HAVAS LYNX

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PUSHING THE RIGHT BUTTONS

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Unlocking better outcomes in healthcare with UX

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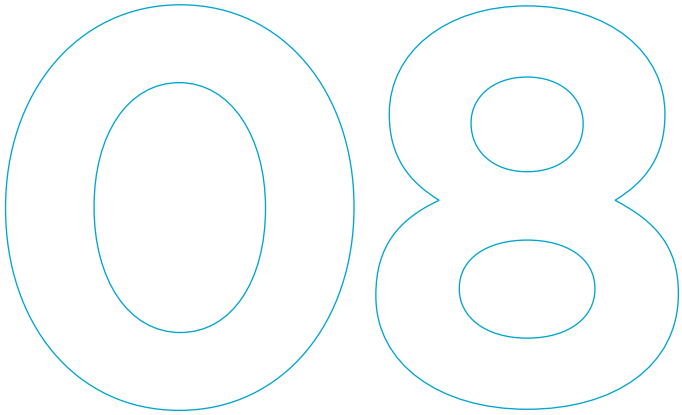

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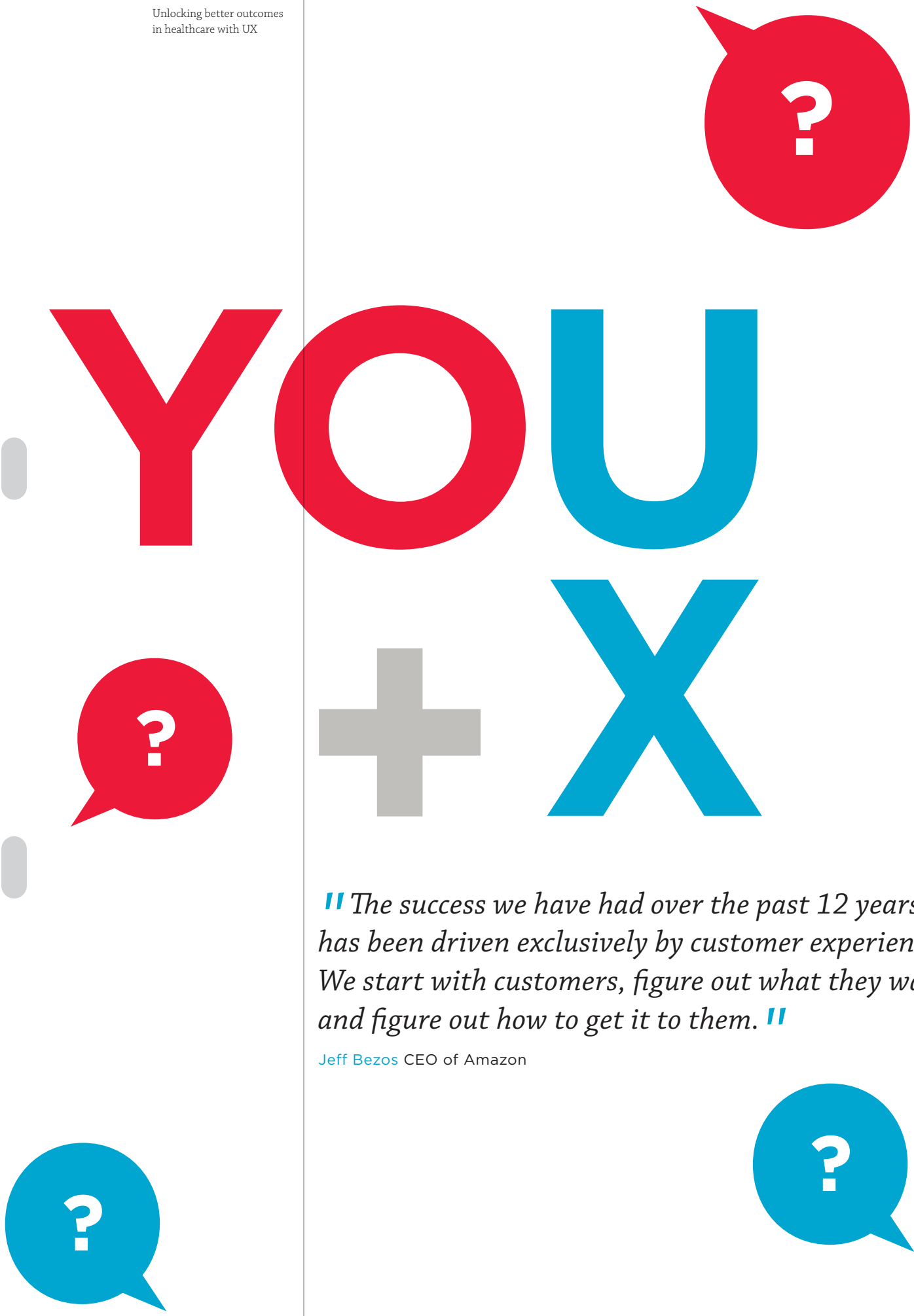


