





NFA Health on Transforming Healthcare Experiences

A detailed illustration of a vintage-style lightbulb with a visible filament and a decorative base, positioned in the top right corner of the slide.

Decoding medication non-adherence: A deep dive into the complexity of patient behavior.

A detailed illustration of a megaphone, positioned in the bottom left corner of the slide.

May 21, 2024

In this exploration of medication non-adherence, we dive into the intricate web of factors that contribute to patients not following their prescribed treatment plans. Drawing from our experience in developing Creative Insight across several therapeutic areas, and leveraging learnings and insights from various sources, we dissect non-adherence into two dimensions: 1. Categories of non-adherence and 2. Underlying causes of non-adherence. Our goal is to provide a nuanced understanding of this complex issue, shedding light on the challenges faced by patients, healthcare providers, and caregivers. Through this journey, we seek to uncover actionable insights that can drive more effective strategies to improve adherence.

But first, what is 'adherence'?

It's kind of like the word 'snow'. It is often said that the Inuktitut language has 50+ words for 'snow'. The actual number appears to be somewhat debated and is arguably a cultural cliché. The sentiment is intuitive and holds true for non-adherence. It's a complex phenomenon taking many forms, and the risks of over-simplification can be costly. Without an in-depth understanding of the underlying nature of non-adherence, proposed solutions fall short. As organizations seek to integrate more technological solutions into their mix, it becomes more important than ever to dig into the roots of the issue first.

The team at NFA Health has identified and interpreted two distinct dimensions with which to broadly dissect the issue of adherence. We draw from our experience in Creative Insight, diving into these issues on a case-by-case basis, as well as from various peer-reviewed literature on the topic.

- Categories of non-adherence
- Underlying causes of non-adherence

Do you know the categories and causes of non-adherence in your category of healthcare?

The definition of adherence

Adherence is defined as "the extent to which a person's behavior—taking medication, following a diet, and/or executing lifestyle changes—corresponds with agreed recommendations from a healthcare provider."

Within this definition, we see that there are two critical stakeholders – the healthcare provider (HCP) and the patient. There is a desired behavior which belongs to the patient. Importantly, the recommendation behind this behavior, though prescribed by an HCP, is described as 'agreed-upon'. This implies that there are common perspectives between the patient and HCP, and explains the movement away from the word 'compliance', which is more didactic in nature. Also, although the patient and HCP are referenced here, our work at NFA Health proves time and time again that caregivers, family and friends play a critical role.

Categories of Non-Adherence

What kind of non-adherence are we talking about? There are 3 important categories:

Non-Fulfillment: The prescription is written by the physician, but the script is never filled out.

Non-Persistence: After already taking a medication, a patient stops taking their medication altogether without direction from an HCP.

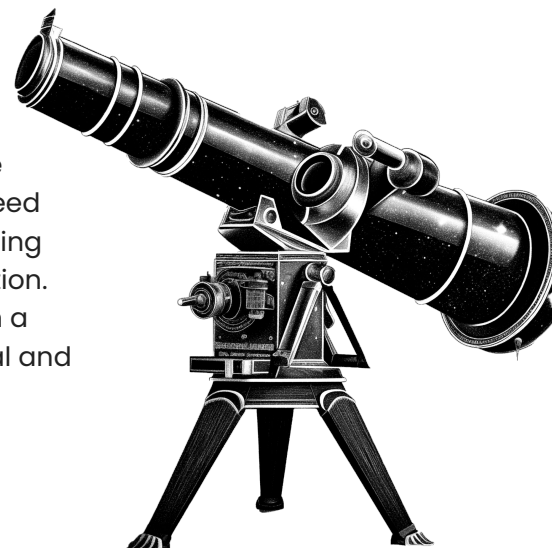
Non-Conforming: The prescription is not taken as prescribed. This can include skipped doses, incorrect dosing, or taking medications at incorrect times.

Already, this gives us an excellent framework for thinking through the problem. Are patients not filling their prescriptions in the first place? Are they starting off on the right track, then falling off at some future point? Are they changing how they take their treatments without guidance from an HCP? All very different things.

