



CRITICAL LITERATURE REVIEW FOR DOCTORAL RESEARCH (LCDB7009)

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Part 1: Exploring the purpose of the literature.

1. Introduction:

Critically reading the literature is a necessary ability that will be required during a career of a researcher (Fernandez,2019). The literature review can be defined as a section of the thesis that contains thorough references to related research and theory on a particular topic (Ridley,2012). As stated by Ridley, it relates to the procedure of writing the review that occurs in the thesis. In addition, she defined it as a continuous procedure that starts when a researcher takes up the first book or article relating to his topic and continues until the final text is completed. Furthermore, Ridley said that the literature review aids in the formulation of research questions, the identification of relevant theories, and the selection of appropriate methodology (Ridley,2012). Other writers' definitions of the literature review demonstrate the diverse importance that different study guides focus on their role and purpose. In accordance with Bell, the literature review should be concise and provide an overview of the current research as well as important questions in a specific area (Bell,2010). According to Hart (1998), doing a literature review entails picking papers "that include information, ideas, facts, and evidence published from a certain position to achieve certain purposes or convey certain opinions on the nature of the issue". Efron asserts the literature review examines, assesses, and synthesises research findings, theories, and practices by academic researchers linked to a specific topic(Efron,2018).

A literature review is essential as part of the research process because it allows researchers to contextualise their work, to convey the wider picture that gives the background and fills the gap for the investigation.

2. Structure and content of literature review:

A literature review should be ordered similarly to an academic paper, with an introduction, a body, and a summary. Ridley asserts that the introduction is the place where the writer describes the topic and set the stage for evaluating the literature. In addition, the author should explain the reasons for evaluating the literature and clarify the scope of the review.

Furthermore, the main body should arrange the writings according to common themes; focus on providing information on the relationship with both a selected subject and the broadening subject area, for example, between obesity in children and obesity in general; and transition from a

general, broader view of the literature being reviewed to the specific focus of the research. Finally, the conclusion should identify the major points of the current body of literature; assess the actual position of the literature reviewed and highlight significant errors or gaps in existing knowledge. This part should suggest areas for further research as well as connect the findings to the existing literature on the topic (Ridley,2012).

There are several sources from which the literature review can be developed:

• Books • Scholarly journals • Previous Research papers • World wide web • Bibliographies • Encyclopedias • Newspapers • Statistics handbooks/information	• Conference proceedings • Thesis • Unpublished papers • Empirical studies • Historical records • Commercial reports • Government reports and reports from other bodies
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Fig 1: Sources to develop the literature review.

In the body, sources can be described in the following way:

- Chronological (by date): This is one of the easiest methods, particularly for issues that have been discussed for a long period and have evolved through time.
- Thematic: After discovering some reoccurring primary themes, the literature can be divided into subsections that tackle different parts of the topic.
- Methodological: if sources are from different disciplines or fields that utilise a range of research methodologies, they compare the outcomes and conclusions that arise from different approaches.
- Theoretical: A literature review is frequently considered the foundation for a theoretical model. Also, it is utilised to debate various ideas, and models, as well as define key concepts. In this case, the researcher may defend the significance of a particular theory or combine several theoretical models.

3. Types of Literature review

3.1. Systematic Review

A systematic review is a scientific method to examine the literature that is highly organised and protocol-driven. Advocates of this approach say that it is impartial, systematic, rigorous, and replicable. The aim of the systematic review is to provide a solution to a particular question that has been created prior to conducting the library search (Petticrew & Roberts, 2006).

In this situation, the researcher undertakes a thorough search to find all viable and relevant papers on the issue or problem. The research is guided by a rigid and detailed methodology for evaluating and summarizing empirical evidence from single investigations (Jesson et al., 2011). To reduce biases and inaccuracies, the systematic review writer must be unbiased and objective. Predefined exclusion and inclusion criteria are developed to guarantee that the information obtained from sources is authentic and unbiased, and that well-defined methodologies are utilised to analyse the results of every study.

In scholarly writing, systematic review researchers analyse and integrate empirical information given in individual studies in order to achieve definitive answers to the study question.

Even though a systematic review may incorporate some qualitative research, the majority of these studies are quantitative and rely on statistical data (Gough et al. 2012).

3.2. The Traditional-Narrative Literature Review

This is the most often used approach in the social sciences and involves research methodologies from a range of academic fields, as well as qualitative, quantitative, and theoretical investigations. This form of study surveys the knowledge in a particular topic area and provides a detailed foundation for comprehending the field. This then evaluates theories, analyses studies, as well as assesses present research methodologies. The writer compiles a broad range of literature on the subject and summarises everything into a logical analysis that reveals the major themes, trends, ambiguities, and debates at the heart of it (Jesson et al., 2011). The researcher could also highlight possible guidance for future study and challenges that must be solved.

This review begins with a problem statement or announces the subject around which the debate revolves; this question is frequently broad and may expand or rephrase more specifically during the review process. Some opponents argue that conventional narrative reviews are prejudiced and emotional (Whittemore & Knafl, 2005).

3.3. Hermeneutic- Phenomenological Literature Review

The hermeneutic–phenomenological analysis focuses on the understanding of the meaning of words in order to encourage thought and study the text with fresh perspectives. The author begins with a broad research question that expands as new meanings are uncovered while reading sources, acknowledging inherent subjectivity and positionality. (Boell & Cecez- Kecmanovic, 2010, 2014).

Figure 2: Comparison of Systematic, Traditional–Narrative, and Hermeneutic–Phenomenological Reviews

	Systematic review	Traditional narrative review	Hermeneutic–phenomenological review
General description	■ Scientific, highly structured, and protocol driven ■ Claims to be unbiased, rigorous, and replicable	■ Draws from a variety of academic disciplines ■ Includes diverse research methods	■ Explores creatively the meaning of text ■ Perceives the review as a conversation among thinkers and researchers, as well as the review writer
Purpose	■ Aims to answer a well-focused and specific question that is formulated prior to undertaking the library search ■ Tests a hypothesis through appraisal and synthesis of empirical evidence in individual studies	■ Offers a comprehensive background of a topic ■ Critically summarizes theories, studies, and methods used in existing research ■ Provides a rationale for the research to be undertaken	■ Provokes the writer's and readers' thinking ■ Aims at viewing the texts afresh and finds new meanings
Review's questions	■ Questions formulated prior to undertaking the research ■ The focus is on testing theories and hypotheses about causality and outcomes	■ Questions evolve or reformulate during the review process ■ Questions that guide the review are often broad	■ Questions are expected to be refined or change their focus with the writer's immersion in the texts ■ Questions are broad and often conceptual or philosophical
Writer's role	■ Writer is neutral and objective in order to minimize bias and error	■ Writer does not assume an objective stance ■ At times, this approach is criticized for being biased because criteria for selection of sources are not offered	■ Writer is aware that engagement with the text lacks objectivity ■ Writer acknowledges that personal experiences are projected into the meanings found in the texts
Preferred sources	■ Most sources are quantitative and use statistical data, although a limited number of qualitative research studies may also be used	■ Includes both theoretical and empirical studies	■ Mostly theoretical and philosophical texts and qualitative studies; also works of art, poetry, and other forms of media
Search	■ Exhaustive and comprehensive search based on explicit and strict protocol	■ The search may be extensive but does not attempt to locate all relevant literature ■ Criteria for search methods are seldom offered	■ Search for sources is not a linear process but recursive and circular
Selection	■ Predetermined exclusion and inclusion criteria are developed to evaluate the validity and credibility of the findings reported in each study	■ Criteria for selection of sources are not explicitly presented	■ Criteria for the selection of sources are not presented ■ Sources selected are those that can contribute to the “dialogue” among the authors reviewed

4. Multiples purposes of literature review:

According to Jerry Wellington et al. (2005), the literature review for a doctorate thesis is much more professional in nature than the literature review for a PhD thesis. However, the role of the literature review in a doctorate or PhD thesis remains the same.