"The success we have had over the past 12 years has been driven exclusively by customer experience. We start with customers, figure out what they want, and figure out how to get it to them."

Jeff Bezos CEO of Amazon

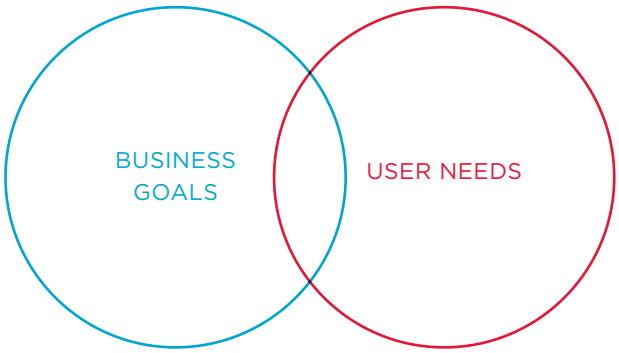
We all strive to deliver the best possible outcomes for patients, doctors and pharma personnel. We invest extensively in providing them with support programmes, informative materials and sales aids so that they can live their lives and do their jobs to the best of their ability. We utilise a range of channels – online, offline, mobile – to ensure our products and services are within easy reach of the appropriate users. But are we doing enough to drive great experiences in the spaces we occupy?

User Experience (UX) is the de rigueur phrase of the digital communications world currently. In its rapid popularisation it has sometimes been misused, misunderstood and even feared. However, UX is no dark art.

Amidst meteoric progressions in digital and social technologies we have been equipped with a multitude of opportunities to connect with, and help, patients and doctors. The whole landscape around us is changing so rapidly that we in pharma, like many other industries, have struggled to keep up, in some cases desperately fumbling at technology as if it were some sort of magic compass that can guide us through it all. Except it's not. It's time to put the tech to one side and let the principles of good design lead the way. Creating a 'positive user experience' is a matter of giving your user what they want, the same as it always has been.

Much as Good Pharma[1] is about the importance of putting patients at the centre of everything we do, so good user experience is about focussing on the user throughout development. This might seem a simple and even idealistic approach, but the results speak for themselves. The greatest exponents of UX design are some of the biggest brands to emerge in the last 15 to 20 years. Google, Amazon, Facebook and Apple have all invested heavily in refining their user experience and reaped the rewards. Apple and Google are currently the two most valuable companies in the world[2], a fair justification for the current trend of enthusiasm for UX.

By focussing on their users desires and motivations, these companies have found the sweet spot between user needs and business goals.



1 Available for free from the HAVAS LYNX library: www.havaslynx.com/work/library

2 "Google tops Exxon Mobile to become the second most valuable company in the world" by Eric Van Susteren, www.bizjournals.com, 2014.

GOODUX

There is no greater indicator of the importance of good UX in pharma than the industry's moves to go 'beyond the pill'. Increasingly, we are considering the system around the patient's treatment and planning tactical interventions to improve this treatment pattern. This holistic approach is the very essence of good user experience. On a more tactical level, both patients and doctors are increasingly looking to digital to drive their experience in healthcare. Their expectations are high; they're human after all. Twenty-first century living is rife with sophisticated and intuitive technologies. The aforementioned market leaders (Apple, Facebook, etc) have established a high-standard of UX and, as users, we have come to anticipate this standard in every product we encounter, from banking to healthcare.

