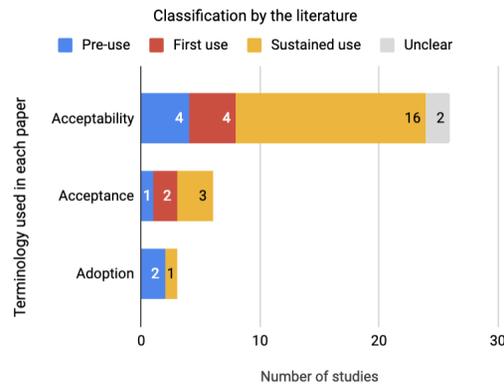
We considered as relevant an article that contained at least one of our terms of interest (*acceptability*, *acceptance*, and *adoption*) or the associated verbs (i.e. accept or adopt). In addition, the article had to give a definition for the concept in question, which could be a full definition, a synonym, a comparison, or a cited definition. We excluded papers that did not contain any of the terms or didn't give a definition. Out of the 116 articles, 5 were excluded on the basis of title, 28 on abstract, 51 on full text and 2 for lack of access. This gave us a final corpus of 30 relevant papers.

## PRELIMINARY RESULTS

The results of the coding of the 30 relevant articles can be found in Table 1. Our analysis of this corpus reveals that technology acceptance in the broad sense is associated with various meanings and measurements.

### Definitions

We observe that, in most cases, the terminology used is not consistent with the definitions given in the literature (see Figure 1). Out of the 24 papers that used the term *acceptability* (excluding those where interpretation was unclear), the majority (20) measure perception after either initial or sustained usage. This may be that the articles have their own definition of *acceptability*. Only 4 papers refer to technology *acceptability* in the sense of users' perception pre-use, sometimes comparing



**Figure 1: Proportion of acceptability, acceptance and adoption studies. Note: there is some overlap due to a small number of papers using multiple terms.**

it to users' interest or willingness to use a system. The rest of the studies understand technology *acceptability* as either user satisfaction, positive feedback received, system usability, user engagement, the actual use of a system or the completion of the study. Some studies also define it as a mix of these concepts. Concerning the articles referring to technology acceptance, 1 (out of 6) interprets it as pre-use (inconsistent with the definition). Finally, 1 paper (out of 3) refer to technology adoption based on longer term use (consistent with the definition); the other two discuss users' perception before use (acceptability). On a higher level, we could think by looking at this corpus that very few studies (3) explore the adoption of a system. However, using the definitions offered within the literature, over half the papers (18) actually explore the longer term usage of a technology, and adoption may be a helpful concept for discussing these studies.

Among the papers that define the terms by reference to the literature, [15] cites the definition of technology adoption given by Agarwal *et al.* [1]. The Fit between Individuals, Task and Technology (FITT) framework [2] is used in [18] as a basis of their study of technology acceptability. However, this framework was intended to measure technology adoption. Finally, Davis' Technology Acceptance Model (TAM) is cited to support a definition in three papers, respectively measuring technology acceptability [27], acceptance [3] and adoption [5]. This shows that the TAM can be interpreted in different ways. The rest of the papers do not refer to any literature models or definitions.

### Measurements

The studies of our corpus show a strong preference for the measurement by surveys (Table 2), most often custom surveys (i.e. non standardised) with an average percentage of use of 56% across the 3 concepts. The problem posed by using ad-hoc surveys is that there is no coherence across studies in the assessment of technology acceptability, acceptance, and adoption. The lack of standardised tools to assess these concepts is what probably motivates researchers to create their own assessment tools. This contributes to blurring even more the differences between concepts. More standardised tools are needed if we aim to have objective and coherent measures of the user perception of technology at the different stages of their journey.

Despite the existence of definitions cited earlier, we observe that a large part of the literature uses the terms technology *acceptability*, *acceptance* and *adoption* interchangeably [4], or in place of other concepts such as user satisfaction [3] or engagement [19]. This creates a confusion about the meaning of these terms and blurs the differences that exist between the 3 constructs. For example, many studies stating that they measure a system's acceptability (i.e. participants' perception before the use) in reality measure longer term usage, and so acceptability or adoption may be more appropriate terms. The way a study describes what it measures is crucial for a good understanding of their results and for comparing them to those of similar studies. In turn, this terminological confusion creates a misunderstanding of the user's relationship with technology over time.

**Table 2: Measurements performed.**

[Studies that use terms interchangeably are excluded from this table. Some studies performed several measurements.]

