

"I'm tired of taking medicine. Personally, I think it's better not to take medicine if possible. I'm not really sure why I'm taking it."

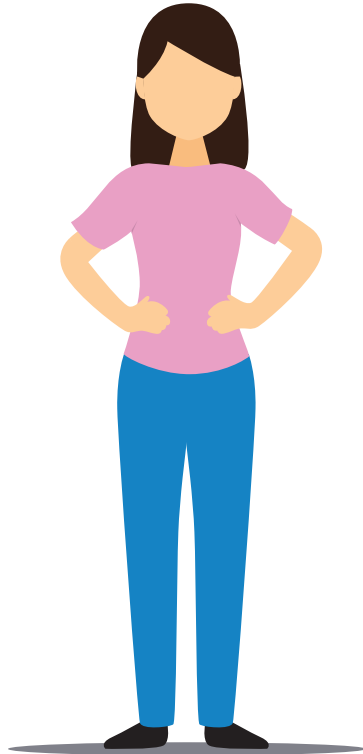
Struggling Sue, 26 Single mother of a young child

Sue is dealing with a few chronic conditions. She has her high school diploma and works full time as a cashier at a local grocery store, while also caring for her young child. She lives over 200 miles away from any parents or siblings. Over the years, she's jumped around to different doctors and hasn't had a strong relationship with any of them. Doctors don't always ask if she's taking her medicine as directed, so she doesn't tell them if she's taking it, or even if she's gotten the prescription filled.

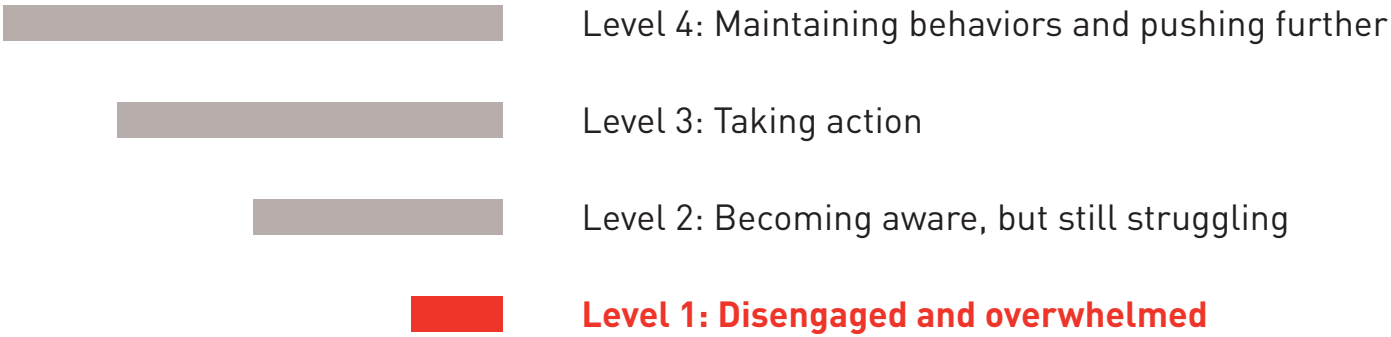
"I've got too much to think about. I'm supposed to keep track of how I'm feeling and my medicine. It can all be really confusing. Honestly, sometimes I don't even get the refills. I think that's okay, though. It gives my body a break, and also my wallet."

What are the medication adherence level and key demographics of a Struggling Sue?

Adherence level	Has medicine on hand <25% of the time ¹
Age	Younger people tend to be less adherent overall ^{2,3}
Gender	Women tend to be less adherent than men ^{2,4}
Disease	<ul style="list-style-type: none"> • People with multiple conditions have lower adherence^{2,5} • Diseases that have low adherence rates include:⁶⁻⁸ <ul style="list-style-type: none"> – Diabetes – Asthma – Depression
Socioeconomic status	Low socioeconomic status is often an adherence barrier ^{2,9}
Level of support	Low social support is an adherence barrier ^{10,11}
Race/ethnicity	Minorities are generally less adherent ^{2,9}



