

Financial Incentives to Increase Treatment Engagement in Psychiatric Care

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Overview and Significance

Importance of adherence

Necessary for ensuring optimal treatment outcomes

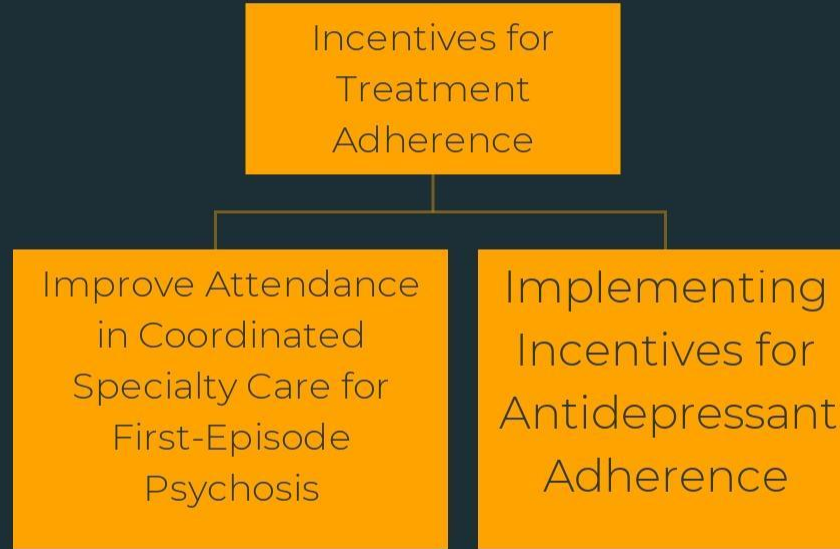
Incentivize

Utilize incentives to promote beneficial behaviors and adherence to a patient's treatment

Design and implement the correct incentives and time them accordingly to maximize favorable behaviors

Patients overestimate how harmful disengagement can be due to cognitive biases and misperceptions

Initial and Secondary Project Overview



Initial Project: First-Episode Psychosis

- Coordinated Specialty Care (CSC)

Multi-modal early intervention treatment

Cost-effective

- Disengagement

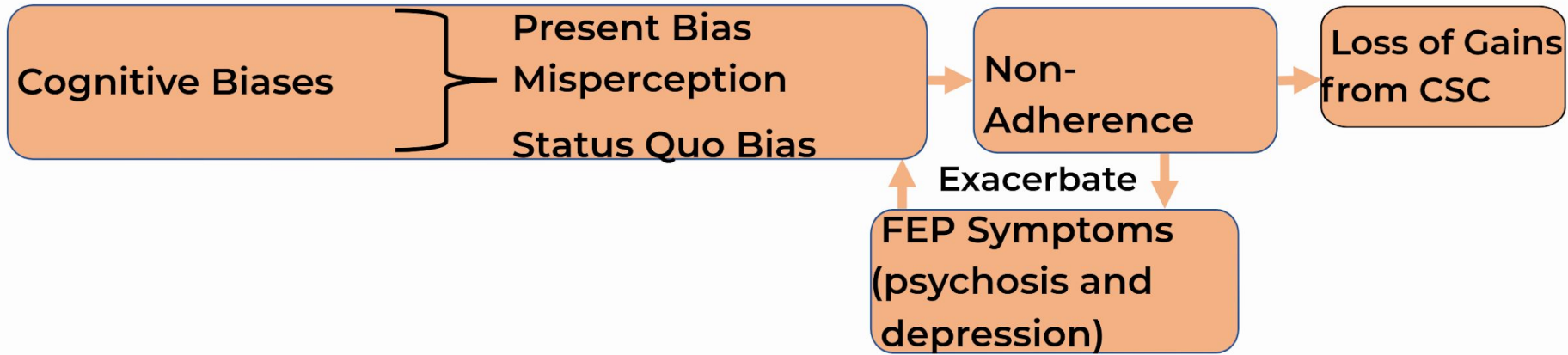
Missed appointments and attrition severely limit the benefits of treatment

