

# Instructions for ATLAS ADHERENCE

## Translating Pages into your Native Language:

Feel free to translate the page into any language you wish using your browser's translate settings.

Chrome: <https://support.google.com/chrome/answer/173424?hl=en&co=GENIE.Platform%3DDesktop&oco=1>

Safari: <https://support.apple.com/guide/safari/translate-a-webpage-ibrw646b2ca2/mac>

Edge: <https://support.microsoft.com/en-us/topic/use-microsoft-translator-in-microsoft-edge-browser-4ad1c6cb-01a4-4227-be9d-a81e127fcb0b>

Firefox: <https://support.mozilla.org/en-US/kb/website-translation>

## Registration: [tinyurl.com/atlasregister](https://tinyurl.com/atlasregister)

This page is mobile friendly 😊

### Register for World Adherence Day 2025!

Name:

E-Mail:

User ID:

When you register, please enter your name, email and choose **only one** user ID. Your information will be kept private and only used for the purposes of the demo and for you to be able to receive your own data.

Please be sure to save your User ID. If you forgot what your User ID is, do not just use any ID, otherwise you will not be considered as registered. Email [info@adherence.cc](mailto:info@adherence.cc) to retrieve your User ID if you have forgotten it or forgot to copy it over.

# MMAS-8 Survey: [tinyurl.com/atlasmmas](https://tinyurl.com/atlasmmas)

This survey is mobile friendly 😊

Feel free to translate the page to your native/preferred language.

## Informed Consent Form

Global MMAS-8 Survey Initiative – World Adherence Day

\*\*Hosted by Adherence & ATLAS (Adherence Tools and Location Analytics System)\*\*

### Introduction

You are invited to participate in a global initiative to assess medication adherence through the Morisky Medication Adherence Scale (MMAS-8®). This survey aims to gather valuable data on medication-taking behaviors worldwide, contributing to improved public health strategies and interventions. Participation in this survey is voluntary, and your responses will contribute to a global dataset uploaded to ATLAS, a real-time adherence intelligence platform designed to analyze and improve medication adherence trends globally.

### Purpose of the Study

- Understand global medication adherence patterns.
- Identify barriers to adherence, including forgetfulness, side effects, and complex regimens.
- Contribute to predictive analytics that support healthcare providers and policymakers in improving adherence interventions.

### What Will You Be Asked to Do?

- Complete the MMAS-8 survey, which consists of 8 questions about your medication-taking habits.
- The survey should take no more than 30 seconds to 1 minute.
- Your responses will be anonymized and securely stored within the ATLAS platform.

### Confidentiality & Data Protection

- Your responses will be kept strictly confidential and will only be used for research and public health improvement purposes.
- No personally identifiable information will be collected or shared.
- Aggregated, de-identified data may be analyzed to inform healthcare policies and interventions.

### Voluntary Participation

Participation in this survey is entirely voluntary. You may choose not to participate or withdraw at any time without any consequences.

### Potential Benefits & Risks

Benefits: Your participation will help advance global medication adherence research, leading to better support systems for patients worldwide.

Risks: There are no known risks associated with this survey.

### Consent Statement

By proceeding with the survey, you confirm that:

- You have read and understood the information provided.
- You voluntarily agree to participate.
- You understand that your responses will be anonymized and used for research purposes.

For any questions, contact us at: [info@adherence.cc](mailto:info@adherence.cc)

I Agree

The first page is an informed consent form which you must agree to in order to enter the survey and participate in World Adherence Day 2025. Pressing “I Agree” will take you to the main survey.

## MMAS-8 Demo Survey Form

You indicated that you are taking medication(s) for your (identify health concern, such as “high blood pressure”). Individuals have identified several issues regarding their medication-taking behavior, and we are interested in your experiences. There is no right or wrong answer. Please answer each question based on your personal experience with your [health concern] medication.

Feel free to translate the page to your native/preferred language. If you have multiple conditions/drugs, you can use the same form and just change the value in the appropriate fields without having to refresh. Hit 'Submit' again after you have changed the fields.