The function of the literature review is to synthesise analytically all known literature on the subject, even material in different languages. Conceptual thinking at a high level across theories synthesise and formatively evaluate prior work on the subject. The extent and complexity of debate on key philosophical aspects and how they connect to the issue (Ridley,2012).

Moreover, it is important to highlight that the review of literature should clarify and define terminology and essential topics in research.; place the issue in the context of the study area's historical background; create a theoretical framework for the research and compare viewpoints, ideas, and techniques. Also, discussing the current issues, debates, and controversies.

5. Choice of systematic literature review in my research.

I have decided to conduct a systematic literature review since it is impartial, systematic, rigorous, and replicable. Moreover, the systematic review provides a solution to a particular question that has been created prior to conducting the library search (Petticrew & Roberts, 2006).

Part 3: A Preliminary literature on technology in the healthcare industry in Kinshasa

1. Understanding the keywords of technology in healthcare

1.1. Challenges of technology in developing countries

Technology in the Healthcare in underdeveloped countries is facing a lot of challenges to embrace digital tools to bring improvement in the way the health care services should be delivered to the patient. Daw et al. (2016) state that all the healthcare systems are damaged and there is no initiative to see improvement as such; according to him, this is an institutional issue and post-conflict circumstances in most countries.

The healthcare technological challenges are very remarkable in Africa. According to Lluch (2011), there are a lot of technological challenges. The following challenges can be considered to be the major issues in the continent, especially in Sub-Saharan Africa:

- Limited access to health services by the population (Econex, 2013)

In most countries, the public sector serves 85% in a mediocre way, while the private represents a small minority.

- Lack of timely availability and skills of working people (Daw et al. 2016)

Benamer et al. (2009), in their research, show that it is important to have available and qualified personnel when the request for treatment is made. The availability of clinicians and other medical personnel is essential in the health system (Steinbrook, 2009).

- Health care cost (Econex, 2013)

Health care cost remains a challenge, and it is limiting access to the healthcare system for many; In the last four years, there has been an inflation of 4% in South Africa in the healthcare sector, and the government has been working to reduce this cost.

- Absence of technology in a national health records system (Econex, 2013)

It is important to know that disease records are ignored and not adequately supported. There is no follow-up of diseases and no disease records, especially in emergency situations. The patient record process could facilitate the patient's relationship with the health services, from registration, treatment, follow-up of the patient, provision of drugs, control, and closure of the file.

- Limited access to health facilities: Nearly 52% of Africans have access to primary health care, but unfortunately, this health care is generally mediocre, and half of African women and girls have unmet needs for family planning (Cullinan, 2021).

This happens especially in rural areas where there is a lack of infrastructure and population census. In this case, for example, technology could have facilitated the census, and identification, especially in cities where there is population density.

-Another challenge is that there are countries where health insurance is unobtainable to address the challenge of the quality of health services and facilitate those who do not have enough money to have access to it. In Africa, the insurance system is nearly non-existent, and the population is plagued by poor supply practices that make medicines prohibitively expensive or unavailable. In addition, there is a lack of transportation, pharmaceutical storage facilities, and manufacturing capacity (Pheage, 2017).

1.2. Understanding terminologies associated with this research

Technology is a set of techniques and methods and the process that follows, which is a function of scientific knowledge applied to practical ends (Collins, 2022). In developed countries, technology is used to administer health care, and this is what has made these countries progressive (Lavander et al 2016).

Healthcare Technology, therefore, is a set of computer equipment that is created to make medical services efficient, process information, and manage the supply chain of services and medicines. The potential of the healthcare sector is around 2 trillion dollars and is full of great potential. Significance of technology in healthcare (Bulletin, 2022).

1.3. Understanding the Nursing informatics

1.3.1. Innovative Technology in Healthcare

Health technology has brought together essential elements of health care, which is why it has an important role in nursing. When nurses use technology, it facilitates information system processing. The American Nurses Association defines nursing informatics as the set of methods and techniques in nursing science and informatics for processing information in nursing practices. The field of nursing informatics, therefore, consists of clinical practice using information and technology altogether. (Honey et al. 2020).

There are several benefits of using technology in healthcare:

- Patients' health care improves: Doctors can process patients' information consistently and improve the health of the concerned.
- Good management of public health: Public health problems are solved through the use of technology and information.
- The work schedule is well managed: Technology in healthcare makes it easier to manage daily tasks
- Healthcare costs are reduced: the way of managing the hospital economy is improved (Elizabeth, 2019).

1.3.2. Opponents and proponents of the philosophical approaches to technology

Several philosophical concepts and conflicts have emerged around the use of technology, including differing viewpoints on whether technology enriches or harms human existence. On the one hand, opponents' philosophical views against technology are Neo-Luddism and Anarcho-primitivism. Historically, these thinkers, and other reactionary groups, have argued that technology damages society. Neo-Luddism is a philosophy that emerged in the period from the 18th and 19th centuries (Routledge, 2006), originating from the worker Ned Ludd, who argued that technological progress was damaging to society. On the other hand, proponents of philosophical views are Transhumanism and Techno-progressivism. They defended that technology advances society (Tennison, 2010). According to transhumanists, technology transcends human limits and moves society forward (Taebnia and Taqavi, 2021).

This research is oriented toward the techno progressivist movement which encourages the use of technology to improve the quality of life. I think in the health sector particularly, technology is important because it makes it possible to manage the database or the files of each patient, to prevent potential problems linked to pandemics, for example (Agbehadji et al. 2021). In Kinshasa, for example, with more than 18 million inhabitants, the vaccination program has been delayed because there is a lack of new information technology (Kavanagh and Sguazzin, 2021); whereas in the United Kingdom where the population is aware of the importance of technology, the vaccination program has accelerated and brings everything to normal (Office for National Statistics, 2021).

1.3.3. The environmental context of healthcare in Kinshasa

The Humanitarian Agenda (2015) suggests that the Democratic Republic of Congo suffers from a considerable absence of public health infrastructure (FIC, 2015). The biggest cause of this deficit is the lack of healthcare technology. The Democratic Republic of Congo, also historically called Zaire, is a country potentially rich in minerals and abounds in natural resources such as gold, diamonds, and zinc, especially in the eastern part of the country where there are constant wars, and more than two decades, the country has suffered from disputes with armed groups from Rwanda and Uganda (ICF, 2015).

More than ever, this country needs more equipment in healthcare technology and policies to improve the healthcare sector. Policy in healthcare technology means that there should be a set of procedures put in place by those in power (Buse et al, 2005), which should be based on the realities of the environment (Hill, 2005); it is therefore up to the government to implement this healthcare technology policy (Walt, 1994). In the Congo, there is no healthcare technology because the population lives in extreme poverty and in the absence of medical Clinics. Hospitals are not accessible to everyone and are virtually non-existent, and the average amount that a population pays for health care is \$50 to \$100. Given that the average man in Congo earns around \$400/month, this is insufficient to include healthcare costs in that income. It should also be noted that 71% of persons live in misery and do not have access to primary health care (Waldman 2006; Bailey et al. 2011; Rand Lateef 2021). It is therefore imperative to undertake research in this country because if there is no action in this direction, deaths will increase, children will continue to suffer, and chronic diseases will continue. It is clear that in DR Congo, primary health care is very limited. The Congolese environment does not offer health care opportunities:

- Health care exists in a pyramid structure.
- The country lacks health personnel
- Funding for health care in the DRC, although low, is steadily increasing
- Lack of health care technology skills

Bersch (2021)

2. Current theories of technology approach in the healthcare industry and Criticisms

There are several theories of innovation and technology. Many of these theories have been used in organizations and businesses, and they have been

the basis of major decisions in those organizations. These innovations have been the subject of research and investigation, and they have militated in the evolution of science and society. Some of the most influential include:

2.1. Innovation Diffusion Theory

Technology and innovation are considered pillars of organisational progress in many companies (Henrich, 2001). Diffusion of Innovation Theory (DOI) was developed by E.M. Rogers in 1962. It is an old theory incorporated into the social sciences. This theory started as a tool in communication to show how a product evolves and grows in the market and spreads in a particular environment. (Singer, 2019). For the most part, organizations adopt new innovations especially when they launch a new product in the market (Hameed and Counsell, 2014).