Measurement	# of studies	Frequency (%)
<b>Acceptability</b>	4 studies	
Standardised survey	2	(50%)
Custom survey	3	(75%)
<b>Acceptance</b>	5 studies	
Standardised survey	2	(40%)
Custom survey	2	(40%)
Completion of task	1	(20%)
<b>Adoption</b>	16 studies	
Standardised survey	4	(25%)
Custom survey	9	(56%)
Usage	3	(19%)
Qualitative feedback	1	(6%)

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## CONCLUSION AND DISCUSSION

The preliminary analysis presented in this paper shows that researchers associate different meanings to the concepts of technology *acceptability*, *acceptance*, and *adoption*, and sometimes refer to them interchangeably. Relatively few studies refer to literature definitions or models to support their understanding of the concepts. However, we also found that the literature models and definitions are understood in different ways and sometimes used in discussion of concepts that they do not cover well. The fact that a large number of studies give their own definition of the concepts shows that the definitions offered by the literature are not widely known or used. Similarly, the lack of standardised measurement tools lead researchers to develop their own assessment tools, which illustrates the difficulties faced by researchers in objectively measuring the level of acceptability, acceptance and adoption of technologies and makes it difficult to compare the results of related studies. We believe that a common and coherent terminology and standardised measurement tools are key to address the issue of technology acceptance as a community and hope that studies like this one will bring us closer to an accepted set of definitions and assessment framework.

## REFERENCES

- [1] Ritu Agarwal and Jayesh Prasad. 1997. The role of innovation characteristics and perceived voluntariness in the acceptance of information technologies. *Decision sciences* 28, 3 (1997), 557–582.
- [2] Elske Ammenwerth, Carola Iller, and Cornelia Mahler. 2006. IT-adoption and the interaction of task, technology and individuals: a fit framework and a case study. *BMC medical informatics and decision making* 6, 1 (2006), 3.
- [3] Kelly Brittain, Kendra Kamp, Christos Cassandras, Zachary Salaysay, and José Gómez-Márquez. 2018. A Mobile App to Increase Informed Decisions About Colorectal Cancer Screening Among African American and Caucasian Women: A Pilot Study. *Gastroenterology Nursing* 41, 4 (2018), 297–303.
- [4] Joan Cahill, Sean McLoughlin, Michael O'Connor, Melissa Stolberg, and Sean Wetherall. 2017. Addressing Issues of Need, Adaptability, User Acceptability and Ethics in the Participatory Design of New Technology Enabling Wellness, Independence and Dignity for Seniors Living in Residential Homes. In *Human Aspects of IT for the Aged Population. Aging, Design and User Experience*, Jia Zhou and Gavriel Salvendy (Eds.). Springer International Publishing, Cham, 90–109.
- [5] Yoke Chen, Jyh Wong, Ainaa Ayob, Nor Othman, and Bee Poh. 2017. Can Malaysian young adults report dietary intake using a food diary mobile application? A pilot study on acceptability and compliance. *Nutrients* 9, 1 (2017), 62.
- [6] Alina Coman and Corina Sas. 2016. A hybrid intervention for challenging the stigma of mental illness. *Bulletin of the Transilvania University of Brasov* 9, 58 (2016), 73–80.
- [7] Kay Connelly. 2007. On developing a technology acceptance model for pervasive computing. In *9th International Conference on Ubiquitous Computing (UBICOMP)-Workshop of Ubiquitous System Evaluation (USE)*, Springer, Innsbruck, Austria. Citeseer, ACM, New York, NY, USA, 520.
- [8] Fred D Davis. 1986. *A technology acceptance model for empirically testing new end-user information systems: theory and results*. Ph.D. Dissertation. Sloan School of Management. <https://doi.org/oclc/56932490> arXiv:<http://www.jstor.org/stable/2632151>
- [9] V. Distler, C. Lallemand, and T. Bellet. 2018. Acceptability and Acceptance of Autonomous Mobility on Demand: The Impact of an Immersive Experience. In *Proc. CHI 2018 (CHI '18)*. ACM, New York, NY, USA, Article 612, 10 pages.