After you complete the survey and hit 'Submit' only ONCE, please scroll to the bottom to make sure you see a 'Thank you' message and further instructions!

### User ID

Enter the user ID you chose during registration.

### Country

Select your country

### City

Select your city

### Patient #

Enter the patient # being evaluated (e.g., patient #1, 2, 3, etc.)

### Condition

Enter condition being evaluated

### Drug Type

Select the drug type

### Drug (API Name)

Enter drug (API) used for treatment

### Drug Strength

Enter strength of drug used for treatment

Once you enter the form, you will see a set of instructions as well as fields for you to enter information.

- **USER ID:** Your User ID is very important here. This is your **researcher User ID!** You will use the **same** User ID throughout the entire Demo.
- **COUNTRY:** Select the country you, as the researcher, will be conducting your study in
- **CITY:** Select the city you, as the researcher, will be conducting your study in
- **PATIENT #:** Enter the patient # (e.g. patient #1,2,3, etc.) Use the **same** patient # for a single patient! E.g. if you have patient 1 with multiple conditions, use the same patient # for that single patient! Enter a new patient # **ONLY** if you have new patients!
- **CONDITION:** You will enter conditions (diseases) for each patient **one at a time**; this will allow us to track a single patient with multiple conditions and also stratify by disease/condition for analysis. Do **not** enter more than one condition in the field at once.
- **DRUG TYPE:** Select whether a drug is a single or combination therapy.
- **DRUG/API:** You may enter a **single** API if a drug comes as a **single** API dosage form (e.g. suppose a person is being treated with both Insulin and Metformin for Diabetes, enter the details for insulin, submit the form, then change the entry to the details of metformin and submit the form again). You can also enter **multiple APIs** (e.g. Trelegy Ellipta for treating COPD has “fluticasone furoate/umeclidinum/vilanterol”) and then submit the form with COPD as the condition and these three APIs for treatment together.
- **STRENGTH:** Enter the strengths accordingly for the APIs. If you have multiple APIs, separate the strengths the same way as you did the APIs.

Route of Administration (Optional)  
Select the drug route of administration

Gender  
Select the patient's gender

Age  
Select the patient's age group

Education  
Select the patient's education

- **ROUTE OF ADMINISTRATION (OPTIONAL):** Enter how the drug is administered to the patient. This question is optional, so you may leave it blank. However we highly encourage to respond to this question if you can since it will help understand how adherence to injections varies from adherence to tablets, for example.
- **GENDER:** Select your patient's gender
- **AGE:** Select your patient's age range
- **EDUCATION:** Select your patient's education level

1. Do you sometimes forget to take your medication?  
Select Yes or No

2. People sometimes forget to take their medications for reasons other than forgetting. Thinking over the past two weeks, were there any days when you did not take your medication?  
Select Yes or No

3. Have you ever cut back or stopped taking your medication without telling your doctor, because you felt worse when you took it?  
Select Yes or No

4. When you travel or leave home, do you sometimes forget to bring your medication?  
Select Yes or No

5. Did you take your medication the last time you were supposed to take it?  
Select Yes or No

6. When you feel like your symptoms are under control, do you sometimes stop taking your medication?  
Select Yes or No

7. Taking medication every day is a real inconvenience for some people. Do you ever feel hassled about sticking to your treatment plan?  
Select Yes or No

8. How often do you have difficulty remembering to take all your medications?  
Select an option

Submit

Next, gather answers from your patient for these questions and press submit. If you leave any necessary fields blank, you will see the following message at the bottom (after scrolling down):

Please fill in all required fields.