As such, healthcare must keep apace with consumer brand offerings and compliance regulations cannot be seen as a bar to good user experiences, much as compliance itself cannot be seen as a barometer of success.

As users, we do not care about compliance; we care whether a product or service is useful. If an app or website doesn't meet your users expectations then they simply won't use it, even if it is supposedly for their own benefit. In short, a poorly functioning product is like a poorly functioning drug; in both cases, adoption and adherence will be low.

If users aren't using your product that means you're not helping them, which means you've wasted your investment and failed in the most basic responsibility of all who work in healthcare; to improve the lives of those we reach out to. Therefore, UX is absolutely critical to everything we do in healthcare. But *what* exactly is it?

> *"I have the simplest tastes. I am always satisfied with the best."*
>
> Oscar Wilde

IT'S NOT WHAT YOU THINK, IT'S WHY

"User experience design isn't a checkbox. You don't do it and move on. It needs to be integrated into everything you do."

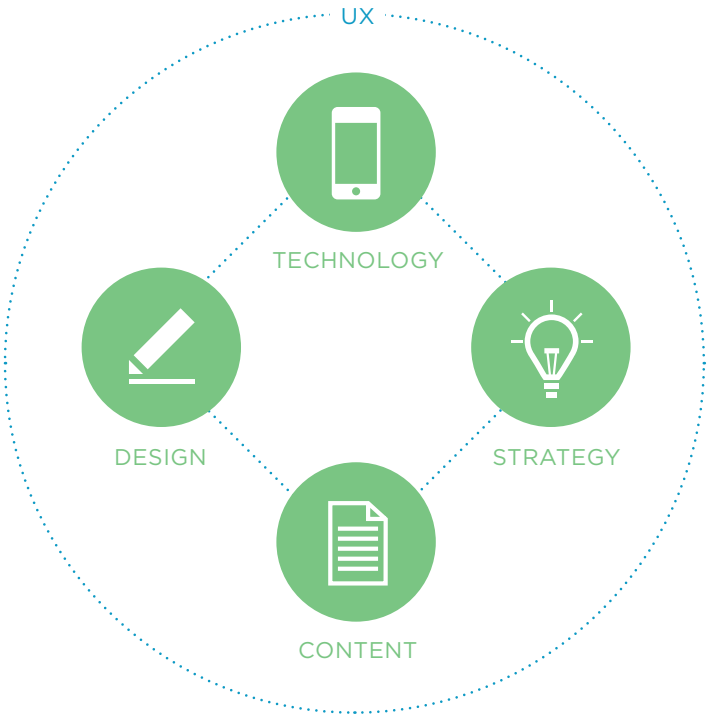
Liz Danzico Chair, MFA in Interaction Design, School of Visual Arts in New York

There are a lot of misconceptions about what UX is, so the easiest way to begin to explain it is by defining what it is not.

UX is not:
- just about testing
- just about wire-framing
- just about technology
- just about expensive processes
- just one person's job

In understanding user experience we must stop asking 'what?', and draw wisdom from our childhood. As young children, most of us will have taunted our parents with one incessant line of questioning: 'why?' Such persistent inquisitiveness is curbed somewhat as we grow a little older and learn a little more, but it should never be forgotten or dismissed as childish curiosity. It's the founding principle of all good design. A client's first question is often 'what can you do?' but long before this can be answered, a thorough understanding of the end-user's underlying needs and motivations is required. You should know your users like you know your friends, appreciating their quirks, ticks and habits. As well as understanding how your users behave, you must also understand why. A deep empathy for the people you're designing for is the cornerstone of delivering user-centred designs that make a real difference to people's lives. Thus, UX is not a component of a product or a 'stage' within the development process; it is an ethos within which the process sits, an attitude that runs throughout every step of development.

