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Why our clients do or don't stick with their program - a new way of looking at adherence

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Introduction

The World Health Organisation (WHO) defines adherence as "the extent to which a person's behaviour - taking medication, following a diet and/or executing lifestyle changes, corresponds with agreed recommendations from a health [or therapy] provider". The word 'agreed' is the keystone of this statement, as adherence requires the client's agreement to the recommendations, a cornerstone of client centred practice. 'Adherence' differs from 'compliance' by encompassing the active, voluntary and collaborative involvement of the client.

Objectives

This paper examines the reasons why clients either don't attend appointments, or don't follow through with their agreed plan by applying the WHO's Multi Dimensional Adherence Model (MAM).

Description/Report

The MAM consists of five dimensions (Socioeconomic, Health Care System, Condition-related, Therapy related, and Client-related). It differs from many others by removing the traditional emphasis on patient-related factors, as it is a misconception that adherence is a patient-driven problem. It contends that the ability to follow treatment is impacted by more than one barrier, and interventions to improve adherence need to address all relevant factors. This model is illustrated and supported by several studies conducted by the author in the field of adherence with hand therapy.

Results/Discussion

Suggestions for enhancing client adherence using the MAM will be presented, drawing on the presenter's research and experience in vocational rehabilitation and hand therapy. A review of the literature of adherence in Occupational Therapy will be presented.

Conclusion

As many of the factors associated with adherence are fixed (condition, social and-economic factors, and patient characteristics) it makes sense for OT's to target those factors that are amenable to change. Referring to the MAM, these are encompassed by the health care system-related, and the treatment-related dimensions.

Contribution to the practice/evidence base of occupational therapy.

It is well accepted that consumer non-adherence with therapeutic treatment can reduce treatment benefits, affect recovery, increase the risk of disability, and bias assessment of treatment efficacy. Understanding and improving adherence can maximise the impact of Occupational Therapy.