If all fields have been entered, then you will see a message like this:

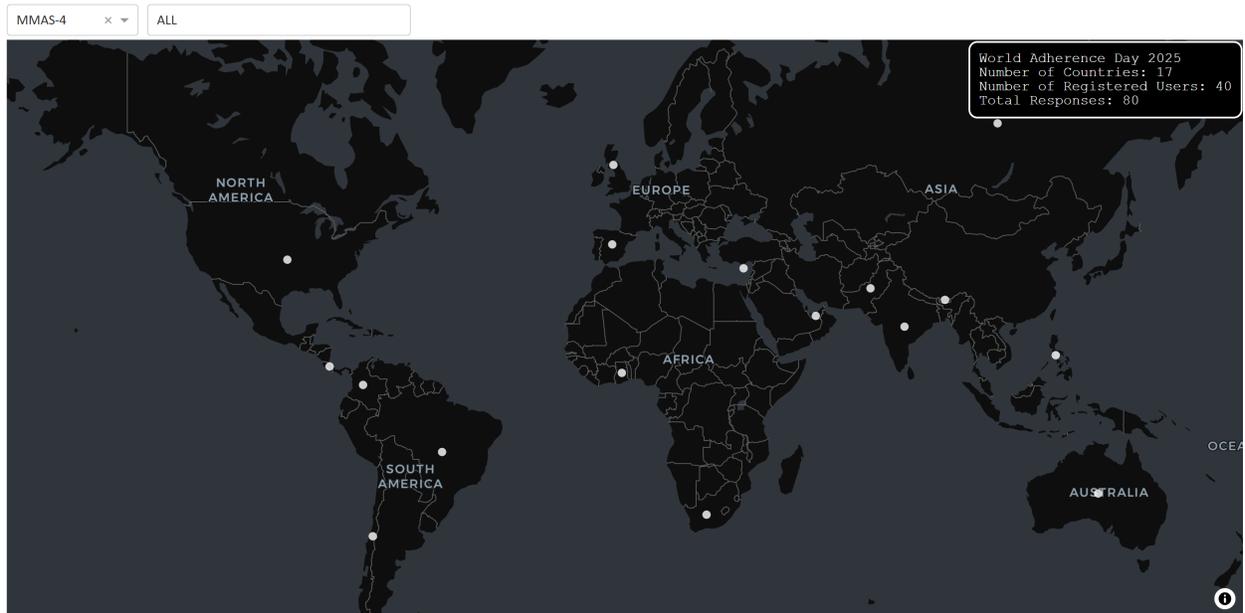
Thank you. Unintentional non-adherence identified. Do NOT press 'Submit' more than once on the same entry, as your entry now has been officially recorded. If you want to add more conditions/drugs/strengths to the same patient, scroll up, make the desired field changes and press 'Submit' only ONCE. Because this message will persist after the first submission, do NOT press 'Submit' more than once on a single patient entry! After you are completely done, you may close the window.

**If suppose you need to make changes (i.e. add a new condition to the same patient, or a new drug, etc. for the same patient), this message will persist. You will only need to press 'Submit' ONCE again after you make the change (e.g., You enter hypertension for one patient, enter all details, press 'Submit' ONCE, then scroll back up, change the condition to COPD, enter the new necessary details and press 'Submit' only ONCE again. Do **not** press 'Submit' more than ONCE on the SAME entry.**

ATLAS: [tinyurl.com/atlasadherence](https://tinyurl.com/atlasadherence)