Know your users like you know your friends



A thorough understanding of user needs and the factors that influence them are the foundations upon which we can build. Adapted from Maslow's hierarchy of human needs, the 'hierarchy of user experience needs' explains the different requirements a product, service or system must fulfil, from the most fundamental functionality up to the nuances of emotional design.

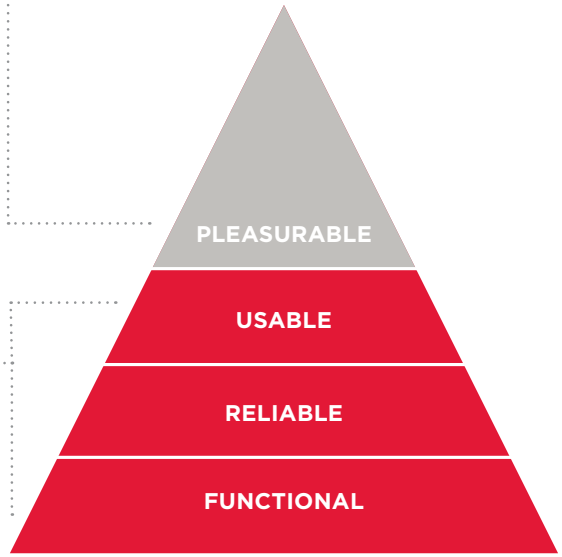
UP BOTTOM THE FROM BUILDING

WILL DO - PET

The top of the UX hierarchy revolves around emotional design; elements that will stimulate a deeper connection with the user, encouraging them to engage and connect with your product.
Behaviour based PET techniques are an incredibly powerful and important aspect of UX, motivating users to carry out tasks because they want to:
Persuasion techniques relate to behavioural mechanics; they are the triggers to an action.
Emotion techniques are about eliciting a desired emotional response during a process.
Trust techniques are for establishing credibility, providing assurances and removing risk for the end-user.

CAN DO - USABILITY

The first three levels of the hierarchy concern the utilitarian elements of design. The functional aspects of usability are what facilitate a user to carry out tasks, such as browse, search and perform basic interactions.



Source: *Designing For Emotion* by Aaron Walter.

FUNCTIONAL

The most important thing a product must do is fulfil the basic functionality required in order to be of use to your user.

RELIABLE

Reliability is crucial. When it comes to something as important as health, patients and professionals want to know that they can rely on your product to repeatedly perform without failures (e.g. crashes, glitches, performance errors).

USABLE

The ergonomics of your product are key – you want it to be easy and intuitive to use. Great user experiences construct clear narratives that allow people to self-segment themselves quickly and include subtle road signs to help them achieve their individual goals, all whilst remaining as invisible as possible.

PLEASURABLE

The ideal is that users enjoy the experience of your product and consequently want to keep using it. Communication techniques are of high importance at this level, helping you to reach out to your customers and build a link with your product.

WHERE SCIENCE MEETS ART

SCIENCE

User centred design requires us to make informed design decisions. It's a process of gathering information, analysing and hypothesising, building and testing. Consequently, it requires a scientific approach:

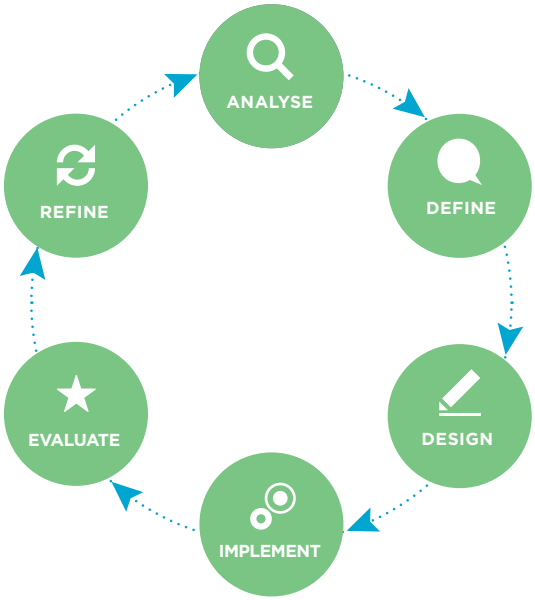
Scientific: Stakeholder research, Audience research, Competitor review, Personas, Scenarios, User journeys

