A Patient-Friendly Approach to Health

Practitioner Profile: Nancy B. Ruddy, PhD

If you had told psychologist Nancy Ruddy, PhD, a few years ago that she would now be working at a communications and marketing company – one affiliated with the very firm made famous by the television show Mad Men – she wouldn’t have believed it. In fact, when McCann Health offered her a job as vice president for patient engagement in 2013, she was confused about why they had hired her. Almost two years later, it’s a different story.

“It makes perfect sense,” says Ruddy, who can walk to her job in Parsippany, New Jersey. “I’m taking my skill set and applying it differently than I applied it before.”

After more than 20 years as a faculty member training family practice residents and other health care professionals in ways to engage effectively with their patients, she now uses those same skills to help pharmaceutical companies and other clients ensure that patients stay healthy.

“Having worked in primary care so long, I know how quick encounters between physicians and patients are,” says Ruddy, noting that patients often don’t remember what instructions their physicians have given them. “Our job is to step into that void, engage people and get them activated to take care of themselves.”

Helping patients manage illness

Before she took the job, Ruddy worried about “going to the dark side” by working with the pharmaceutical industry. But, she says, the experience has changed her mind. There’s a paradigm shift happening in the industry, she says. “Companies are recognizing that they have to give patients something they can use to be successful in managing their illnesses,” she says. “Just selling a pill and getting professionals to write a prescription isn’t enough.”

Whether the client is a pharmaceutical company, insurance company, health care system or an employer, the work of Ruddy’s team is much the same. They begin by developing a “patient journey” to educate the marketing team about how patients experience a given illness and various pathways the team might follow to educate the patient. This entails doing a literature review, interviewing health care providers and people with heart disease, diabetes or some other disorder. The process culminates in a graphic representation of the timeline of patients’ experience and their interactions with the health care system. “It’s like a needs assessment: What do they need to manage their illness that they’re not getting now?” says Ruddy, who is the only psychologist on the team.

Ruddy works with an interdisciplinary team which consists of health educators, marketers, copywriters and graphic artists as well as biologists, chemists and other scientists. They work together to translate complicated health information into patient-friendly language. They create many different types of communications for patients to help them engage in healthy behaviors and disease self-management. They might create a website and brochure that give patients information about a disease and its treatment, or mobile apps that remind them to take medication at the right time. Sometimes the focus is on helping patients improve their social support by creating and marketing social media tools they can use to connect with others who have the same problem.

Another approach involves supporting the call center staff in a patient support program to effectively respond to patient requests. The ultimate goal? Increasing awareness of diseases and the products used to treat them, helping people use those products correctly and supporting patients as they manage their diseases.

“Almost a third of all prescriptions are never filled, and even fewer are taken and refilled.” says Ruddy, explaining that often people just don’t understand the medication’s purpose. “And when people don’t take their medicine at
all or take them incorrectly, they may suffer poor health outcomes.”

Ruddy noted that while she has learned a great deal about marketing from her McCann colleagues, she has also expanded her skills in health literacy and program development.

**Promoting integrated care**

Ruddy’s current role is a natural outgrowth of her past professional life. Between 1991 and 2013, she worked alongside and taught family practice residents how to explain things to their patients, make health care decisions together and encourage patients’ self-care.

Ruddy got into integrated care by accident. After earning a doctorate in child clinical psychology from Bowling Green State University in 1990, she planned to go into private practice treating children. She was working at an agency serving kids when she received a fateful call: Susan H. McDaniel, PhD, now APA’s president-elect, needed someone to see children at the University of Rochester Medical Center, where Ruddy had done her internship. What started as a one day a week gig turned into a faculty position in the family medicine department – and a career.

The experience also sparked Ruddy’s passion for integrating psychology into primary care. When there’s a psychologist in primary care, she says, patients seeing the physician can get immediate help not just with depression, anxiety or other psychological issues but with managing their physical health. “Primary care is the grocery store of medicine: Everyone goes to the grocery store to buy food and to primary care to get help when they’re sick,” she says. “It’s a way to be available to people where they’re already seeking care.”

In 2000, Ruddy left Rochester when her husband – industrial-psychologist Thomas Ruddy, PhD – got a job as vice president of human resources at a large medical technology firm.

Now Ruddy is applying the skills she is learning in her new job to other professional arenas. Her new understanding of how to make materials engaging rather than academic has informed the plug-and-play course, for example. In fact, the committee hired an artist Ruddy knows from McCann to do the graphic design.

“You have to look at your skill set and what you’re passionate about and be flexible about how you apply it,” says Ruddy, who spends one day a week in the private practice she has maintained throughout her career. “My skill is helping people be healthier: I applied that skill in primary care for 22 years, and now I’m applying it in a way that is available to thousands of people.”

“Integrated primary care is going to be the norm in 10 years.” – Nancy B. Ruddy, PhD

Back in the mid-2000s, integrated care was just emerging, says Ruddy. “Most of my friends from grad school would ask, ‘What is it you do? What’s this integration thing?’” she laughs. “Now it’s very mainstream.”

With the Affordable Care Act pushing integrated care, Ruddy has become even more committed to ensuring that the next generation of psychologists is well-prepared to work in integrated health care environments. “Integrated primary care is going to be the norm in 10 years,” she predicts, noting that that’s already the case in the VA, Department of Defense and some states.

To meet that need, Ruddy and other members of the Integrated Primary Care Committee of APA’s Div. 38 (Health Psychology) have created a directory of doctoral, internship and postdoctoral programs offering training in primary care psychology, available at [www.apa.org/ed/graduate/primary-care-psychology.aspx](http://www.apa.org/ed/graduate/primary-care-psychology.aspx).

The committee is now finishing what Ruddy describes as a “plug and play” course in integrated behavioral care that graduate school and internship programs can use to explain what integrated care is, its benefits and the specific skills needed to practice this way. Ruddy says that many psychologists aren’t trained to do integrated care in primary care settings. “It’s not 50-minute psychotherapy sessions,” Ruddy observes. In 2013, Div. 38 recognized her accomplishments by giving her the Timothy B. Jeffrey Memorial Award for Outstanding Contributions to Clinical Health Psychology.

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