

UNDERSTANDING AND ADDRESSING HEALTH BEHAVIOURS

DECODING PATIENT CHOICES: FINDINGS FROM THE REASON4HEALTH PROJECT

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Background: In the REASON4HEALTH project, we explored the structure, prevalence, and psychological factors predicting intentional non-adherence to official medical recommendations (iNAR) and the use of traditional, complementary, and alternative medicine (TCAM) in Serbia.

Methods: Focus groups with clinicians and TCAM practitioners and a literature review informed the development of instruments assessing iNAR and TCAM use. We tested these instruments in an online sample of 583 adult Serbian citizens ($M_{age} = 39.01$, $SD_{age} = 12.10$) and collected data on iNAR, TCAM, and relevant psychological factors in a nationally representative sample ($N = 1003$, $M_{age} = 39.01$, $SD_{age} = 16.67$).

Results: Intentional non-adherence behaviors (avoiding medical check-ups, self-medication, and self-initiated changes in therapy) formed a single factor. TCAM use formed an overarching factor with four domains: natural product-based practices, alternative medical systems, “new age” practices, and customs/rituals. The nationally representative sample revealed a lifetime prevalence of iNAR at 91.3%. Notably, 47% had taken antibiotics without a prescription, and 29% changed therapy without consulting a doctor; 97% used natural-product based practices, 75% engaged in customs/rituals, 49% used alternative medical systems, and 35% participated in “new age” practices.

Physicians highlighted a lack of health education, insufficient time with patients, and simplicity of TCAM as factors influencing these behaviors, while TCAM practitioners cited a holistic approach and a dedicated relationship with patients. Negative experiences with the health system predicted iNAR ($\beta = .19$ to $.25$, $p < .001$). Irrational beliefs, such as magical beliefs about health ($\beta = .13$ to $.25$, $p < .05$), superstitions ($\beta = .19$, $p < .01$), and beliefs in extrasensory perception ($\beta = .11$, $p < .01$) predicted TCAM use.

Conclusion: Our studies highlight the widespread prevalence of iNAR and TCAM and underscore the need for interventions targeting unfounded beliefs and improving patients’ experiences with the health system.

Keywords: non-adherence, traditional, complementary and alternative medicine, health behaviours, psychological factors, mixed methods