Define: Information architecture, Process engineering

Design: Design concepts, Prototypes, Usability testing

Implement: Usability testing, Accessibility & standards

Evaluate: User feedback, User testing, KPI measurement, Expert review



ART

The science of hypothesis and analysis is worthless if you cannot couple it with creativity. However meticulous, your research will only highlight problems, not solve them. Our work in healthcare has the potential to dramatically transform outcomes, but only if we are ambitious in our outlook. For our work to be successful it must inspire, challenge and connect. Invoking such responses is not a matter of routinely following a checklist. Knowing your user is highly important, but as much as you know about them, as much as you talk to them, they cannot necessarily tell you what they want. That requires imagination and vision; that's your job, not theirs.

Innovation is a difficult balancing act, drawing inspiration from our understanding of our users whilst letting our creative thinking wander beyond what exists. This is true of every aspect of a product or service; user experience is not just a matter of usability. Branding and form, traditionally seen as creative outputs, are intrinsically linked to UX. Indeed, the importance of aesthetics shouldn't be underestimated. The old principle that form follows function and therefore is a secondary consideration is incorrect; how something looks has tremendous influence on how we interact with it. Attractive design has a 'halo effect' on users, fostering positive attitudes and establishing a good impression of all of a product's attributes, not just its looks.[3] Our perception bias towards attractive objects leads us to adopt them more quickly, interpreting them as easier to use and even leading us to be more tolerant of functional pitfalls. Apple's output has for a long time been a marriage of function and form, wrapping intuitive functionality in attractive interfaces and bringing their products to market with bold, stylish branding.

3 "Emotion & Design: Attractive Things Work Better" by Donald Norman, www.jnd.org, 2002.

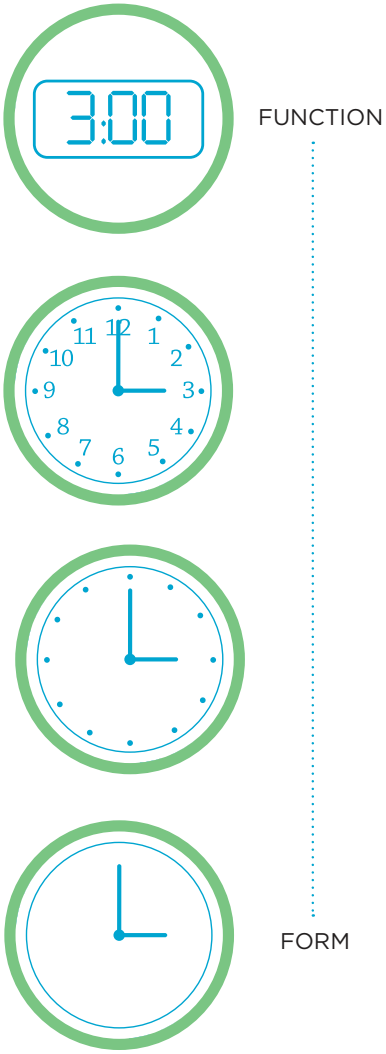
"A lot of times, people don't know what they want until you show it to them."

Steve Jobs

CONT.

Attractive designs encourage positive responses from users

Rather than prescribing a hard and fast rule that prioritises functionality over aesthetics, or even vice-versa, we should simply ask 'What aspects of our design are most critical to its success?' Armed with these criteria, we can approach trade-offs in the design process individually, accepting that sometimes function will take priority and that other times aesthetics will win out.



