The Paranoia Paradox: Trust, Confidence, And Paranoia In E-Health Usage

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Aim: Investigate the role of trust and paranoia in use of eHealth.

Why: To understand how attitudes influence eHealth usage and inform more ethical and responsible AI healthcare development.

Introduction

- e-Health is delivery of healthcare using digital technologies, often with AI[1].
  - supports and improve attendance and engagement with mental health services[2].
- Technology features in many western delusional beliefs.
  - Paranoia and fear about the internet and technology exist across the mental health spectrum[3].
- Trust in eHealth and AI is currently considered a pre-requisite to engagement and use.

Methods

- Online, cross-sectional
- 476 participants:
  - Controls=267; SMI= 209; Mage= 39.35, SD = 14.16; 62.18% female).
- Questionnaires:
  - Digital Confidence Scale
  - Trust Index
  - Paranoia Scale
  - Prodromal Questionnaire-16
  - Cyber-Paranoia and Fear Scale
  - Open text responses
- Interviewed 22 people about attitudes, beliefs, and motivations of using eHealth.

Results

Quantitative:
- Digital confidence associated with:
  - Frequency of digital technology use
  - Frequency of eHealth service use
  - <u>Not</u> mental health status
- SMI group scored significantly higher on trait paranoia and symptoms of mental ill-health.
  - Small significant difference in cyber-paranoia.
  - No difference in cyber-fear.

Qualitative:
- Positive facilitators: 1) accessibility 2) ease of use 3) reduced waiting times and 4) anonymity.
- 'Negative' facilitators: 1) lack of alternative, and 2) obligation.
- Barriers were 1) mistrust of the source/ provider/data usage 2) negative attitudes/ affect 3) individual differences
- Paranoia paradox →

Paranoia/Privacy Paradox, where attitudes did not align with behaviors:

"I want to say [trust is] really important...I know sometimes I'm a bit lax with it, so it can't be that important." [Participant 1, Psychosis]

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"...I don't trust it but ..., I have to ...to get to do what I want to do." [Participant 4, Control]

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"I don't entirely trust anything on the internet, but ...I tend to go along with an awful lot." [Participant 9, Control]

Conclusion

- Use and attitudes towards e-Health systems do not differ by mental health status.

- Attitudes do not greatly influence behaviours related to eHealth.

- Clear ethical implications for developers and prescribers of e-Health.

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