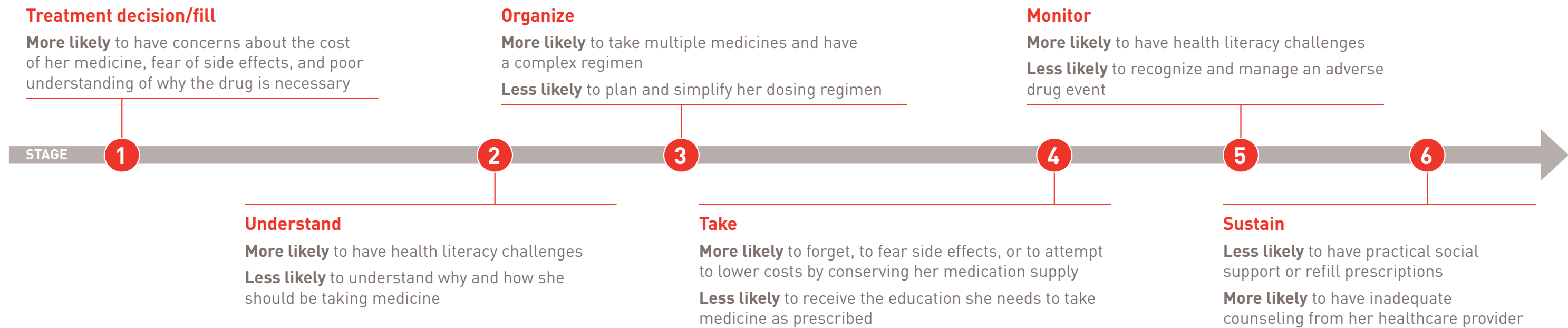
What is a Struggling Sue's Patient Activation Measure® (PAM®)?¹²

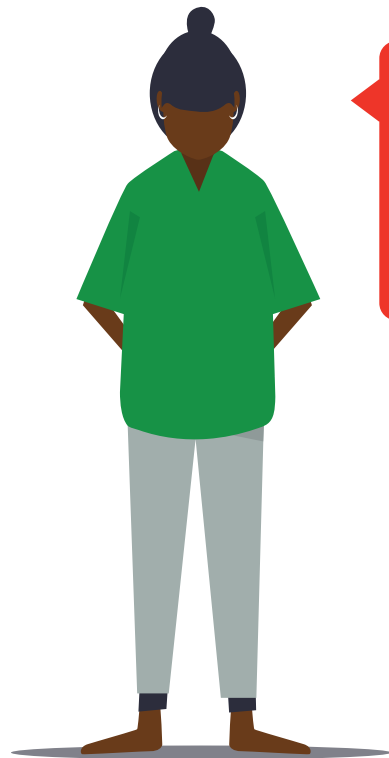


Individuals at PAM level 1 are passive and lack confidence. Adherence and knowledge about the condition or medicine are low, and goal-orientation is weak.

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What are the defining behaviors of a Struggling Sue?^{3,10,11,13-20}





"I think I can control my symptoms with diet and exercise instead of with medicine."

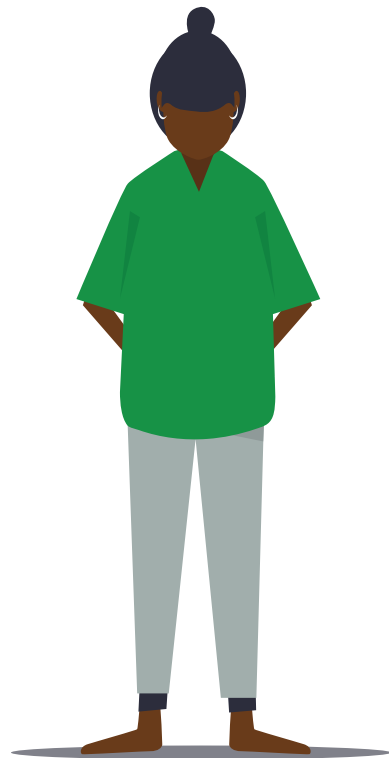
Juggling Janet, 43 Wife and mother of 2 children

Janet was recently diagnosed with a chronic condition. She has a 2-year college degree and works as an administrative assistant at a law firm. Janet knows she needs to learn more about her condition and how to take her medicine but can't find time to actually sit and learn about it. She wouldn't even know where to begin if she had the time. Her doctor told her to schedule some follow-up appointments, but so far she hasn't scheduled them.