Furthermore, Vaccaro et al. (2012), say that in order to adopt technologies, organizations need to adopt new forms of competence, and this will have an impact on the way they organise themselves. Hameed and Counsell (2014) say that organisations that adopt innovations are also flexible to technology. It is also necessary to mention that there are several factors that encourage the adoption of technology and innovation, including the environment, individuals, organisations, and changes (Camisón-Zornoza et al., 2004).

There are different levels of individuals who adopt technology and innovation:

- Innovators: These are people who take risks to implement a concept or an idea whatever it would cost.
 - Early Adopters: These are leaders who instigate change in organisations and are ready to commit to influencing others.
 - Early majority - These are people who do not take too much risk but wait to gather the evidence before making an innovation-decision
 - Late Majority - These people wait for innovation and technology to be tested by many before testing it for themselves
 - Laggards - They are conservative and traditional people.
- (Singer, 2019)

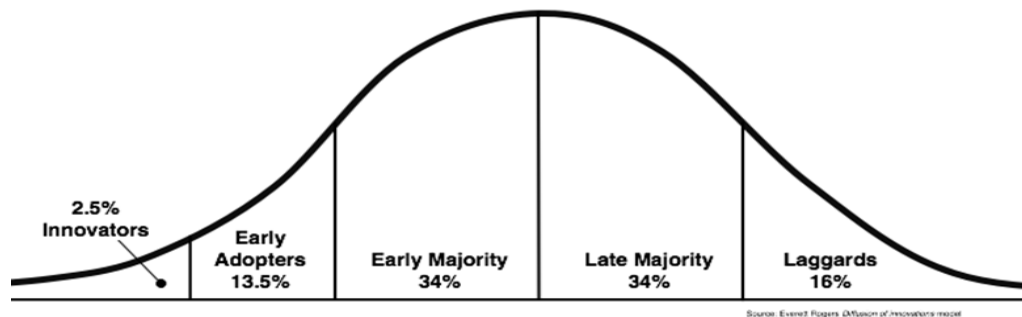


Figure 3: Available at <http://blog.leanmonitor.com/early-adopters-allies-launching-product/>

There are a lot of limits to the diffusion of innovation theory; this theory has been criticized as not belonging to the healthcare sector or is not applicable to the healthcare model. It does not promote the participatory method in public health procedures. It works well when it is necessary to adopt certain technologies, but it does not help in prevention and anticipation.

Many sectors have used this theory, such as in communication, agriculture, public health, criminal justice, social work, and marketing. In the health system, this theory is used to adopt certain applications in the health system, such as when it is necessary to adopt a certain treatment system to improve certain living conditions in society (Singer, 2019).

2.2. Concerns-based Adoption Model

Hall (1979) developed the Concerns-Based Adoption Model in response to the need for a model specific to educational environments due to their traditional top-down approach to change (CBAM). CBAM advances innovation adoption from the perspective of those who are impacted by the innovation's adoption as well as those charged with implementing change, generally in the education system.

CBAM has six hypotheses:

- Change is a method, not an incident
- Individuals create change
- Change is a subjective feeling
- Developmental growth is required for change
- Change is described in terms of operations

- Individuals, innovations, and context should be the focus of facilitation. (Straub, 2009).

The stages of concern (SoC), levels of use (LoU), and innovation configuration are 3 parts of the CBAM that are created from the six suppositions that advise a leader in making plans for transformation (IC). The SoC relates to personal features associated with teachers' concerns and their students during the adoption process, and it is the foundation upon which the CBAM was created (Straub, 2009). During the adoption process, the SoC scale divides teachers' concerns into seven stages:

Stage 0: Awareness concerns

This shows that users or adopters are not aware of the innovation is of no concern to users,

Stage 1 Information concerns

In this stage, adopters are aware to gather knowledge on technology and innovation.

Stage 2 Personal concerns

In this stage, the users think that innovation is a threat to them

Stage 3 Management concerns

Users think that it is difficult to understand and manage the process of innovation

Stage 4 Consequences concerns

Users think that innovation has a direct impact on people.

Stage 5 Collaboration concerns

People come together to put together what is needed to create context to use innovation in an effective way.

Stage 6 Refocusing concerns

The users think about whether one approach of innovation or not, accomplishes organisational objectives (Hall, 1979).

There are a lot of limits to the concerns-based Adoption Model. Even though the CBAM model views teachers as adoptees rather than implementers, they also take the role of change agents in order for effective implementation to happen in the school environment. One could think of students as change recipients, but the CBAM model only tends to focus on instructors' concerns due to their role as change agents. One more noticeable limitation of this theory is its apparent

emphasis on teachers' negative attitudes toward innovation. Opinions established about innovation, whether positive or negative, can all have an effect on its adoption (Straub, 2009).

2.3. Technology Acceptance Model (TAM)

According to Davis' (1985) TAM, a potential adopter's attitude and expectations of the innovation influence the likelihood of its adoption (Davis, 1985).

TAM focuses on two key concepts: how the potential adopter perceives the innovation in terms of its ease of use – how easy the innovation will be to learn and implement – and its possible contribution – the extent to which the innovation will enhance the customer's personal or job-related effectiveness (Straub, 2009).

Davis believed that the easier the technology is to use, it has a direct effect on perceptions of usefulness because the simpler an adopter sees an innovation to be able for using, the more likely they will use it and enjoy greater productivity, proving helpful to the innovator (Davis, 1985). Davis concluded in a future review that there was a stronger relationship between perceived effectiveness and technology adoption than between perceived usefulness and adoption. He deduced from his findings that no matter how simple technology is to understand, people will not adopt it if they do not perceive it to be beneficial in enhancing their productivity (Davis, 1989).

TAM was used to evaluate the adoption of technology in a study conducted in the United Kingdom looked at the key factors influencing whether someone joined an online travel community. This research examined suitability, usefulness and ease of use, and perceived usefulness. The researchers came to the conclusion that all elements were significant in deciding to participate in social travel communities (Agag and El-Masry, 2016).

The TAM has been extensively criticised for its lack of explicative power, casualness, and practical application (Chuttur 2009). Benbasat and Barki assume that the Technology Acceptance Model has misled many researchers into believing that they are making progress in their quest for knowledge. Furthermore, several researchers have become confused while attempting to adapt the model to the changing technological environment (Benbasat & Barki

2007). It focuses on individual IT use without considering the social implications. According to Lunceford, the model does not take into account factors such as the cost and structure of where they live and work, which influence their decision to adopt the technology (Bagozzi, 2007).

2.4. The Chocolate Model

This Model refers to organisational innovation adoption and change. It is organised around four components: change, adopters, the change agent(s), and the organisation, CACAO when abbreviated for ease of recall and use in planning. The Chocolate Model, unlike Rogers' Innovation Diffusion Theory, can be used to plan for the change process and organisational innovation (Dormant, 2011). The procedure is as described in the following: first, determine whether the change is a new structure or an improvement (Dormant, 2011). This is comparable to Rogers' (2003) adoption process's first step of seeking knowledge. The second step is to evaluate the change's early adopters. Third, define the agents of change; a strategy is created at this point. The next step is to analyse the organisation where the change process is expected to take place, as well as evaluate the greater picture of the organisational change, and how it affects other aspects of the organisation as a whole. The plan may be revised before implementation based on the findings of the organisation theory (Dormant, 2011).