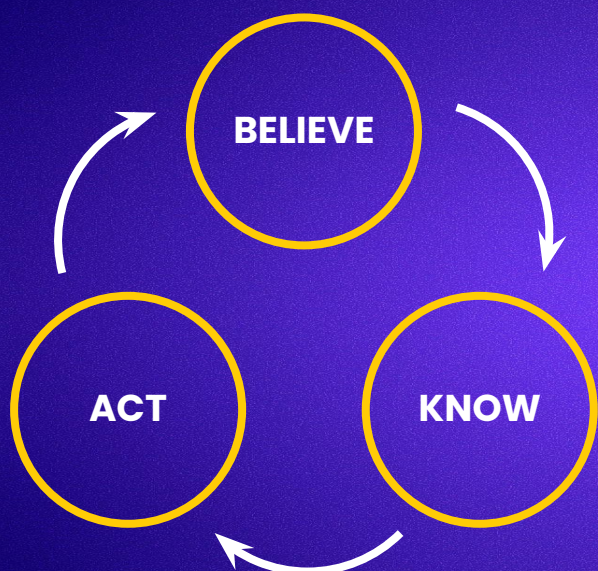
Underlying Causes of Non-Adherence

Once we have grasped what kind of adherence we are talking about, we get to the question of 'WHY?' Why is the patient not adhering to the "agreed recommendations from their doctor?". Arguably, this is the more interesting question. And far too often, this question is met with judgment or frustration. Diagnosing the problem through this lens requires us to approach it with a greater sense of empathy and an appreciation for human, psychological and socio-economic factors.

Here we examine a threefold model which offers a powerful, yet simple framework called "The Adherence Loop".



The first causal factor is belief. **Do patients believe in their diagnosis?** Is the recommendation from the HCP truly agreed upon, or does the patient have doubts? There are various reasons for patient doubt, ranging from a general lack of medical literacy to more psychological drivers of denial. One way or another, solutions involve some level of influence and persuasion to bring that patient to desired belief state. That's very, very hard. It takes a lot of time, and often we hear from HCPs who say it's not their job to convince patients, but rather to lay out the possible course of actions, provide a point of view, and let the patient decide. Totally fair. And given the resource constraints that HCPs face in our modern healthcare systems, this creates the opportunity for industry partners to find more compelling, emotional, even entertaining channels to explain the rationale behind the treatment.



Belief is also interesting as we think about it over time. Maybe patients believed initially, but then as the treatment proves effective, the salience of their diagnosis wanes until such time that they are no longer convinced it was there in the first place. This is a common phenomenon seen in asthma, for instance.

The second causal factor is knowledge. This one is more straightforward and is often a default assumption. **Does the patient understand why they are taking the medication and what to do?** Education becomes important here, but again, it is time consuming for HCPs, and this is where industry can play an important support role.

Lastly, we have action. Let's imagine that a patient believes in their diagnosis, believes they have the right treatment, and they know exactly how to execute it. **Do they have the capacity to follow through?** Or are there impediments and barriers in the way? Can they afford the treatment? Do they have somewhere to park their car at the hospital? Are treatment schedules incompatible with other life obligations, like work or family? In the case of an injection, do they have the dexterity and finger strength? Do other forms of 'able-bodiedness' get in the way? More often than not, this is where industry can look to their Patient Support Programs for answers. If solutions genuinely help patients overcome issues of capacity, they are more likely to comply with regulatory constraints.

The other beautiful thing about this framework is that while it can be used to diagnose non-adherence, it is not the Non-Adherence Loop. It's The Adherence Loop! The point here is that when we are firing on all 3 cylinders, it becomes self-perpetuating in a productive and positive way.

Implications

Explore

Adherence is conceivably a problem in virtually any category of treatment. There are endless statistics to quantify the prevalence of the problem. The by-product of non-adherence, first and foremost, is the adverse effect on the well-being of patients. Also, healthcare economics come into play, for payers and governments. For industry, it filters down to critical business metrics. Whatever your vantage point, there are only good reasons to better understand how adherence uniquely affects the work you do.

