

Exploring Telemedicine Acceptance in Georgia Using the Theory of Planned Behavior

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Abstract

Background: Since 2022, Georgia has been piloting telemedicine services in 50 rural PHC sites throughout the country. Generally digital technologies offer a promising solution to increase access to healthcare services and to bridge healthcare gaps and disparities. However, uptake remains low.

Objective: This study investigates how components of the theory of planned behavior (TPB): attitudes (ATT), subjective norms (SN) and perceived behavioral control (PBC) influence behavioral intention to engage with tele-consultations.

Methods: A cross-sectional online survey was conducted using Google Forms. The survey was distributed to beneficiaries of pilot 50 sites by rural doctors. A total of 83 valid responses were analyzed using Partial Least Squares Structural Equation Modeling (PLS-SEM) to assess the relationships among TPB variables.

Results: The structural model showed that both attitude ($\beta = 0.416$, $p = 0.001$) and perceived behavioral control ($\beta = 0.381$, $p = 0.002$) had significant and positive effects on behavioral intention to use teleconsultations. Subjective norms ($\beta = -0.014$, $p = 0.440$) did not significantly influence intention. The model explained 53.3% of the variance in behavioral intention ($R^2 = 0.533$).

Conclusion: Subjective norms seem to have less of an impact on telemedicine adoption in rural Georgia than attitude and perceived behavioral control. The study aligns with government audit report suggestions and highlights the importance of awareness campaigns, training programs, and fostering a supportive environment to improve telemedicine service pilot in rural areas of Georgia.

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