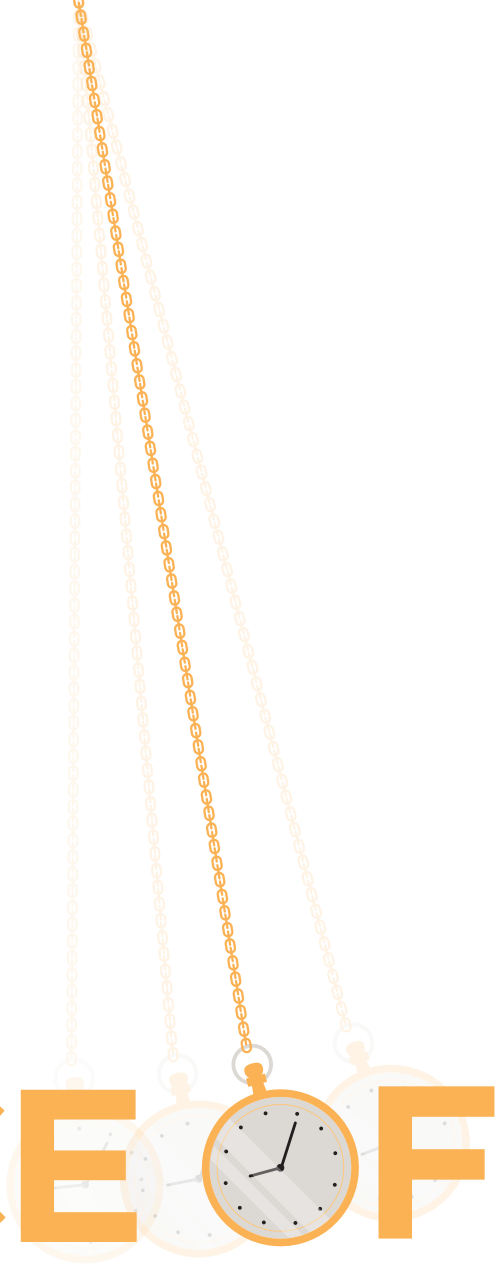
Source: *Universal Principles of Design* by William Lidwell et al, p.107

CASE STUDY

Nike Training Club (NTC)
The Importance of Image

NTC is a suite of training materials for women that showcases perfectly the value of form and brand image. Women's sportswear has for a long time carried an image of ugly functionality, stemming from a heritage of garish colours coupled with unflattering cuts. To combat this, Nike populates its channels with stylishly shot photography and videos, and celebrity endorsements (including pop stars as well as sport stars). Their messaging is delivered with a tone of voice that targets female empowerment and they even operate in emerging 'on trend' media (e.g. Pinterest, Instagram). The effect has been dramatic, repositioning sportswear as a lifestyle brand and in doing so has made sports themselves more widely appealing.

THE ART + SCIENCE OF INFLUENCE



"Civilisation advances by extending the number of operations we can perform without thinking about them."

Alfred North Whitehead

Methods of influence and persuasion might, at first, sound like they're more suited to marketing and sales than UX.

But consider what you're hoping to achieve by providing a positive experience. What is your over-arching goal? In almost all cases, you'll find that your campaign, service or product is looking to influence existing behaviours.

Information alone, however compelling, isn't always enough to change behaviour. It's hard to sway people away from deeply rooted habits. Just because a doctor tells a patient that something is good for them, it doesn't mean that they'll do it. When they're isolated and alone, the good advice that was given to them weeks ago can seem irrelevant. We need more than information; we need motivation. We need something that communicates to us deeply. This can involve plugging into more unconscious behavioural patterns. Rules, emotional prompts, stereotypes; these deep-seated cues trigger responses more entrenched in our thinking than we necessarily realise. They are shortcuts to behaviours that are so mechanically automatic that they can be extremely powerful points of leverage.[4]

Our daily lives are full of products that utilise principles of motivation to encourage positive changes in behaviour: from loyalty stamp cards for coffee houses to LinkedIn profiles that rate the 'strength' of our online presence to encourage us to provide more information.

Types of motivational techniques

GOALS

Setting goals is a great way to drive motivation. It's important that these goals are tailored to the user. It can be good to combine a long-term overriding objective that users are constantly working towards with smaller goals along the way to maintain interest. E.g. Weight Watchers members have an overall target weight as well as smaller milestone weights and lifestyle related goals (such as getting more physically active).