2.5. Comparing and Contrasting the Innovation Models

On the one hand, the distinction between technology adoption theory and the diffusion Innovation model is that adoption refers to the phase in which technology is chosen for use by a person or company, whereas diffusion did refer to the phase in which the technology spreads to general use and application.

On the other hand, the Chocolate Model and the TAM have similar change attributes. Adopters, like TAM practitioners, evaluate the relative benefit of the innovation or change (Dormant, 2011) and did refer to it as "perceived usefulness" in TAM (Straub, 2009). Adopters also consider the innovation's convenience and suitability as the "perceived ease of use" in TAM (Dormant, 2011; Straub, 2009). The adaptability of the innovation to the specific needs of the adopters and the social impact of the change, what the change will mean for

the social structure as well as the climate of the organisation, are two elements not discussed in TAM but mentioned in the Chocolate Model (Dormant, 2011).

3. Chosen theoretical frameworks for this research

This research project focuses on the Technology Acceptance Model (TAM), which considers the model's use in various areas, especially in the healthcare technology sector. The model is appropriate for technology adoption use and acceptance rather than for corporate or institutional applications that require information technology integration (Ajibade, 2018).

Historically, Davis created the Technology Acceptance Model (TAM) in 1986. According to Phichitchaisopa and Naenna (2013), the TAM is based on assessing rational thinking, which includes knowing consumers' intentions to adopt new technology.

Davis (1989) developed the (TAM), which supposes that when consumers perceived a form of technology to be efficient and easy to use, they will be willing to use it. Consequently, the more employees realise that the processes will make their activities simpler, the more likely it is that they will use it and accept the new technology as useful (Dillon & Morris, 1996). The TAM model is based on the theory of reasoned action, which states that social actions are motivated by an individual's behavior and are intended to predict information system use (Lin 2007).

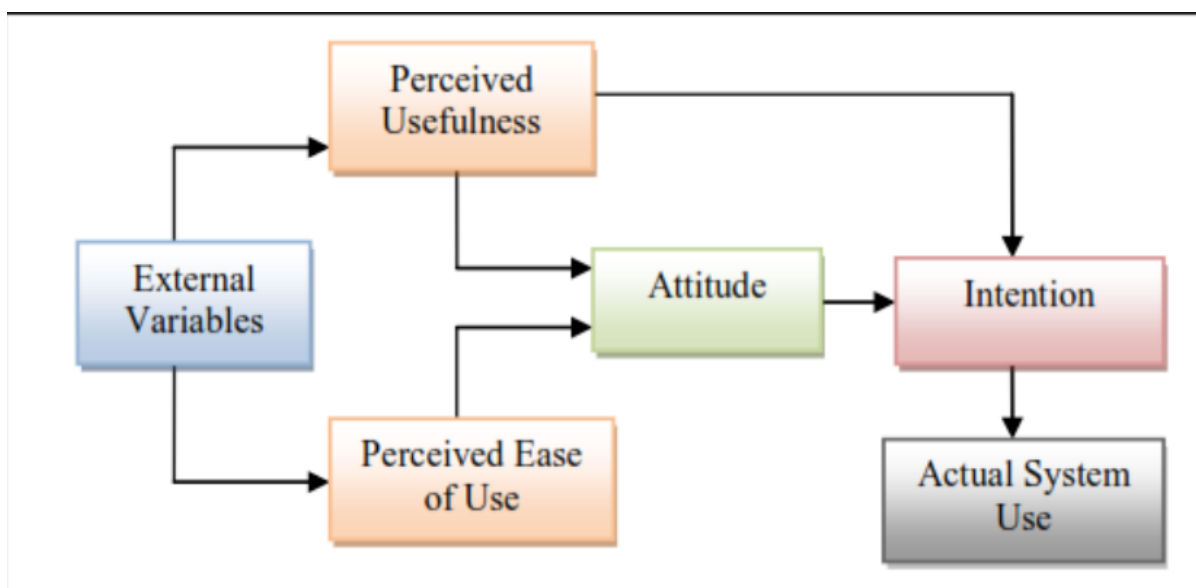


Figure 4: Technology Acceptance Model propounded by Davis (1989)

Similarly, employees in the healthcare industry will have a different type of work, and it is expected that they will be handled differently as compared to change implementation. According to Chau and Hu (2002), doctors are evidently the primary crew and interested parties in e-health technological innovation. When compared to operators and managers in typical business settings, these doctors' decisions on technological innovation approval may differ.

Chau and Hu (2002) explored TAM as well as other theories that primarily focused on the decisions of healthcare professionals to accept technology. The ultimate findings from the study recommend that TAM, with an explanatory power of 42%, may be more suitable than other approaches.

However, several considerations must be taken in order to adopt a conceptual framework, and researchers must be keenly aware of the multiple limits imposed that are innate in such an endeavour.

One of the TAM's limitations is the factor that refers to user behaviour, which is undoubtedly examined through subjective means such as behavioural intention (BI) such as social influences.

It was also critiqued for failing to account for the residual variation in behaviour intention (Abbasi et al., 2011). Besides that, its constraints involve obstacles such as IT facilities or contextual factors in developing countries that prevent individuals from taking full advantage of electronic health records (Abbasi et al., 2011; Chen et al., 2002; Moon and Kim, 2001; Mathieson et al., 2001).

Consequently, Maruping et al. (2006) proposed that behavioural expectations, rather than behavioural intention, should be used to predict employees' intentions regarding the use of technology. As a result, implying that attitudes to the use of technologies in the workplace are based on perceived usefulness and ease of use (Armenteros et al, 2013) may have portrayed the TAM as a theoretical masterpiece.

According to Bashange (2015), many of the pertinent accessible literature which relates to the TAM considers it as a dependent variable rather than a means of determining the forces that influence behaviour. The TAM, as according Zahid et al. (2013), does not account for extrinsic factors like age and education, which may impact acceptance and desire to adopt technology.

On the other hand, concealed personality qualities typically inspire behaviour, making quantifying behaviour exceedingly challenging.

The gap in the literature for future research

Bernstein et al. (2007) stated that the healthcare sector needs to focus on innovation to sustain and improve both clinical and business operations. So, the importance of information and communication technologies (ICT) in the healthcare industry should not be overlooked (Clark,2007).

Wilson et al. (2012) found that no reports from underdeveloped nations had been published on the use of e-Health applications to document clinical concerns and avoid patient harm. This information gap is a major hindrance to comprehending the size of the issue in Kinshasa.

4. Raising research question

After identifying the subject of the study, the scholar needs to develop research questions to meet the study's objectives. The style and presentation of the research questions are heavily linked to the selected research method. The purpose of this study is to identify and investigate the reasons influencing the feasibility of healthcare technology being adopted in poor countries. As a result, the following research questions have been posed:

QR1. What are the main organisational factors likely to influence healthcare technology in Kinshasa?

QR2. What are the measures that will influence the acceptance of healthcare projects and e-health systems in Kinshasa?

QR3. What organisational capacities and resources are affecting the adoption of e-health in the Kinshasa healthcare system?

5. Conclusion

Innovative management techniques are necessary if the Kinshasa health system needs to increase access to excellent healthcare. ICTs are regarded to have a good influence on health services; eHealth adoption may be one of the innovative management tools used to achieve the Kinshasa targets and objectives in health care, particularly for the monitoring of long-term diseases. Numerous research has been conducted in recent years to investigate the feasibility and potential of technology in healthcare in delivering healthcare services.

The theory of technology acceptance and innovation diffusion are useful in health care survey situations, but they must be incorporated into a model

which includes variables related to human , social change processes, and organisational management, which have a strong influence on organisational operations and health care effects.

