FRAMEWORKS
in Health and Quality

Schizophrenia Relapse Reduction Program

Treatment Adherence in Schizophrenia:

Engagement Strategies for Health Care Providers, Case Managers, and Advocates

This resource is provided for informational purposes only and is not intended as reimbursement or legal advice. You should seek independent, qualified professional advice to ensure that your organization is in compliance with the complex legal and regulatory requirements governing health care services, and that treatment decisions are made consistent with the applicable standards of care.

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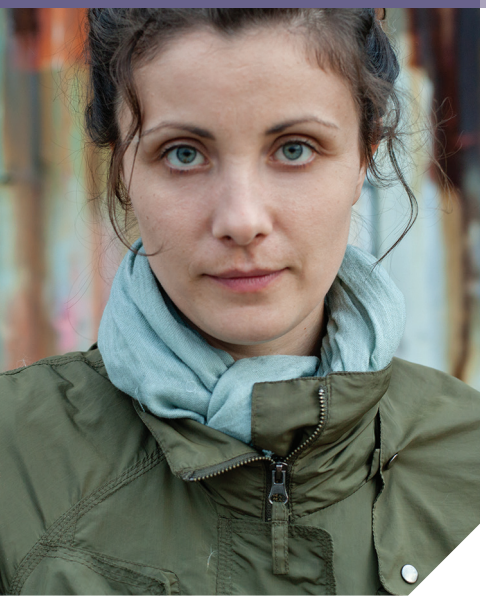

Schizophrenia is a chronic, relapsing, and disabling disorder characterized by symptoms such as hallucinations and delusions, disorganized thinking, affective flattening, apathy, and social withdrawal.[1]

Relapse in schizophrenia has been defined as worsening of symptoms or rehospitalization.[2] Following a relapse, people with schizophrenia may not return to their previous levels of functioning.[3]

Prevention of relapse is one crucial goal of long-term therapy.[4]

Helping to reduce relapse is an important goal that you as a health care provider, case manager, or patient advocate play a part in. This guide offers some suggested strategies to help you engage your clients with schizophrenia.

Impact of Poor Treatment Adherence

Partial adherence and discontinuation of oral therapy are significant problems among people with schizophrenia.[5]

- **Low adherence can result in increased risk of relapse, increased resource use, and increased costs to the health care system.[6]**
- **A claims review of California Medicaid patients showed that having even a few days' gap in medication therapy increased the risk of rehospitalization.[7]**

The most-common reasons for partial medication adherence include lack of efficacy or worsening symptoms and side effects.[8] Other reasons include cognitive impairment, lack of insight concerning the disorder, co-occurring substance abuse, and lack of supportive help from family/caregivers and providers.[9,10]

Potential Barriers to Treatment Adherence[11]

- Duration/complexity of treatment plan
- Poor therapeutic alliance
- Inadequate follow-up
- Comorbid conditions
- Concerns about treatment costs
- Stigma of taking medication
- Concerns about side effects, dependency
- Missed doses (unintentional)
- Confusion about how to take medications

Adherence is an ongoing effort. Consider having continued discussions with your clients about treatment adherence throughout the treatment process. The following tips may help address barriers to treatment adherence and promote a therapeutic alliance between you and the people with schizophrenia you are helping.

Cognitive behavioral therapy, cognitive remediation, or motivational interviewing techniques may be used to explore barriers to adherence.

Techniques to Help Engage Clients

The most consistently cited patient-related psychological risk factors for low medication adherence are poor insight, denial of illness, and negative attitudes toward medication.[12] Cognitive behavioral therapy, cognitive remediation, and motivational interviewing seek to address these risk factors.

Information regarding cognitive behavioral therapy, cognitive remediation, and motivational interviewing is provided for educational purposes only. This information is not to be interpreted as medical advice, or to be construed as training.

Cognitive Behavioral Therapy

The main goal of cognitive behavioral therapy (CBT) is to modify thinking and beliefs to produce cognitive change, with a focus on symptoms that are particularly troublesome to the client.[9,13] CBT may help clients strengthen coping mechanisms, develop more rational perspectives about symptoms, and modify beliefs about medication.[9,12] CBT may help clients cognitively link medication adherence to symptom reduction through promoting, modifying, and reinforcing behaviors related to adherence.[12]

Cognitive Remediation

Cognitive remediation (CR) is a behavioral treatment for clients with cognitive impairments, including problems with attention, memory, and abstract reasoning, which interfere with their daily functioning.[14] CR techniques, such as information reorganization, environmental aids, and computer exercises, may help clients address some of their cognitive deficits.[9,15] CR may have small to moderate positive effects on functioning in people with mental illness, primarily those who are stabilized.[14]

Motivational Interviewing

Motivational interviewing (MI) is a talk therapy whereby members of the treatment team establish rapport, express empathy, and create a collaborative relationship with their clients.[12] MI helps strengthen a client's motivation and commitment to change.[16]

Therapeutic Alliance

Regardless of the type of therapy used to address adherence issues, it is important to establish a strong therapeutic alliance, which has been shown to improve medication adherence.[12] Establishing rapport with your clients who have schizophrenia may be difficult, but a therapeutic alliance may increase the likelihood that clients will remain in therapy.[12]

Assess Your Client

It is critical for you to understand how willing your client is to adopt a particular treatment recommendation. If the client is not motivated to change his or her behavior, any sharing of information will likely be ineffective and may not result in changed behavior.[12]

Ask Open-Ended Questions and Express Empathy

One goal of engaging your clients with schizophrenia is to begin to try and understand their perspective on their disorder. Asking open-ended questions can help to draw them out and allow for expression of concerns or thoughts regarding their disorder.[17]

Asking open-ended questions and expressing empathy may help you understand your client's perspective without judgment or criticism. Being listened to in a focused, nonjudgmental and accepting manner allows your client to feel valued as an individual and to possibly be more open to discussion.[17]

Suggested Questions[12,18]

- How do you feel about taking this medication?
- What do you think will happen if you stop taking this medication?
- Why do you think you should take your medication?
- What reasons can you think of not to take it?
- What do you like (or dislike) about your medication?
- Based on what we talked about, can you tell me why taking this medication is important?

Consider assessing your client's motivation to adhere to a treatment plan and a healthy lifestyle.[12]

Family Involvement

It is also important to involve a client's family in treatment. Families can have an impact on your client's adherence to prescribed medications. Studies of patients with psychiatric illness have demonstrated that when family members are engaged in their loved one's treatment, adherence improves and relapse is lower. You should determine if the family is willing to support and encourage medication adherence. Whenever possible, involve family members in treatment planning, address their concerns about recommended treatment, and provide educational information to both your client and his or her family.[12]

Remember

Prevention of relapse is a goal of long-term therapy for your clients with schizophrenia, and medication adherence is an important factor to meeting this goal. While there are many barriers to treatment adherence, there are also things you can do to help your client stay adherent to medication. Assessing your client's willingness to adhere to therapy, asking key questions, utilizing a therapy modality that focuses on specific barriers to adherence, and involving your client's family all may help improve adherence.

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