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Using Health Psychology to Design Patient Support Programs

Everyday, hundreds of people choose to not take their medication. How can pharma create patient support programs (PSPs) to help change unhealthy behaviors around treatment nonadherence?

We believe the answer lies in the application of **health psychology**, a broad discipline that focuses on understanding the psychology of patients and its influence on behaviors relating to health and illness. Although a relatively young specialty, the literature is already vast. There are more than 80 behavior change theories that help us understand and predict health behavior change, as well as descriptions and evidence to support the use of 100+ behavior change strategies.

Unlike other disciplines that are theoretical and largely academic, health psychology has a very practical side, allowing us to apply learnings to the design and execution of PSPs. Navigating the field, however, needs a specialist that understands how to apply theoretical frameworks and research findings to real world settings.

Our global health psychology experts translate and apply their science in two important ways:

- ▶ **To understand the reasons behind nonadherence.** Recognizing the “why” behind behavior is a first step to identifying support areas to make behavior change interventions personal to an individual. A person’s nonadherence could be based on perceptions of their treatment and disease (“I don’t need this - it’s not serious”), practical barriers (“I can’t get to the pharmacy”) or lack of social support (“It’s hard to talk with my doctor”).
- ▶ **To build content that is effective at changing behavior.** After seeing what beliefs are driving behaviors, we can then select appropriate behavior change strategies and craft custom messages to precisely address individual barriers. This personalization is key to helping interventions be effective at changing behaviors for the long-term.

Once we get these aspects right, the application of health psychology works regardless of the disease state, treatment type or communication channel. Consider these examples:

To increase adherence to an asthma preventer medication, our health psychology team designed a PSP that used **customized SMS/text messages**. Early research helped us understand individual barriers to adherence so each person could be targeted with relevant messaging via texts on their phone. The result? A 15% lift in adherence rates that was sustained once the text program ended.

For people prescribed a second line treatment for cancer, we created a PSP grounded in a **clinical nurse educator network**, delivering customized messages to each patient during one-on-one counseling at home visits and by phone. Patients enrolled in the program stayed on the drug 2½ times longer than those not enrolled.

Learn more about our use of health psychology for behavior change at:
www.atlantishealthcare.com