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	A	B	C	D	
1	Author	Year	Title	Type	Source
2	Abbasi, M.S., Chandio, F.H., Soomro, A.F., and Shah, F.	2011	Social influence, voluntariness, experience and the internet acceptance: An extension of technology acceptance model within a south-Asian country context.	Article	
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4	Agnes Rwashana Semwanga, Hasifah Kasujja Namatovu , Swaib Kyanda, Kaawaase Mark Abraham Magumba	2021	An Ehealth Adoption Framework For Developing Countries: A Systematic Review.	Article	Health Informatic
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6	Ali, Abdulrahim	2019	e-Health systems adoption and telemedicine readiness: practitioner perspective from Libyan healthcare sector	Thesis	Ethos e-theses o

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14	Bulletin	2022	Healthcare Technology 101	Article	
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97	Voxco	2022	Types of quantitative Research.	Article	

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100	Yaser A Alsahafi, Valerie Gay and Adel A Khwaji	2020	Factors affecting the acceptance of integrated electronic personal health records in Saudi Arabia: The impact of e-health literacy.	Article	Health Informatio
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102					
103					
104					

	Digital technologies, coronavirus disease (COVID-19) pandemic wave, 4IR technology utilisation, multi-sector economy	In this paper, we reviewed the Fourth Industrial Revolution (4IR) t existential threat that has resulted in an unprecedented loss of livv researchers have highlighted the enormous benefits of 4IR technp thorough review of these technological interventions. The cyber-p we highlight the salient issues to help policy formulation towards i purpose of this paper is to review the application of 4IR technolog research articles were sourced from an online repository and thor multi-sector challenges. The outcome of this review indicates that invasive mechanical ventilation and a lower rate of thrombotic eve There is growing interest in the rate of eHealth uptake resulting fr developed and developing countries. Although the implementation address the quality and accessibility challenges in healthcare as v realized. This study aimed at conducting a systematic literature re context-specific framework for successful adoption of eHealth tec literature review process was guided by the Systematic Review P widely used frameworks in the developing countries were Techno framework and Technology Organization Environment (TOE) fram adoption of eHealth in developing countries. A novelframework fo demographic, Technology, Information, Socio-cultural, Organizatio result of the research. Many researchers have been citing the Technology Acceptance M their etudies. This paper presented some of the criticisms and lim			
Health Informatics - An International Journal.	eHealth, mHealth, adoption, frameworks, developing country.				

Health Informatics - An International Journal.	eHealth, mHealth, adoption, frameworks, developing country.	There is growing interest in the rate of eHealth uptake resulting in developed and developing countries. Although the implementation address the quality and accessibility challenges in healthcare as realized. This study aimed at conducting a systematic literature review context-specific framework for successful adoption of eHealth technology literature review process was guided by the Systematic Review Process widely used frameworks in the developing countries were Techno framework and Technology Organization Environment (TOE) framework adoption of eHealth in developing countries. A novel framework for demographic, Technology, Information, Socio-cultural, Organizational result of the research.
	Information Technology, Information Systems, Library and Information	Many researchers have been citing the Technology Acceptance Model in their studies. This paper presented some of the criticisms and limitations of model technology-related studies across various disciplines particularly critiques and criticism were presented based on the literature review institutional context. The paper used a desktop research approach modified model for LIS and social sciences research general application and acceptance of technology rather than in a corporate or institutional literature as secondary data and insights gathered from attempts institutional environment. However, based on the findings from the account, the identified limitations and criticism of TAM, companies. The core argument is that staff IT proficiency and experiences predicted

Source	Keyword	Abstract
	Adoption of technology, attitudes, trying, construct validity	Beliefs, attitudes, and intentions are important factors in the adoption explaining the act of using computers, the role of learning to use technology learning can curtail the adoption and use of a potentially productive learning is conceptualized as a goal determined by three attitude process of goal pursuit. Intentions to try and actual trying are the study is conducted to ascertain the construct validity and utility of we examine convergent validity, internal consistency reliability, statistical validity in a longitudinal field study of 107 users of the program. The social psychology and the technology acceptance model, recently scrutinizing the goals of decision makers and their psychological intentions
	UTAUT, Diffusion of Innovation, Innovation Decision Process, acceptance process	This article presents a critique of a number of shortcomings with the addition, I present a model for the purposes of providing a foundation goal intention → action desire → action intention) that is grounded contains a mechanism for self-regulation that moderates the effectiveness causes and effects of decisions and self-regulatory reasoning, will making. Many of the causal variables here are contained within the group/social/cultural, and goal-directed behavior research.
		An electronic literature search supplemented by citation searching databases, yielding a total of 402 references. Upon elimination of duplicates

National Library of Medicine	Technology acceptance model, literature review, health information technology, technology acceptance, theoretical models, health informatics	An electronic literature search supplemented by citation searching databases, yielding a total of 492 references. Upon eliminating duplicates, articles were appraised and divided into three categories according acceptance model comparisons including the TAM.
	Arab Country, Postgraduate Training, Tripoli, Female Doctor, Good Income.	Medical emigration from developing to developed countries is a well upper-middle income country, it has been affected by this trend. The Libyan doctors and factors that might motivate them to return.
Informatics for Health and Social Care.	Health informatics, IT, Healthcare	There is a very clear need for the expanded application of information paper-based medical record systems in an activity that is economically represents around 1.3% of total healthcare spend on average. As of \$47.5 billion in 2002. The value is forecast to grow by an average dominates the market, taking just under 50% of the 2002 global market period, the US market is forecast to grow by an average of 8.9% per market will grow at an average of 10.1% per annum, Japan by 8.4%

Research in philosophy and technology.	Transcendence, technology, religion, mediation theory, boundary.	According to Max Weber, the "fate of our times" is characterized by intellectualization, as well as the attempt to master nature through which is beyond our control. In so far as transcendence is a central and technology will, according to the Weberian assertion, also limit transcendence from the perspective of technological mediation through ourselves does not imply that we can completely control the rules enable us to do that are recognized and to a certain extent obey the order in which one operates. Rather than excluding transcendence
Journal of Medical Systems	Barriers, Challenges, Electronic health records, Adoption: implementation	Federal efforts and local initiatives to increase adoption and use of Information Technology for Economic and Clinical Health (HITECH) barriers may help in understanding the factors deterring certain health comprehensive list of adoption barriers of EHR systems in the United articles relevant to our primary objective. Reviewers independent multiple consensus meetings, authors tapered articles to a final set multiple authors in order to achieve greater validity. Authors identified appeared 125 times in the literature; the most frequently mentioned change. Despite federal and local incentives, the initial cost of adoption include technical support, technical concerns, and maintenance/implementation cost, possibly aimed more directly at organizational

9			
		Technology acceptance model, literature review, health information technology, technology acceptance, theoretical models, health informatics	An electronic literature search supplemented by citation searching databases, yielding a total of 492 references. Upon eliminating duplicate articles were appraised and divided into three categories according to the technology acceptance model comparisons including the TAM.
10			
11		Arab Country, Postgraduate Training, Tripoli, Female Doctor, Good Income.	Medical emigration from developing to developed countries is a well-known phenomenon. In an upper-middle income country, it has been affected by this trend. This study aims to explore the Libyan doctors and factors that might motivate them to return.
12			
13			There is a very clear need for the expanded application of information technology in paper-based medical record systems in an activity that is economically important. It represents around 1.3% of total healthcare spend on average. As of \$47.5 billion in 2002. The value is forecast to grow by an average of 8.9% per annum. The US market is forecast to grow by an average of 8.9% per annum. In the period, the US market is forecast to grow by an average of 8.9% per annum. The market will grow at an average of 10.1% per annum, Japan by 8.9% per annum.
	Informatics for Health and Social Care.	Health informatics, IT, Healthcare	
14			

24			
	Thesis	TAM	The goal of this research is to develop and test a theoretical model of user acceptance of information systems. The model, referred to as the technology acceptance model (TAM), is based on the understanding of user acceptance processes, providing new theoretical insights. Second, TAM should provide the theoretical basis for a practical framework for system implementors to evaluate proposed new systems prior to their implementation. Third, demonstrating system prototypes to potential users and measuring their acceptance provide useful information about the relative likelihood of success. Based on these objectives, key questions guiding this research in characterizing and actual use of computer-based systems by end users are: (1) What are the system characteristics, and to user behavior? (2) How do these characteristics affect the relative likelihood of user acceptance for proposed new systems?
25			
26	Original Research	e-health, UTAUT, technology adoption, personal innovativeness in IT, Pakistan.	Electronic healthcare services are becoming an increasingly essential part of the smooth delivery of health care, specifically in countries with scarce resources. However, the smooth delivery of health care is needed, yet this remains an underresearched area. This article attempts to fill the gap by proposing and empirically testing a model of patients' intentions to adopt electronic health technology. A survey was conducted in Pakistan. This study used Partial Least Square Structural Equation Modeling to determine the factors that influence patients' intentions to adopt electronic health technology. The study concludes with several management implications for researchers and practitioners in the field of e-health technology.

