Education is Key



Giving voice to a cause

remember being at Ben Taub Hospital in Houston. Texas. September 2000, I think it was Tuesday the 26th. I had been in the hospital over the weekend, weighed about 110 lbs. with a T-cell count of 108, and the diagnosis was AIDS.

I had been in an isolated room, with only my mother, father, and sister visiting. I could see that look in their eyes. The "we hope you get better, but it doesn't look good" look. How could I explain to my family what AIDS was when I was selectively ignorant about it?

I was about to turn 30 on December 26. Oddly enough, I never thought I would make it to that age and here I was doing my best to make it through the night. I just wanted to be outside again and get on with my life. I also promised myself that my diagnosis was for a reason.

My family, rightly so, were scared about me having to come back and live with them. They, I mean we, didn't have all the information about HIV. I was a 29-year-old gay man, and I was ill-informed about a virus that had been around for more than 20 years. How was that possible?

So, the first group of folks who I needed to educate on what was and was not HIV was my family and me. It also meant that I had to learn to translate the information because at the time Spanish information was limited and some of it was not translated in a culturally friendly way.

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At the time I was volunteering for the Valley AIDS Council in the Texas Rio Grande Valley, and it was the perfect training ground for launching my advocacy career, although at the time I didn't know the term existed. I knew of activism, but that wasn't what I wanted to do.

During that first year I was asked several times to share my story. It was a short story then, being diagnosed, disclosing, and dating. I didn't know the terms or have any facts; I only knew what I

had been through so far and how it was affecting my family. It didn't have an ending.

A year later, I decided to move back to Houston, and after I applied for services at Family Service of Greater Houston, I was asked to apply for a seat on the Ryan White Planning Council. I had no clue what I was getting into, but I was guided to apply.

I was elected to chair the Priorities & Allocations Committee, in charge of allocating money to the different services. My second year we had to cut financial aid to several food banks, and I was nicknamed "Hatchet Man." I was hurt by the nickname, but that was also part of being an advocate on a committee.

In 2003 I was part of the Act Now campaign. There were 12 advocates traveling all over Texas finding clients with a story to share. We were going to the capital, Austin, to ask for additional funding for ADAP (AIDS Drug Assistance Program). It was the largest amount funded to date. I was an advocate training another advocate.

I continued to do my part in Houston until I moved to Laguna Beach, Calif. I thought my time as an advocate was over, I was going to be a famous actor. I quickly learned advocacy



WHAT PHARMA CAN LEARN FROM ME:

What pharma could learn from me is that my experience has value. That I'm more than a chart, a number, or a diagnosis. That my journey has taught me lessons that I can pass along to health professionals, caregivers, and clients. That I'm body, mind, and soul. That I'm years of nurturing and nature working together to form me and I'm worth getting to know.

doesn't leave your system that easily. I became an ambassador for Shanti Orange County, Radiant Health Centers, and the University of California – Irvine, sharing my story to high schools, community colleges, and universities, and educating young folks on infection prevention, treatments, and living with HIV.

In 2020 I celebrated 20 years HIV+, 13 years clean and sober, and my 50th birthday. For all that 2020 wasn't, I reached tremendous milestones in my life personally and professionally. I am proud to call myself an advocate, after thinking I wouldn't make it to age 30.

Today, I chair the Client Advisory Committee and sit at the table with other board members for Radiant Health Centers, making sure that the client's voice is heard, in English and Spanish. I wear that hat with great respect and honor that I was chosen to hold such a position.

An advocate is a person who supports a cause, and my cause was to give HIV, anal cancer, and mental health a voice. Once an advocate, always an advocate, and I've been blessed to make a career out of it. I look forward to what the future holds for me in my advocacy.

The Next Frontier of Patient Adherence Programs



Patient adherence has become a competitive driver for the life sciences industry to realize the full clinical potential of their therapies and achieve even greater commercial success. Many biopharma companies are taking a proactive approach to integrating new capabilities that better bridge the gap between what patients are expecting and looking for and what's being provided today. With this increased investment there has been a rapid pace of innovation in product offerings that are cultivating an environment that will have a lasting impact on the patient experience and patient outcomes.



#1: Holistic Patient Support Models

In an effort to deliver a superior experience, many companies are leveraging One Voice™, a high-touch, technology-enabled platform which connects patients to an experienced and trained Clinical Nurse Educator as their single point of contact throughout their treatment journey. In this model, the nurse is responsible for connecting the dots to enable the necessary functional, clinical and emotional support that's needed to successfully start and stay on therapy. By providing a consistent and trusted resource from the time of prescription and onward, patients have a north-star on their journey.

One Voice has demonstrated a 41% increase in patient persistency at 6 months relative to baseline levels.¹



#3: Combining Digital Touch with Human Connection

Brands are executing robust digital adherence programs to not only fill in the gaps that exist in between human touchpoints, but also extend the relationship with patients to go beyond the support that is often provided early on in the treatment journey. Examples of these types of communications include motivational messages, milestone achievements, and medication reminders sent via text, email, chat and other channels. As biopharma commits to building and deepening relationships with patients, there is a role that digital health will play, but what will be most critical is determining how best to balance high tech with high touch.

"Technology is not a replacement for human interaction, empathy or intuition."³



#2: Advanced Analytics to Tailor Interventions

Many patient support programs now leverage predictive analytics to stratify patients based on their adherence risk profile up front and tailor their support journey accordingly. This adherence risk is calculated using several social determinants of health. Up front analytics alone is not enough. Regardless of their adherence risk, all patients have episodes of heightened medication adherence risk at certain unpredictable times along their journey. To address this, discontinuation risk models are used on an ongoing basis to know when to proactively intervene with just-in-time support.

"Nurses have the influence to proactively adopt and expertly apply emerging technologies, adding value to care delivery by making the best data-driven decisions to improve outcomes and patient experience."²



#4: Incorporating the Voice of the Patient into Support Programs

Biopharma is implementing techniques to capture real-time patient insights and learnings to inform commercial strategy, brand messaging, value-based contracting and other initiatives. Clinical Nurse Educators are in an optimal position to do this because they not only are interacting with patients on an ongoing basis, but they also are skilled and experienced in being able to surface key insights through motivational interviewing and other evidence-based approaches. For many therapies, this work now includes systematically capturing patient-reported outcomes (PROs) in a HIPAA-compliant manner.

50% of biopharma companies report that they are investing in their real-world evidence capabilities.⁴

VMS is the leading provider of HCP and patient support solutions for biopharma. For 25 years, our singular focus has been on Clinical Nurse Educator programs, and we have invested in building a platform that is forward leaning, proven and focused on improving outcomes. We have relationships with 800+ Clinical Nurse Educators nationwide and deliver 1M+ engagements for our clients whose therapies span the product lifecycle and include 50+ categories. Through the use of behavioral health and analytical models, each of our engagements is highly personalized to address brand needs, support behavior change and lead to an improvement in medication adherence.



