

December 28, 2011

Dear Editor:

Thank you for the opportunity to respond to Ms. Gralton's remarks. Upon further review of our article, *An Intervention Fidelity Framework for Technology-Based Behavioral Interventions* (DeVito Dabbs et al., 2011), we acknowledge that other points could have been made, namely: 1) that the Technology Acceptance Model (TAM) has undergone expansion since the original TAM was published to include additional predictive factors of acceptance and potential moderators to qualify its effects (Venkatesh & Davis, 2000; Venkatesh, Morris et al., 2003), 2) shortcomings of the expanded TAM have been raised, including its failure to explain how its concepts produce their purported effects (Bagozzi, 2007; Melas et al., 2011), and 3) alternative models of technology adoption-acceptance-rejection have been proposed (Bagozzi, 2007; Melas et al., 2011). Readers who are interested in selected further reading regarding technology acceptance, particularly related to health technologies, are encouraged to review the works cited below.

However, in spite of its shortcomings, evidence that the TAM predicts a substantial portion of the use and acceptance of technologies abounds (Bagozzi, 2007; Holden & Karsh, 2010; King & He, 2006; Lee et al., 2003; Legris et al., 2003; Ma & Liu, 2004; Yousafzai et al., 2007). Our purpose in administering the reliable scales of the TAM was to measure the extent to which study participants had positive perceptions regarding ease of use, usefulness, attitudes and intentions to use the technology-based intervention, not to explore the multitude of potential factors that may influence these concepts and their linkages. Therefore, we are confident that our conclusions about the degree of intervention fidelity would not be altered in meaningful ways by the use of the expanded or alternate conceptualizations of technology acceptance.

On behalf of all co-authors,

Sincerely,
Annette DeVito Dabbs RN, PhD, FAAN

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