	Innovation In Healthcare.	Digital innovation, efficiency, equity, interoperability, project design and assessment, telemedicine.	Digitalisation in healthcare is a multifaceted phenomenon that requires the integration of various stakeholders, resulting in the proliferation of digital health technologies.
	International Journal of Medical Informatics		
	Technological Forecasting and Social Change.	Information system success model, Technology Acceptance Model (TAM), Healthcare information system.	With the rapid development of information systems and advances in healthcare, the healthcare information systems are attracting more attention. The Information System Success Model proposed by DeLone and Torkzadeh is a widely used model for measuring the success of information systems. This study aims to explore the factors that influence the intention to use such systems. The study first analyzes relevant researches on the intention to use such systems. The study then identifies the factors that influence the intention to use such systems. The study shows that the proposed factors positively influence users' intention to use such systems. The study concludes that the proposed factors are important for introducing healthcare information system are then provided a framework for healthcare information system success.
			► This paper explores the factors lead to successful introduction of information systems in healthcare. ► This paper explores the factors lead to successful introduction of information systems in healthcare. ► This paper explores the factors lead to successful introduction of information systems in healthcare. ► This paper explores the factors lead to successful introduction of information systems in healthcare.

32	Technological Forecasting and Social Change.	Information system success model, Technology Acceptance Model (TAM), Healthcare information system.	conceptual model, appropriate for the intention to use healthcare the Information System Success Model proposed by DeLone and usefulness, perceived ease of use, and intention to use — refer first analyzes relevant researches on the intention to use such sy district hospital nurses, head directors, and other related person shows that the proposed factors positively influence users' intenti intention through the mediating constructs, perceived usefulness for introducing healthcare information system are then provided a
33	Technological Forecasting and Social Change		► This paper explores the factors lead to successful introduction i Acceptance Model are integrated to identify the factors. ► This p system quality are mediated by perceived usefulness and perceiv
			Background: Telehealth technology is an excellent solution to res large-scale implementation. As a result, business models can be purpose of this study was to review different types of business m a systematic review conducted in 2020. The databases used for ProQuest, Google Scholar was also searched. These databases were removed. Finally, articles meeting the inclusion criteria were appraising the strengths and limitations of each study. Data were Initially, 4008 articles were found and after screening, 73 were cal

34	Journal of Medical Internet Research.	Telehealth, telemedicine, mobile health, business model, value, commerce, revenue, market, systematic review and health care.	large-scale implementation. As a result, business models can be purpose of this study was to review different types of business m a systematic review conducted in 2020. The databases used for ProQuest, Google Scholar was also searched. These databases were removed. Finally, articles meeting the inclusion criteria were appraising the strengths and limitations of each study. Data were Initially, 4998 articles were found and after screening, 23 were st were presented in 13 studies, and the applications of the existing of services, namely, telemonitoring (4 studies), telemedicine (3 s living technologies (2 studies), sensor-based systems (2 studies to each area). In most of the business models, value proposition business models in the commercialization of telehealth services and possible future changes. The results showed that different b and cultures. However, it is necessary to evaluate the effectiveness different domains of telehealth services will help identify the stre commerce; health care; market; mobile health; revenue; system
35	Journal of Medical Internet Research.	Telehealth, telemedicine, mobile health, business model, value, commerce, revenue, market, systematic review, health care.	Telehealth technology is an excellent solution to resolve the prot implementation. As a result, business models can be used to fac

		Arab Country, Postgraduate Training, Tripoli, Female Doctor, Good Income.	Medical emigration from developing to developed countries is a w upper-middle income country, it has been affected by this trend. T Libyan doctors and factors that might motivate them to return.
	Informatics for Health and Social Care.	Health informatics, IT, Healthcare	There is a very clear need for the expanded application of inform paper-based medical record systems in an activity that is econom represents around 1.3% of total healthcare spend on average. As of \$47.5 billion in 2002. The value is forecast to grow by an avera dominates the market, taking just under 50% of the 2002 global r period, the US market is forecast to grow by an average of 8.9% i market will grow at an average of 10.1% per annum, Japan by 8.2

35	Journal of Medical Internet Research.	Telehealth, telemedicine, mobile health, business model, value, commerce, revenue, market, systematic review, health care.	implementation. As a result, business models can be used to faci
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38	International Medical Informatics Association	Nurses Internet World Wide Web Delivery of healthcare Patients Information and Communication Technology.	To identify and characterise different profiles of nurses' utilization that can enhance or inhibit the use of these technologies within n
39	International Journal of Medical Informatics.	Consumer, Support, Well-being, Information communication technology, Nursing.	There is an increasing interest in reaching consumers directly thr health care will always be the face-to-face meetings, but the tools possible health care. A variety of applications have been describe state of the art in the field of consumers' experiences in using diffi communication technology (ICT) as being cost-effective and time; important that it is user friendly and regarded as valuable and use
40			Valid measurement scales for predicting user acceptance of comp their relationship to system usage is unknown. The present resea perceived ease of use, which are hypothesized to be fundamenta scale items that were pretested for content validity and then teste application programs. The measures were refined and stream-line use. The scales exhibited high convergent, discriminant, and fact means (rs .63, Study 1) and self-predicted future means (rs .65, St

40	ResearchGate	User Acceptance, end user computing, user measurement.	valid measurement scales for predicting user acceptance of com their relationship to system usage is unknown. The present resea perceived ease of use, which are hypothesized to be fundamenta scale items that were pretested for content validity and then teste application programs. The measures were refined and stream-lin use. The scales exhibited high convergent, discriminant, and fact usage ($r=.63$, Study 1) and self-predicted future usage ($r=.85$, Stu Study 1) and future usage ($r=.59$, Study 2). In both studies, usefu Regression analyses suggest that perceived ease of use may act determinant of system usage. Implications are drawn for future re
41	Systematic Reviews Journal	Systematic Reviews	This paper argues that the current proliferation of types of systematic rev challenges for the terminology for describing such reviews. Terminology planning, describing, appraising, and using reviews, building infrastru conduct and use of reviews, and for further developing review methodolo Insufficient consensus on terminology for a typology of reviews to be pro attempt is likely to be limited by the overlapping nature of the dimensions
42			

48	JMI.	Telehealth, telemedicine, e-health, health policy, Middle East	Despite attempts to reform the healthcare delivery system in the Middle East, the process has been slow.
49	AMCIS	Unified Theory of Acceptance and Use of Technology (UTAUT), Healthcare.	While a variety of information technology (IT) acceptance and use models have been conducted in western cultures, and thus not much is known about IT acceptance and use constructs in those models. To fill this gap in the literature, we propose a model based on the relationships between the constructs in the Unified Theory of Acceptance and Use of Technology (UTAUT) and the prominent eight previous IT acceptance and use models. Hofstadter et al. employed as the moderators. A self-administered survey questionnaire was distributed to each from Taiwan and the U.S., to solicit their responses regarding the factors influencing IT acceptance. From this proposed research are expected to generate both theoretical and practical contributions.
50	European Journal of Innovation Management.	Institution barriers, Virtual reality, Augmented Reality and Medical Industry.	Virtual and augmented reality solutions in medicine are generally used for training purposes. However, due to the rapid developments, these technologies face a large number of institutional barriers.
51	Human Behaviour Emerge Technology.	Rapid review, telemedicine, utility.	Telemedicine is the use of technology to achieve remote care. The rapid development of telemedicine has led to its widespread inclusion criteria. There were also some limitations. Benefits of telemedicine include continuing education and awareness of mental health issues, and toxicovigilance and improvement of supporting telemedicine framework and policies, digital barriers to telemedicine, and the development of policy frameworks that foster the development of telemedicine training of medical workers, educational awareness of telemedicine culture and technology adoption are two of the most important factors.