Pass: atlasadherence

This page isn't so mobile friendly 😬



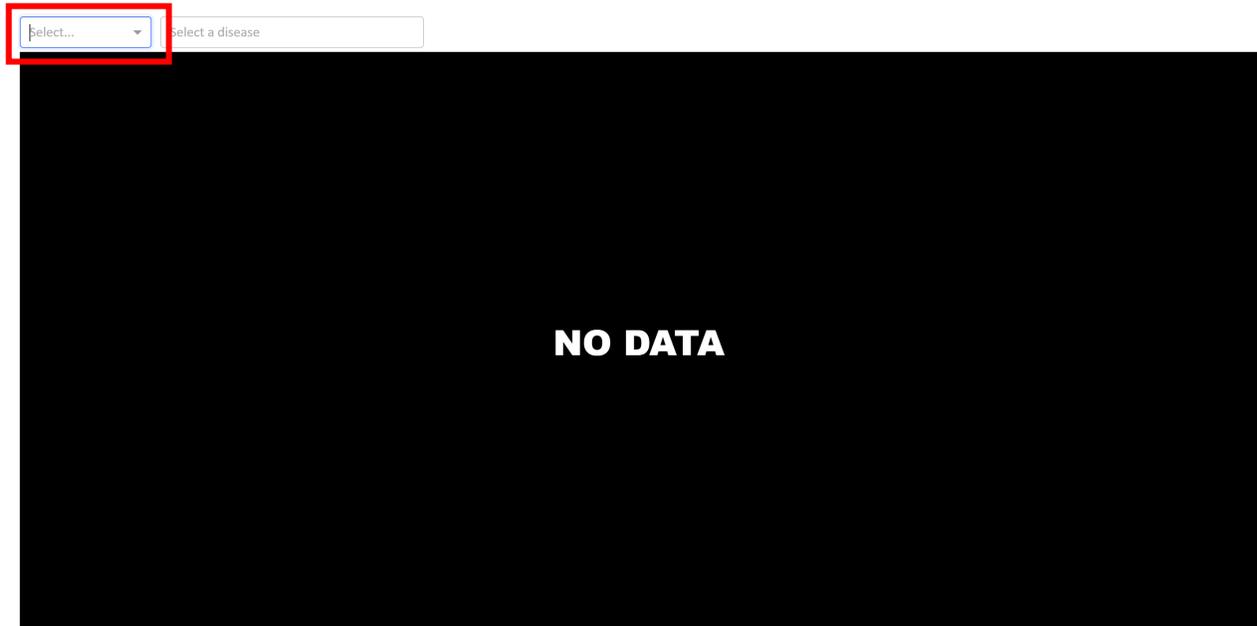
When you first login into the map, you will see this screen appear, showing all the live users. You do **not** need to click on the white dots to see information. Just **hover** over them (this is best experienced on a laptop or desktop, as you may face some challenges on mobile for visualization)



