



**UvA-DARE (Digital Academic Repository)**

**How to present online information to older cancer patients**

Bol, N.

[Link to publication](#)

*Citation for published version (APA):*

Bol, N. (2015). How to present online information to older cancer patients

**General rights**

It is not permitted to download or to forward/distribute the text or part of it without the consent of the author(s) and/or copyright holder(s), other than for strictly personal, individual use, unless the work is under an open content license (like Creative Commons).

**Disclaimer/Complaints regulations**

If you believe that digital publication of certain material infringes any of your rights or (privacy) interests, please let the Library know, stating your reasons. In case of a legitimate complaint, the Library will make the material inaccessible and/or remove it from the website. Please Ask the Library: <http://uba.uva.nl/en/contact>, or a letter to: Library of the University of Amsterdam, Secretariat, Singel 425, 1012 WP Amsterdam, The Netherlands. You will be contacted as soon as possible.

## Appendices

### Appendix A: Development of stimulus material (Chapter 3)

Selecting appropriate cognitive and affective illustrations required two pretests. First, eight cognitive and eight affective illustrations were pretested among colorectal cancer patients ( $n = 48$ , 52.1% women, mean age of 59.35 years old [ $SD = 10.59$ ]). All illustrations were rated with three cognitive and three affective items which appeared to be two distinct dimensions in principal component analysis and formed reliable subscales (cognitive component:  $\alpha = 0.96$  and affective component:  $\alpha = 0.92$ ). Cognitive items included, for instance, “the illustration clarifies the text” and affective items included “the illustration is attractive,” and were all measured on a 7-point Likert scale (1 = “totally disagree,” 7 = “totally agree”).

One of the TEM illustrations scored significantly higher on the cognitive dimension than other illustrations, and was therefore selected to illustrate the first part of the text on the webpage ( $p < .001$ ). For the stoma, we found that two illustrations were rated significantly higher than the others. Of these two, based on the mean score and ranking, one illustration was evaluated better than the other one, and thus selected to illustrate the second part of the text on the webpage ( $M = 5.43$ ,  $SD = 1.27$  and in 55.3% of the cases ranked first vs.  $M = 5.15$ ,  $SD = 1.32$  and in 27.7% of the cases ranked first). One affective illustration (i.e., male doctor presenting an anatomical model of a colon) was clearly rated higher than the others, and got ranked first by most of the patients ( $M = 3.78$ ,  $SD = 1.51$  and in 43.8% of the cases ranked first). This illustration was thus selected as the upper illustration on the affective illustrations webpage.

As the first pretest did not reveal a second particularly well-evaluated affective illustration, we conducted a second pretest. The two runner-up affective illustrations (i.e., 1: female doctor visiting a male patient who is lying in bed; 2: female doctor with a stethoscope) were chosen based on their scores in first pretest ( $M = 3.72$ ,  $SD = 1.74$  and  $M = 3.56$ ,  $SD = 1.76$ ), and were combined with the most favorable affective illustration on two test webpages. These webpages were compared in the second pretest among a new sample of colorectal patients ( $n = 16$ ). We found that one affective illustrations webpage performed better than the other ( $M = 3.90$ ,  $SD = 1.31$  vs.  $M = 3.73$ ,  $SD = 1.18$ ). Even though the cognitive illustrations webpage outperformed all other webpages in the ranking test (in 60.0% of the cases ranked first), we found that the better performing affective illustrations webpage was more often ranked first and second than the other affective illustrations webpage (in 20.0% of the cases ranked first and in 53.3% of the cases ranked second, vs. 13.3% and 26.7%). Based on this second pretest, we selected the webpage with two affective illustrations that showed a male doctor presenting an anatomical model of a colon (upper illustration) and a female doctor visiting a male patient who is lying in bed (bottom illustration). For snapshots of entire webpages including the cognitive and affective illustrations, see Figure 3.1 and 3.2 respectively (p. 41).