

# Can't Cope, Still Don't Care... How an Understanding of Patient Motivations Delivers Value Beyond Patient Communications

In 2018 Branding Science conducted an original piece of research 'Can't cope, don't care', based on the NHS's 'Healthy Foundations' segmentation of patient health personalities. (Google 'NHS Healthy Foundations' to find out more about the original work). Our findings were discussed in a workshop at the 2018 BHBIA conference.



Our research consisted of an online profiling of 320 chronically ill patients, into 1 of 5 health personalities, to then identify the form of support that each group found most appealing. What drew us to the original work was its core proposition that the roots of patient engagement and disengagement lie with different personality factors, and that there is not a single factor behind disengagement. We found that some patients are disengaged because they are fatalistic and do not believe they can improve their health [the 'can't cope' patients of our title], other patients can't engage because they are chaotic and disorganised, whilst others are simply more driven by things other than a concern for their health – they believe 'it will never happen to me' [the 'don't care' patients]. Patients may exhibit the same non-compliant behaviour, but a one-size-fits-all engagement approach fails to address their very different drivers, and is likely to fail as a result.

One year on, we have found in our discussions with HCPs that the segmentation holds true for their patient populations, and that it not only applies to chronic patients but also to patients with acute and life-threatening conditions. This has motivated us to implement the segmentation across the spectrum of our project work:

- We have developed standard screening mechanisms that allow us to identify health personality type when recruiting for qualitative patient research. This has proven useful in understanding how and where to focus interview questioning and allows the researcher to see where health personality influences response and output. We plan to further tailor our research to the practical needs of the different personalities by varying venue, timings and channel of communication in the research process, for the different personalities

- We have used our patient profiling tool in online surveys to add a layer of understanding to our quantified results. The richness of the original NHS work is hugely valuable in aiding understanding of why particular groups behave in the way they do, and more importantly, what we can do about it!
- We have developed the 5 personalities into an enabling device, for use in HCP interviews, which allows us to get doctors to talk about patients and their needs in a deeper and more meaningful way. 9 out of 10 HCPs spontaneously recognise these types as real, and this enables us to then explore whether each type presents different issues for management, and provokes different expectations of outcome. We have found that the personalities are invaluable in complementing clinical patient profiles in these discussions: by bypassing the often woolly personality characterisations adopted by HCPs, such as the 'worried well' and 'heart-sink patient', they allow us to talk about patients in more immediate and human terms.

It is not news to the healthcare market research community that an understanding of patients is at the heart of successful pharma partnerships with healthcare providers! However we have also found that the development of this work has been very helpful in practically demonstrating the value of this approach with some remaining sceptics out there!

Following our findings about the need to tailor interventions according to personality type we have also used the segmentation to further explore this topic:

- We are exploring development of different support mechanisms tailored to the different personality types enrolled in clinical trials with a view to reducing very costly drop out.
- We are seeking to bring the segmentation to bear on the development of messaging and support materials for harder-to-reach patient groups.
- We are also exploring the international relevance of the segmentation – after successful use in the US we are looking to expand usage in Europe.

We look forward to new insights based on this work and will continue to share its development with the healthcare MR community. In the meantime, it's encouraging to see patients being researched earlier and more thoroughly in brand planning – it's a relatively small leap to recognise that patients are not a homogeneous lump, but a many-varied and fascinating group of individuals, and to conduct our research with them accordingly!

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