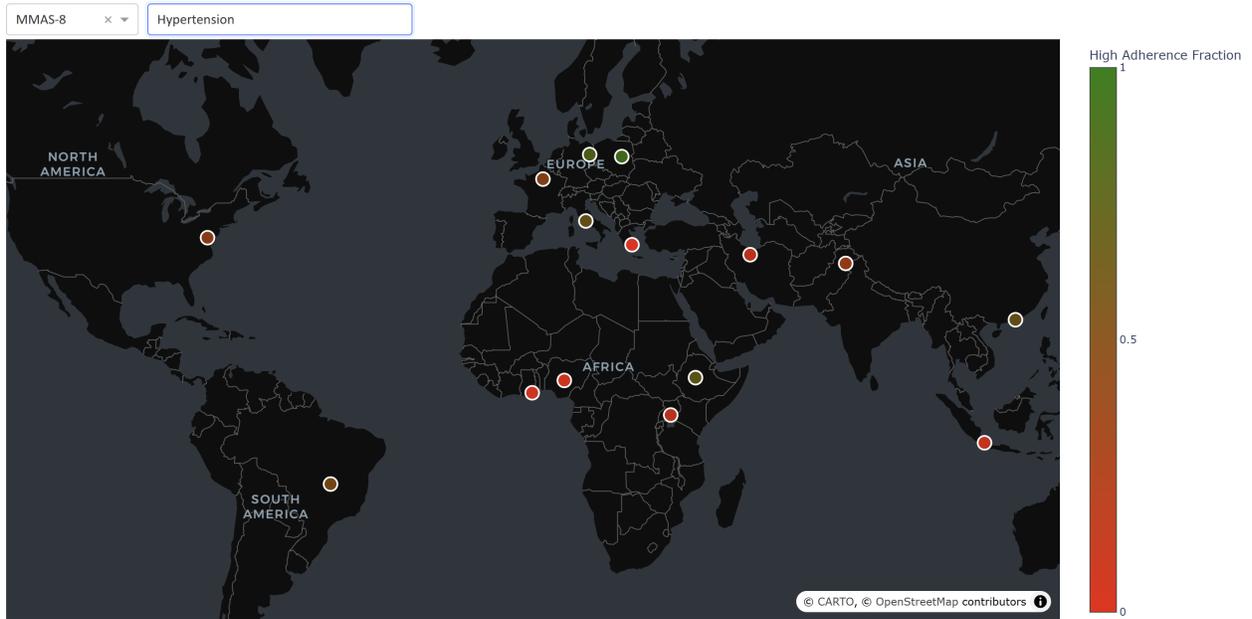
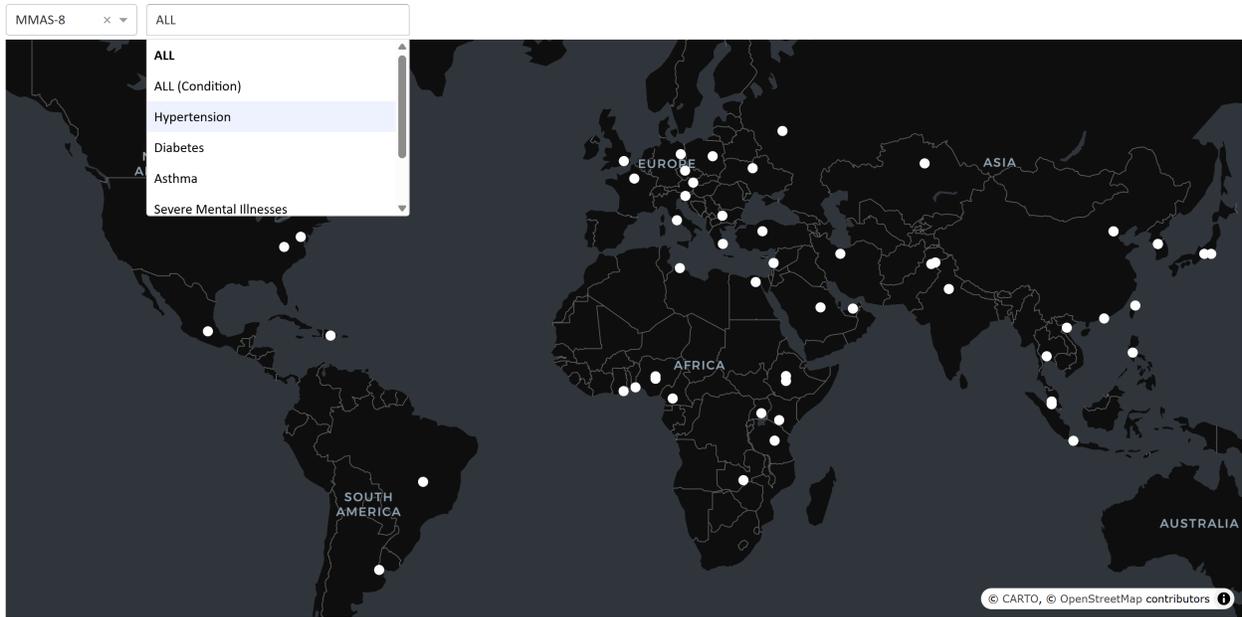
To see empirical data, scroll down and uncheck the “Live Global MMAS-8” checkbox.