- [10] Kevin Doherty and Gavin Doherty. 2018. Engagement in HCI: Conception, Theory and Measurement. *ACM Comput. Surv.* 51, 5, Article 99 (Nov. 2018), 39 pages. <https://doi.org/10.1145/3234149>
- [11] Kaili Dou, Ping Yu, Ning Deng, Fang Liu, YingPing Guan, Zhenye Li, Yumeng Ji, Ningkai Du, Xudong Lu, and Huilong Duan. 2017. Patients' Acceptance of Smartphone Health Technology for Chronic Disease Management: A Theoretical Model and Empirical Test. *JMIR mHealth and uHealth* 5, 12 (06 Dec 2017), e177. <https://doi.org/10.2196/mhealth.7886>
- [12] Yiwen Gao, He Li, and Yan Luo. 2015. An empirical study of wearable technology acceptance in healthcare.
- [13] Elena Karahanna, Detmar W. Straub, and Norman L. Chervany. 1999. Information Technology Adoption Across Time: A Cross-sectional Comparison of Pre-adoption and Post-adoption Beliefs. *MIS Q* 23, 2 (June 1999), 183–213.
- [14] Jeongeun Kim and Hyeoun Ae Park. 2012. Development of a health information technology acceptance model using consumers' health behavior intention. *Journal of Medical Internet Research* 14, 5 (01 Oct 2012), e133.
- [15] Kyunghye Lee, Hyeon Kwon, Byungtae Lee, Guna Lee, Jae Ho Lee, Yu Rang Park, and Soo-Yong Shin. 2018. Effect of self-monitoring on long-term patient engagement with mobile health applications. *PLoS one* 13, 7 (2018), e0201166.
- [16] N. Martin, S. Erhel, E. Jamet, and G. Rouxel. 2015. What Links Between User Experience and Acceptability?. In *Proc. 27th Conference on L'Interaction Homme-Machine (IHM '15)*. ACM, New York, NY, USA, Article 34, 6 pages.
- [17] Mark Matthews and Gavin Doherty. 2011. In the Mood: Engaging Teenagers in Psychotherapy Using Mobile Phones. In *Proc. CHI 2011 (CHI '11)*. ACM, New York, NY, USA, 2947–2956. <https://doi.org/10.1145/1978942.1979379>
- [18] A. Noblin, M. Shettian, K. Cortelyou-Ward, and J. Schack Dugre. 2017. Exploring physical therapists perceptions of mobile application usage utilizing the FITT framework. *Informatics for Health and Social Care* 42, 2 (2017), 180–193.
- [19] Elizabeth O Ofili, Priscilla E Pemu, Alexander Quarshie, ErnestT Alema Menash, Latrice Rollins, Folake Ojutalayo, Aturra Mccaslin, and Bethany Saint Clair. 2018. Democratizing discovery health with N= Me. *Transactions of the American Clinical and Climatological Association* 129 (2018), 215–234.
- [20] Stéphanie Quiguer. 2013. *Acceptability, acceptance and appropriation of Intelligent Transport Systems : development of a multidimensional and activity driven co-conception approach*. Theses. Université Rennes 2.
- [21] Karen Renaud and Judy van Biljon. 2008. Predicting Technology Acceptance and Adoption by the Elderly: A Qualitative Study. In *Proc. 2008 Annual Research Conference of the South African Institute of Computer Scientists and Information Technologists on IT Research in Developing Countries (SAICSIT '08)*. ACM, New York, NY, USA, 210–219.
- [22] A. Salovaara, Kristina Hook, Keith Cheverst, Michael Twidale, Matthew Chalmers, and Corina Sas. 2011. *Appropriation and creative use: linking user studies and design*. ACM, New York, NY, USA, 37–40. <https://doi.org/10.1145/1979742.1979585>
- [23] Pedro Sanches, Axel Janson, Pavel Karpashevich, Camille Nadal, Chengcheng Qu, Claudia Dauden Roquet, Muhammad Umair, Charles Windlin, Gavin Doherty, Kristina Hook, and Corina Sas. 2019. HCI and Affective Health: Taking stock of a decade of studies and charting future research directions. In *Proc. CHI 2019*. ACM, New York, NY, USA.
- [24] M. Sekhon, M. Cartwright, and J. Francis. 2017. Acceptability of healthcare interventions: an overview of reviews and development of a theoretical framework. *BMC Health Services Research* 17, 1 (26 Jan 2017), 88.
- [25] Viswanath Venkatesh and Fred D Davis. 2000. A theoretical extension of the technology acceptance model: Four longitudinal field studies. *Management science* 46, 2 (2000), 186–204.
- [26] Viswanath Venkatesh and Xiaojun Zhang. 2010. Unified theory of acceptance and use of technology: US vs. China. *Journal of global information technology management* 13, 1 (2010), 5–27.
- [27] Zhangxiang Zhu, Yongmei Liu, Xiaoling Che, and Xiaohong Chen. 2018. Moderating factors influencing adoption of a mobile chronic disease management system in China. *Informatics for Health and Social Care* 43, 1 (2018), 22–41.