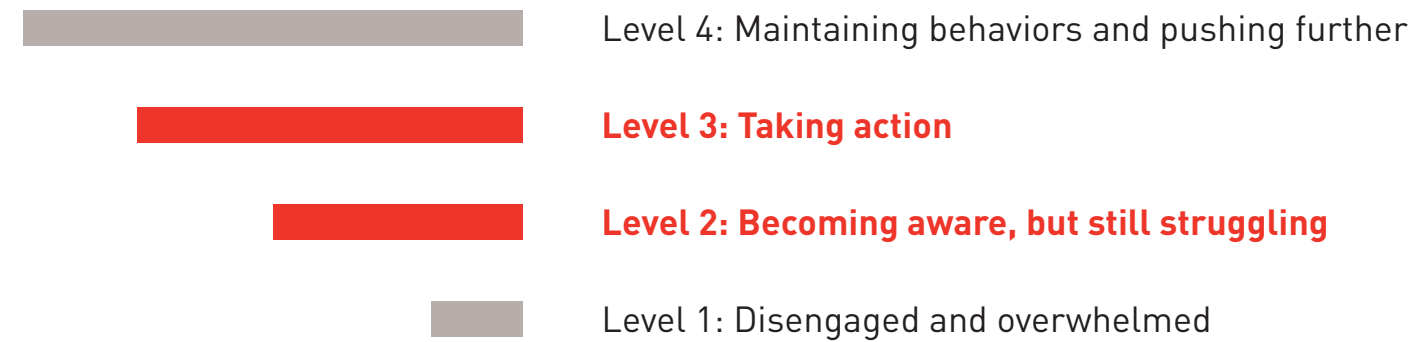
"My family and friends know about my disease, but I really don't want to worry them about it. I guess I could ask my doctor the questions I have, but it's not like we have a lot of time to talk when I'm there. He's really busy."

What are the medication adherence level and key demographics of a Juggling Janet?

Adherence level	Has medicine on hand 25% to 80% of the time ¹
Age	Middle-aged or older people are more adherent overall ^{2,3}
Gender	Women tend to be less adherent than men ^{2,4}
Disease	<ul style="list-style-type: none"> • People who have a chronic disease that requires complicated dosing or treatment tend to be less adherent²¹ • People who have a condition with less perceived severity have lower adherence²²
Socioeconomic status	Low socioeconomic status is often an adherence barrier ^{2,9}
Level of support	Greater social support is an adherence motivator ^{10,11}
Race/ethnicity	Minorities are generally less adherent ^{2,9}



What is a Juggling Janet's Patient Activation Measure® (PAM®)?¹²



Individuals at PAM levels 2–3 have a basic understanding of their condition and/or treatment and are beginning to take action by building self-management skills.

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What are the defining behaviors of a Juggling Janet?^{3,13-16,19,20,23-26}

Treatment decision/fill

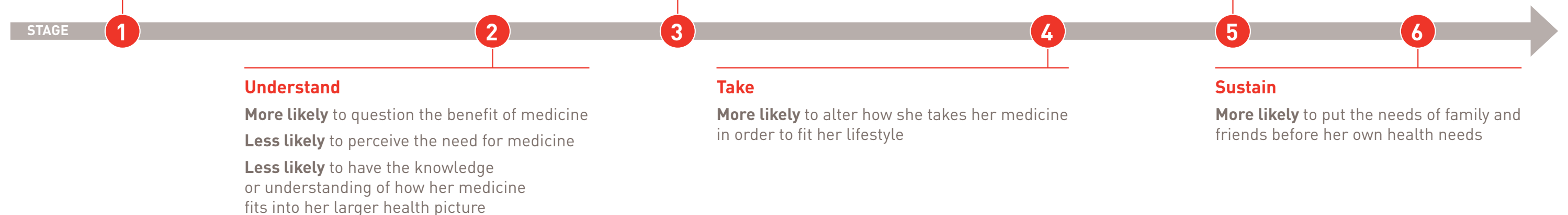
- More likely to miss healthcare provider appointments
- Less likely to trust or have established relationships with healthcare providers
- Less likely to feel confident in a healthcare provider's ability
- Less likely to feel satisfied in the quality of care she receives

Organize

- Less likely to adjust lifestyle for treatment

Monitor

- Less likely to feel confident about coping with taking medicine and having the skills to support behavior change





"I'm feeling good lately. I don't know if it's because I've been more active and eating healthier or if it's the medicine that's helping. It'd be nice to stop taking the medicine for a while and just see how I do, but I'll keep taking it like my doctor told me to."

Stick-to-it Stanley, 68 Husband, father of 2 adult children, and grandfather

Stanley has been living with a chronic condition for over 10 years. He was a Vice President of a large communications company but is now retired. His days are busy with family and volunteer activities, so he occasionally misses a dose of his medicine. He has a good relationship with his healthcare team and lets his doctor know that he sometimes forgets to take his medicine. The doctor, his nurse, and Stanley's wife all help keep Stanley on track with his medicine.