Source	Keyword	Abstract
52 International Journal Of Organization Theory And Behaviour.	Organizational, impact, technology, leadership, helping, model, public, engagement, cultural, management, development, employee.	Organization culture and technology adoption are two of the most uncertain, networked, decentralized environments, where adoption. To examine the influence of organization culture on individual willingness to technology adoption, and organization culture and then proposed on the responses from an online survey of government, nonprofit, relationship between individual perception of organization culture study design and propose future research
53 Emerald Publishing Limited	E-health, Usability, Adoption, TAM, Perceived usefulness, Technology acceptance, E-health applications and perceived ease of use.	Jamil Razmak, Charles H. Bélanger Published 29 March 2018 Me a sample of Canadians perceives the usability of electronic personal health records (PHRs) and improve physicians' confidence in their patients' ability surveyed 325 Canadian patients living in Northern Ontario a) to a personal health information electronically, and b) to assess their perceived ease of use. We compared the patients' responses to the National Physician Survey in Canada. We compared the patients' responses to the National Physician Survey in Canada.
54 Psychology		

56	IISE Transactions On Healthcare Systems Engineering.	Health Care 4.0, Industry 4.0, smart and connected health care.	Industry 4.0 has transformed manufacturing industry into a new paradigm. This paper presents a foundational change into the new era of smart and connected health care. In this paper, from Health Care 1.0 to 4.0, describe the characteristics of smart and connected health care. Health Care 4.0 in terms of data, model, dynamics, and integration. The paper presents conclusions and recommendations are presented in the areas of data, model, dynamics, and integration. The paper presents conclusions and recommendations are presented in the areas of data, model, dynamics, and integration. The paper presents conclusions and recommendations are presented in the areas of data, model, dynamics, and integration.
57	JMIR Medical Informatics	eHealth, eHealth readiness, frameworks, Botswana, developing countries.	Electronic health (eHealth) readiness has been defined as the preparedness of a country to implement eHealth. The eHealth readiness assessment (eHRA) is needed. Literature on the existing eHRA frameworks and tools with applicability to Botswana and similar developing countries is needed. The purpose of this study is to identify and inform relevant issues, including those related to eHealth readiness.
58			The adoption rate of electronic health record (EHR) systems in South Africa is low. The purpose of this study is to identify and inform relevant issues, including those related to eHealth readiness.

1	Source	Keyword	Abstract
60			
61		Iran; e-health; e-health adaptation; e-health assessment tool; e-health readiness; e-health readiness assessment; electronic health records; health services administration; hospital administration; hospital information systems; medical informatics; organisation and administration; organisational innovation.	To date, several models have been developed to evaluate e-health assess or measure e-health readiness.
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64	Journal of Medical Internet Research.	Systematic review, telemedicine, technology, patient compliance.	Only a few telemedicine applications have made their way into re
65			
			The Telehealth Network of Minas Gerais (TNMG) is a public teleh Brazil. Our aim was to investigate the reasons for the primary car implement corrective actions. This is a quasiexperimental study. I emergency from February to March 2014 were selected. The 2nd

1	Source	Keyword	Abstract
56		Health Care 4.0, Industry 4.0, smart and connected health care.	Industry 4.0 has transformed manufacturing industry into a new p foundational change into the new era of smart and connected hee Health Care 1.0 to 4.0, describe the characteristics of smart and Health Care 4.0 in terms of data, model, dynamics, and integratio conclusions and recommendations are presented in the areas of and methodologies with combination of quantitative and qualitativ person-centered system with specific attention to human needs a
57	JMIR Medical Informatics	eHealth, eHealth readiness, frameworks, Botswana, developing countries.	Electronic health (eHealth) readiness has been defined as the pre about by programs related to information and communication tool assessment (eHRA) is needed. Literature on the existing eHRA fr and none have been found to be entirely suitable for assessing el framework and tools with applicability to Botswana and similar de Botswana to identify and inform relevant issues, including those r
58	International Journal of Medical Informatics	E-health record, TAM	The adoption rate of electronic health record (EHR) systems in St States (US), where there has been a national effort to improve an goal of this study was to determine the current status of EHR ado

60			
61		Iran; e-health; e-health adaptation; e-health assessment tool; e-health readiness; e-health readiness assessment; electronic health records; health services administration; hospital administration; hospital information systems; medical informatics; organisation and administration; organisational innovation.	To date, several models have been developed to evaluate e-health assess or measure e-health readiness.
62			
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64	Journal of Medical Internet Research.	Systematic review, telemedicine, technology, patient compliance.	Only a few telemedicine applications have made their way into re
65			
			The Telehealth Network of Minas Gerais (TNMG) is a public teleh Brazil. Our aim was to investigate the reasons for the primary car implement corrective actions. This is a quasiexperimental study. I emergency from February to March 2014 were selected. The 2nd

14	Journal of Medical Internet Research.	Systematic review, telemedicine, technology, patient compliance.	Only a few telemedicine applications have made their way into re
15	E63		
16	Audit of Emergency Electrocardiograms from a Brazilian Large Scale Telecardiology Service.		The Telehealth Network of Minas Gerais (TNMG) is a public teleh Brazil. Our aim was to investigate the reasons for the primary car implement corrective actions. This is a quasiexperimental study. I emergency from February to March 2014 were selected. The 2nd investigate the criteria adopted to classify a case as an emergenc emergency. In the 3rd phase, the proportion of ECGs sent as an t of the practitioners did not know the proper definition of an emerg emergency 1 month after the intervention; 17% had a significant r not aware of the criteria to define an emergency, and that a simpli may be a topic for future training and teleducation activities perf
17	IJHPM.	Electronic Personal Health Record (ePHR), Adoption, Canada, Qualitative Research.	Healthcare stakeholders have a great interest in the adoption and associated with them. Little is known, however, about the level of implications for the healthcare system. This study aimed to descri barriers and facilitators to their adoption.

68	Readiness for pre-implementation of EHR.	Electronic Health Record, Public-Teaching Hospitals, Pre-Implementation, Assessment.	Readiness assessment provides a proper image of the existing or successful implementation of electronic health record. Readiness the present study attempts to provide an acceptable model in Iran university. After reviewing related papers and descriptive study of analysis through Delphi and distributed among 30 experts nation used to determine priority of each component. Then, all general - model in terms of total, relative, or no readiness. The final model infrastructure, governance and operational dimensions; Educator ready for pre-implementation. It seems to establish uniform strate abovementioned area in the least possible time.
69			
70			The effective adoption and use of digital and computer quality, safety, and outcomes of any national health co affects the adoption of new technology. However, the c