Then scroll back up and de-select the scale value, so that “NO DATA” is shown

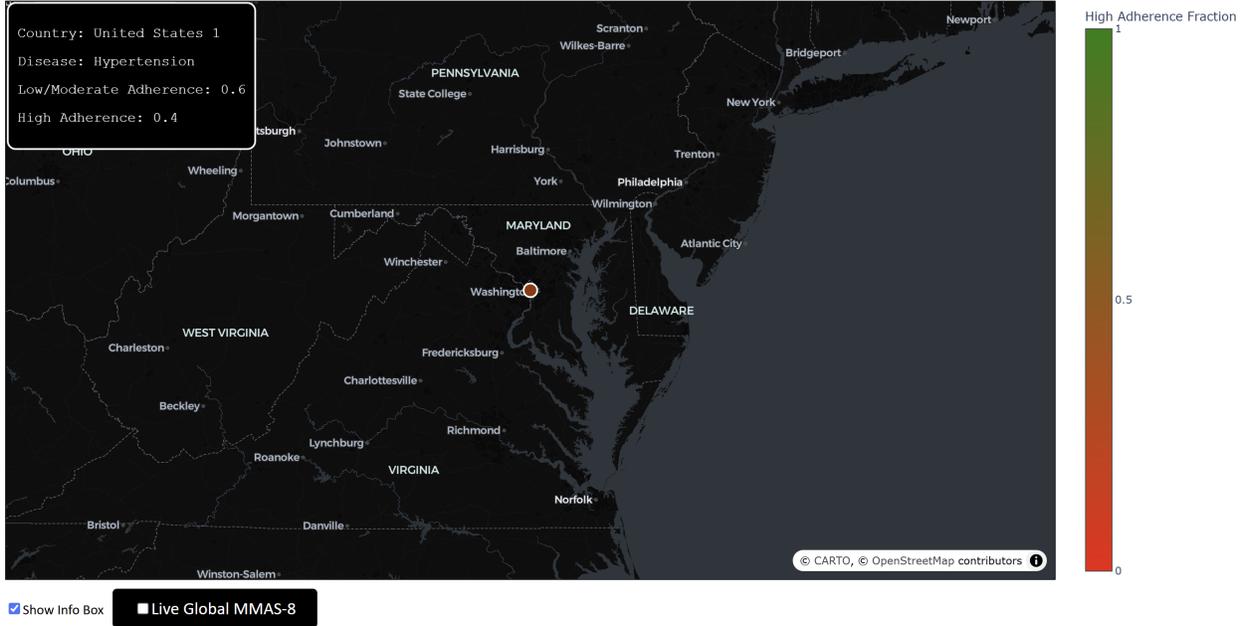


After that, you may select the scale and condition of your choice to visualize:

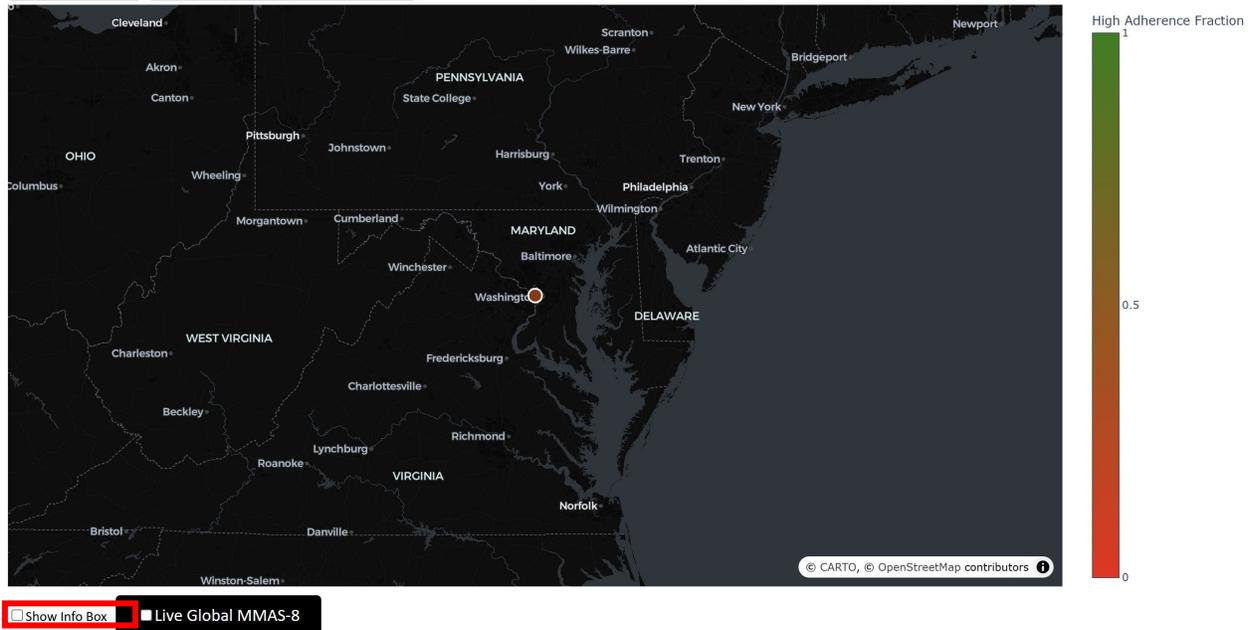


You will see a color gradient indicating the 'High Adherence Fraction'

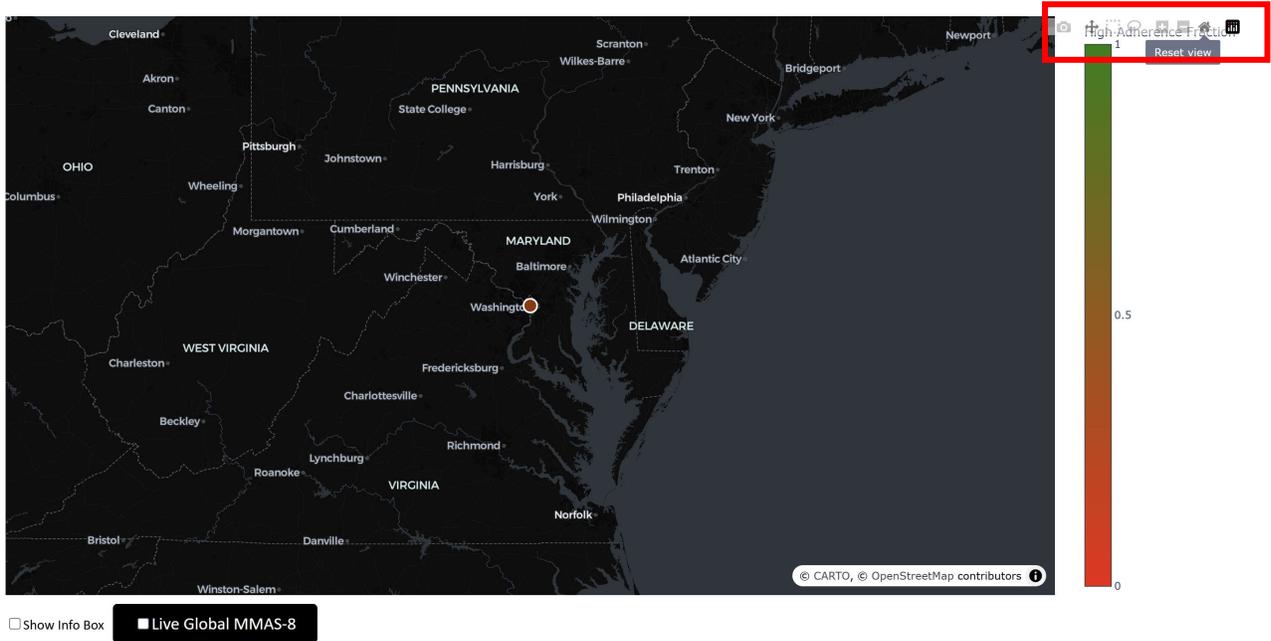
If you click on a country now, you'll be able to zoom in and see more details:



If you want to turn off the info box, you may uncheck it.



Finally, to reset the view, you may hover over the map and click the “Reset View” home button to reset the view:



You can engage between the Live and Empirical data anytime.

Please reach out to [info@adherence.cc](mailto:info@adherence.cc) for any questions.