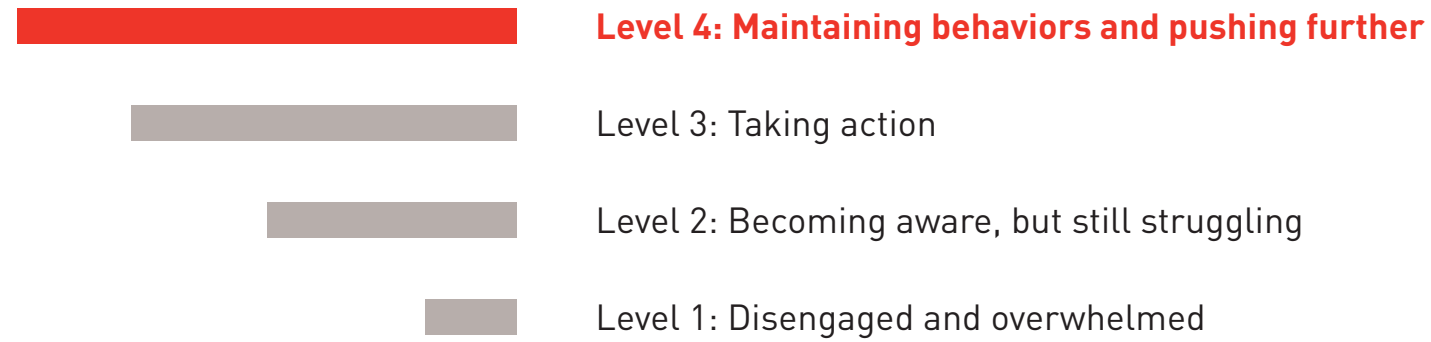
"My medicine seems to work, but I've had a couple of side effects lately. They're pretty minor, but I'm going to check with my doctor just to ensure it is normal and things don't get worse. I've been doing well, but remembering to take my medicine can be tough sometimes."

What are the medication adherence level and key demographics of a Stick-to-it Stanley?

Adherence level	Has medicine on hand ≥80% of the time ¹
Age	Middle-aged or older people are more adherent overall ^{2,3}
Gender	Men tend to be more adherent than women ^{2,4}
Disease	<ul style="list-style-type: none"> • In general, patients with multiple conditions have low adherence rates.^{2,5} However, there is evidence to suggest that people with non comorbid conditions, like those listed below, tend to have higher adherence compared with others:^{2,27-29} <ul style="list-style-type: none"> – Hypertension – Hyperlipidemia – Cancer (breast)
Socioeconomic status	Higher socioeconomic status is associated with higher adherence levels ^{2,9}
Level of support	High social support is associated with higher adherence levels ^{10,11}
Race/ethnicity	Caucasians are generally more adherent ^{2,9}



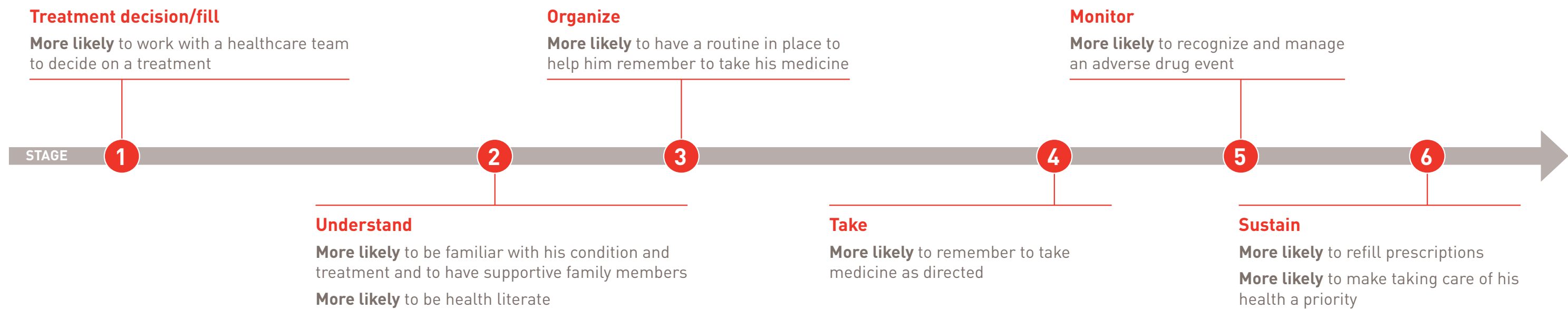
What is a Stick-to-it Stanley Patient Activation Measure® (PAM®)?¹²



Individuals at PAM level 4 have a strong desire to improve their health, having adopted behaviors with a focus on maintaining a healthy lifestyle.

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What are the defining behaviors of a Stick-to-it Stanley?^{3,13-14,17,19,30-32}



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