Measure

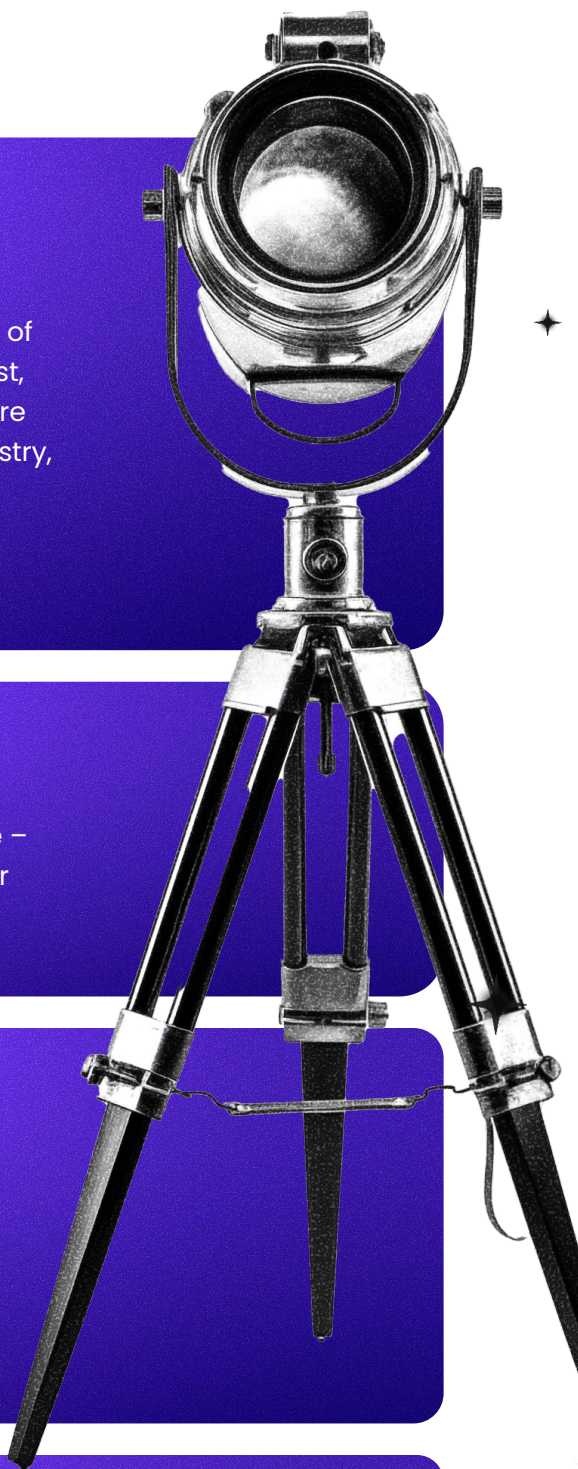
Everybody loves metrics. How are you measuring non-adherence – both from a behavioral as well as an economic standpoint in your brand planning process?

Collaborate

Adopting a stance of empathy and open-mindedness is critical. Lean on your agency partners with these questions, and collaborate with multidisciplinary teams. This is how you set yourself up for a more effective brief, which defines the actual problem you need to solve.

Solve

Do this work up front, then you can examine and ideate innovative solutions far more effectively. We're not saying that fridge magnets are the answer (although they might be), but opportunities are emerging to leverage all kinds of technologies, platforms, and protocols. We'll save that for a future post.



What does this all mean to *Brand Marketers?*

Nuanced Understanding

Brand marketers need to recognize that non-adherence is not a one-size-fits-all issue. It requires a nuanced understanding of the various categories and underlying causes, including patient beliefs, knowledge, and capacity to act. This understanding can inform targeted strategies that resonate with different patient segments.

Empathy and Collaboration

Successful solutions to non-adherence require empathy and collaboration. Marketers should collaborate with multidisciplinary teams, including insight and agency partners, to develop strategies that address the root causes of non-adherence. Empathy towards patients' challenges and barriers can lead to more effective and compassionate interventions.

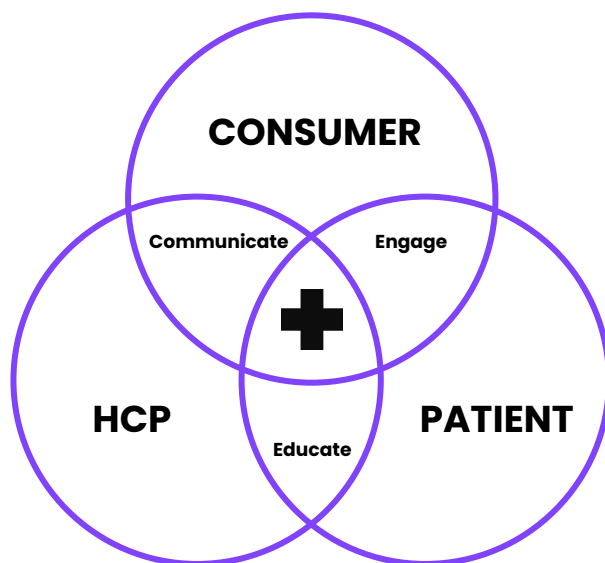
Opportunity for Innovation

Non-adherence presents an opportunity for innovation in healthcare marketing. By leveraging new technologies, platforms, and protocols, marketers can develop creative solutions that support patients in adhering to their treatment plans. This could include digital tools, patient support programs, and educational resources that empower patients to manage their health effectively.

Ready to *navigate* the future
of healthcare?

We are *improving* patient outcomes through **better healthcare experiences**

Our expertise is in how we think holistically about marketing strategies and tactics. We excel at the intersection of Consumer, Patient, and HCP Marketing, delivering tailored solutions to empower patients, foster brand trust, and effectively inform, educate, and engage. We approach our solutions with an understanding of the evolving role of patients as active decision-makers in their individual health journeys and our solutions prioritize ensuring a meaningful patient experience and delivering on the expectations of today's healthcare consumers.



No Fixed Address (NFA) Health recognizes the pivotal role that patient experience plays in achieving better healthcare outcomes.

In today's ever evolving healthcare landscape, meeting and exceeding patient expectations is paramount. We believe that integrating innovation and empathy is key to enhancing patient outcomes.



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