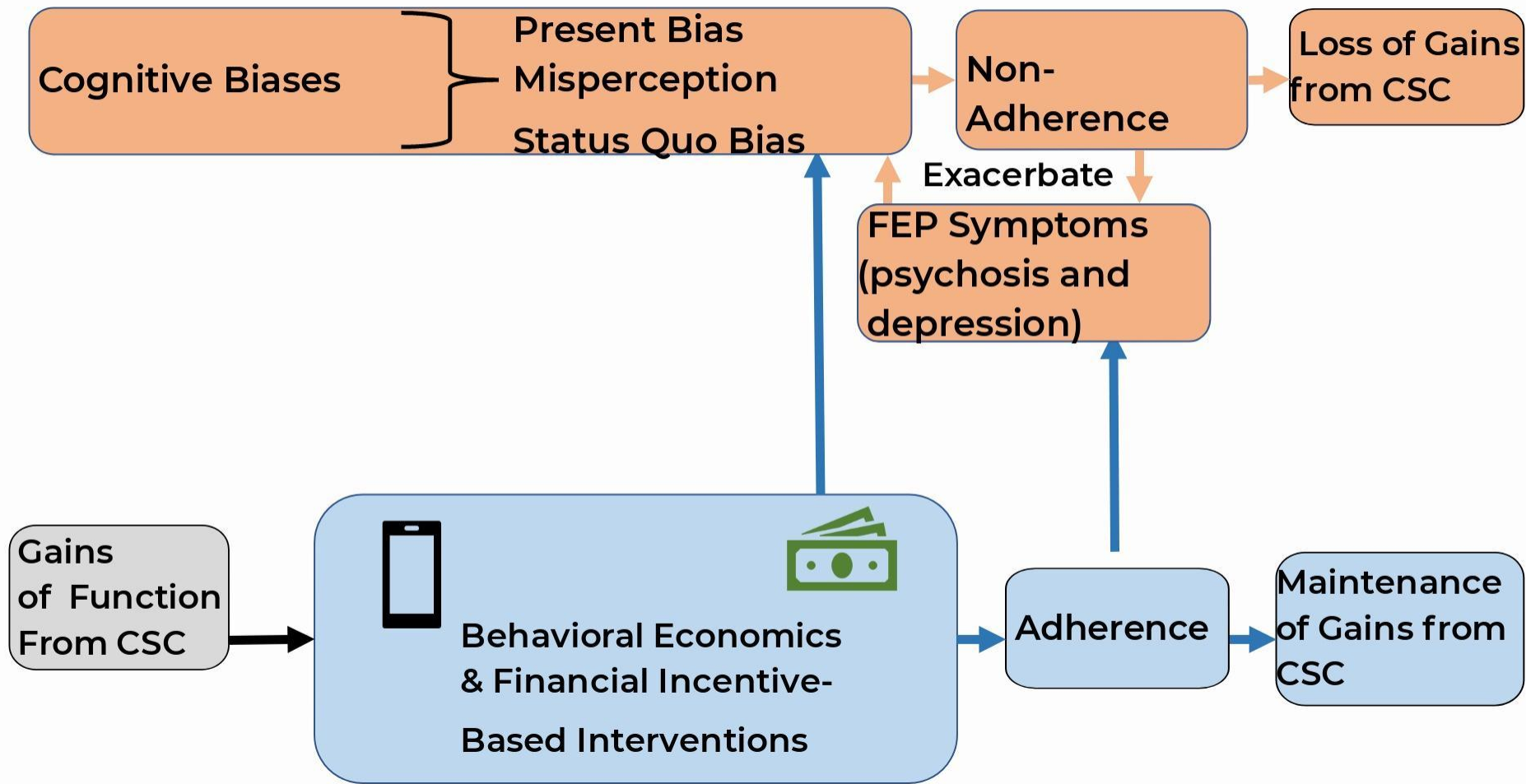
Decreased quality of life and higher symptom burden

- Incentive Structure

Combinations of nudge framing, timing, and incentives for the most feasible, acceptable, and encouraging strategy for appointment attendance

12-month, single-arm, pilot trial which **aims to develop and sequentially improve** a nudging and incentive strategy to encourage appointment attendance for patients in CSC





Secondary Project: Major Depressive Disorder

- Pharmacological Treatment

Cost-effective

Especially for patients undergoing treatment for first time

- Limited Effects

High rates of non-adherence and discontinuation for first-time patients

- Existing Trials

A recent trial* from Penn Center for Mental Health showed incentives and text messages were effective in reducing non-adherence

Secondary analysis of 30 semi-structured interviews of participants in that trial which **aims to assess** acceptability and perceived optimization to improve intervention/implementation strategy

My Role

1

Enrollment

Assist with enrollment into pilot study

2

Training

Qualitative methods training

3

Coding

Go through and analyze interview transcripts

4

Create Codebook

Sort and summarize evidence into digestible format

Methods for Pilot Study

Initial Observation Period

3-month observation period and gather baseline data on participants

Maximum of \$50 per month for attending all appointments

Intervention Periods

Observation period followed by **three 3-month** intervention periods

Adjust interventions based on surveys and clinical data assessing acceptability and feasibility

Patient Surveys

Completed by ~65 patients and ~15 clinicians

Conducted at 2 CSC clinics

Appointment attendance monitored for each period and compared with prior periods

Clinician Surveys

Distinct survey of ~50 clinicians at other CSC sites

Conducted in last 3-months of trial

Understand barriers for scaling intervention more sites

Plan for follow-up at multiple sites for randomized controlled trial of most feasible and effective intervention

Methods for Secondary Study

- Interviews

Researched staff conducted ~30 telephone interviews with patients prescribed antidepressants and undergoing intervention strategies

Questions on medication adherence, incentive effectiveness, and thoughts on scaling strategy to larger group

- Incentives

Small and daily monetary incentive for taking medication

One group with increasing rewards and one group with decreasing rewards

Daily text message reminding to take medicine and receive money

Specialized pill bottle

- Data Analysis

NVivo 12

Lessons Learned



Passion for Mental Health Treatment



Value of Researching Mental Health
Services



Qualitative Experience

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Questions