71	BMC Health Services Research	Health information technology, Technology Acceptance Model, National culture	Current research demonstrates that health information technology projects have failed due to behavioural problems associated with potential users. Therefore, user acceptance was one of the main. However, research suggests that behavioural models do not univ distance, uncertainty avoidance, individualism/collectivism, mas behaviour and incorporates them into the Technology Acceptance research analyses which national cultural values affect technology
72	Research Article.	Healthcare 4.0, Health 4.0, healthcare service quality, health care quality, review.	Healthcare 4.0 is inspired by Industry 4.0 and its application has r revolution in the healthcare system on healthcare service quality i healthcare service quality. This study used the systematic literatu impact of healthcare 4.0 is analyzed in-depth in terms of the inter This study will be useful to hospitals and other stakeholders to un study critically analyses the existing literature and identifies resea literature reviews in healthcare 4.0, this is the first study to exami
73	T IJFH	e-Health telemedicine telehealth	We investigated issues that affect the use and adoption of teleme Arab Republic as case studies. Our study is based on interviews i questionnaires administered to key stakeholders (including patien the healthcare system. We found doctor and patient resistance w infrastructure, lack of funding, and lack of information technology adoption of telemedicine in Middle Eastern countries. Based on o applied to telemedicine projects at the pre-implementation phase. and seeking further opinion

74	Article	Digital Innovations in Education and Healthcare (DICE).	eHealth, Sub-Saharan Africa, By-person factor analysis, eHealth adoption and use, Healthcare professionals, Viewpoints, Q-methodology.	presented a review of the literature on including eHealth provide HCPs the opp previous research has identified these to identify how these eHealth resources inl HCPs in clinical practice in Sub-Saharan
75	Article	Digital Innovations in Education and Healthcare.	eHealth, Sub-Saharan Africa, By-person factor analysis, eHealth adoption and use, Healthcare professionals, Viewpoints, Q-methodology	The aim of the study was to explore the Africa (SSA). Information and communic patients while also improving their own c when adopting them for clinical practice, still little information about adoption and
76	Article	Department of Management Information Systems, School of Applied Sciences, Cyprus International University	Adoption, Barriers, Developing countries, E-health, Healthcare, Healthcare professionals, Nigeria, Technology Acceptance Model.	E-health technology applications are es developed and developing countries. Hc countries is either low or underutilized. T expertise among others.
77				In this paper, we present an extended ty existing classifications with current idea more comprehensive picture of modern typology more beneficial in terms of und combine indicators on supply, public-pr performance management in prevention

University of Siegen, Germany.		existing observations with current needs from the literature to provide a more comprehensive picture of modern healthcare systems and to typology more beneficial in terms of understanding and explaining combine indicators on supply, public-private mix, and institutional performance management in prevention and quality of care. The systems can be identified. Moreover, we provide quantitative information.
BMC Palliative Care		Studies have shown that telehealth applications in palliative care user acceptance of current technology applications in palliative care palliative care and yet they are often heavily involved, alongside both health care provider and administrator perceptions regarding
Blackwell Publishing.	Systematic Reviews	The book is aimed at social science researchers, but it provides a them, but don't necessarily want to do one themselves. Most of the interventions, reflected in the growth of initiatives like the Campbell but not exclusively. Systematic reviews are also widely used to synthesize (causes of problems), or about people's experiences, and we discuss

82	Journal Of Medical Internet Research	eHealth strategy, eHealth strategy development framework, eHealth, telehealth, telemedicine, e-learning.	Organizational innovation in eHealth solutions is being made in many opportunity costs are the correct ones? Absent, poor, or vague of sustainable eHealth solutions and establishment of an eHealth framework can place countries in charge of their own eHealth destiny and interest in eHealth strategy from the World Health Organization (WHO) (PAHO), the African Union, and the Commonwealth; yet overall, the complementary but locally specific eHealth strategy. To address this upon a conceptual framework and relevant theories of strategy and theories, and final eHealth strategy development framework by which regions, and countries to create holistic, needs- and evidence-based
83			
84	International Journal of Communication.	EU, digitization, healthcare communication, patient-centered care, COVID-19 pandemic.	This article provides a critical analysis of the digitization of health organizational communication and interactions among institutions between January and May 2019 from (a) documents and policies Finland and Norway are closer than Italy and Spain to the EU dis roads of innovation, all four countries share problems such as the levels. Given that the COVID-19 pandemic has accelerated these undergoing rapid change that warrants broader analysis.
			Sets out the findings of the National Advisory Group on Health Information. The report begins by covering the relevant background, particularly

International Journal of Information Sciences and Techniques.	ECR - Model - Information System - Digital Record - Technology.	This study is drawn from an ongoing, large-scale project of implement deeper understanding of the socio-technical aspects of the complex study how to manage a gradual transition to digital record. We have ideas / surveys, and field work that clinical institutions and medicine to ECR and technology continually progress. Results of our study long-term access to electronic clinical records was revealed. Additionally, we are concerned about long-term access to electronic records.
Original Research		e-Health Readiness refers to the preparedness of healthcare institutions and Information and Communications Technology (ICT). This paper presents the results of a study conducted in developing countries. The objectives of the overall study were to: (a) assess the readiness of developing countries, and to test these tools in Pakistan. Tools were existing tools, and developing a conceptual framework based on: (a) for managers and for healthcare providers to assess e-health readiness and 50 items, respectively. Each tool contained four categories of represented a determinant of access to e-health, or an important tool. Tools are presented in separate papers. e-Health readiness assessment institutions in developing countries.

90		Challenges, e-health, healthcare, information communication technology, rural areas.	industrialized countries. In an effort to catch up with the growth, the Information technology in different ways. Based on a technology case studies in Nyanza Province, this work focuses on an investment include the ICT infrastructure and e-health technologies in place, challenges posing barriers to the use of ICT technologies in these implementations as a result to various challenges that exist. Con paper.
91	Review of Educational Research	Technology adoption, teacher education, social cognitive theory.	How and why individuals adopt innovations has motivated a great the lenses of three adoption theories: Rogers's innovation diffusion United Theory of Acceptance and Use of Technology. Incorporating developmental process; individuals construct unique yet malleable facilitating technology adoption must address cognitive, emotional outside of a formal organization and the implications of adoption theory
92			According to Max Weber, the "fate of our times" is characterized by intellectualization, as well as the attempt to master nature through which is beyond our control. Insofar as transcendence is a central and technology will, according to the Weberian assertion, also limit transcendence from the perspective of technological mediation through

		Continuity, mutual information, personal, personal, distribution	It is almost impossible to read a health care publication or a news delivery of safer and more efficient patient care. Hospitals and the automated storage and distribution devices, electronic infusion de medical and health record systems at an accelerated pace. These productivity of medication-use systems, but much remains to be c proactively responded to this challenge with a number of actions i
ASHP			
	International Journal of Information, Communication and Computing Technology.	PHR, EMR, EHR, Integration, Patient centered care, Public health.	To audit and present the relationship and requirement for incorpor dangers. Electronic Medical Records (EMR) and Electronic Health Though EMR is generally viewed as an interior hierarchical frame modernized stage for understanding focused medicinal care know self-administration of medicinal records. PHRs are online framew and locked in patients. PHR, EMR and EHR can live on various s nearby data and gives quick and precise conveyance, the major r restorative data. Persistent focused wellbeing activities, for exam frameworks. This incorporation of restorative data consolidates st furnishing a thorough view that corresponds with the meaning of i mind and also general wellbeing basic leadership, bringing about security and protection.
			Recent research on management innovation, i.e. new managerial can be an important source of competitive advantage. In this stud leadership behaviour as a key antecedent. Due to its prominent r innovation. In particular, we focus on leadership behaviour and ex

98			
	Health Policy And Planning.		particular appears to have been neglected. This is surprising bec health policy reforms countries should introduce. However, little a favour or resist such policies.
99			
100	Health Information Manager.	consumer health information, e-health, health information management, personal health records, electronic personal health records, health information systems.	National implementation of electronic personal health record (ePH promises to promote and enhance healthcare. Although there is v acceptance of this technology among healthcare consumers has
101	Review Articles.	Impact, healthcare, technology, medicine.	Since the original Institute of Medicine (IOM) report was published with varying degrees of evidence about the impact of health information technology improves patient's safety by reducing medication error should be no doubt that health information technology is an important selective in which technology to invest in, as literature shows that
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