PROGRESSION

Rendering progression as a measure of achievement is a good motivator. Often the execution can be very simple. E.g. LinkedIn's profile progress bar.

COMPETITION

We love a bit of friendly competition and encouraging it amongst a supportive community can be especially powerful. E.g. Xerox's digital management training suite includes a simple leader board.

COLLABORATION

Working together can also motivate a community. E.g. StackOverflow.com is a free programming Q and A site in which programmers post their queries and work together with members of the community to solve their problems.

REWARD

Rewards can be 'real-life' rewards (e.g. airmiles you can put towards a flight) or virtual (e.g. ebay users are given a different coloured star according to how many positive reviews they've received from other users). What's important is that the reward is meaningful to the user.

The best way to introduce a new behaviour is to plug into an existing habit, turning an existing behaviour into the cue for another behaviour or action.[5] For example, an adherence app for children might include reminders that use other parts of the child's routine as cues for adherence: 'Time to clean those teeth! Don't forget to take your medicine after'.

4 For more see *Influence: The Psychology of Persuasion by* Dr. Robert B. Cialdini.

5 For more, see *How to Get People to Do Stuff* by Dr. Susan Weinschenk.

GET THEM IN-VOLVED

When we consider the amount of unthinking behaviours that are engrained in our lives relating to digital devices, especially phones, it becomes apparent what a powerful platform they are.

Interactivity has always been a highly powerful tool, actively involving participants in a manner that causes messages to resonate with great strength. Interaction can instil a deeper understanding of the principles you're conveying, thus empowering users to feel more confident about implementing these principles in the real world. For example, Bronkie the Bronchiasaurus, a video game for children with asthma, improved efficacy amongst the children that played the game dramatically (see case study). Similarly, it can immerse users so deeply as to alter their perspective. HCP application In My Steps simulated the frustration of the physical implications of chemotherapy. 60% of the professionals who used the simulation reported that they would change the way they treated cancer-related fatigue as a result.[6]

CASE STUDY

Bronkie the Bronchiasaurus
The Influence of Interactivity

ClickHealth's Bronkie the Bronchiasaurus was a Nintendo video game designed to help children with asthma manage their condition. The game required players to complete asthma management tasks similar to those for humans (e.g. help Bronkie use an inhaler, navigate Bronkie around avoiding smoke and dust, etc). The results were highly impressive. Children who played for as little as 30 minutes reported increased efficacy, significantly out-performing a test group who were shown an informative film instead of playing the game. What's more, the impact proved to be lasting, with the improved efficacy maintained long after the study session had occurred. The implication is that it was the interactive nature that was crucial; by actively engaging the children and allowing them to rehearse the behaviours, the game gave them the confidence to apply these practices in a real-life setting.[7]

"Tell me and I forget. Teach me and I remember. Involve me and I learn"

Benjamin Franklin

6 *Persuasive Technology: Using Computers to Change What We Think and Do* by Dr. B.J. Fogg, p.76

7 *Persuasive Technology* by Dr. B.J. Fogg, p.73

CONT.

Dr. B.J. Fogg, an expert in the persuasive potential of technology, describes seven ways in which technology can act as a persuasive tool, six of which are particularly relevant to healthcare:[8]

REDUCTION

Makes a complex task simple. e.g. Amazon's 'one-click shopping'.

TUNNELLING

Guides users through a process or experience. Schizophrenia24x7.com is a support website we at HAVAS LYNX developed for schizophrenia patients. It features a decision tree that channels users to specific information and calls to action according to the responses they give to questions about their treatment status.

CUSTOMISATION

Tailoring technology provides information relevant to individuals in order to change attitudes/behaviours, e.g. closed-loop marketing that tailors messages according to the particular interests of a professional.

SUGGESTION

Timely situation based suggestions e.g. SMART speed monitors that displays a driver's speed in direct comparison to the speed limit, implying that they should bring their speed inline with the limit if necessary.

SELF-MONITORING

Allows people to monitor themselves to modify their attitudes or behaviours to achieve a predetermined goal/outcome. E.g. Nike Fuel bands allow users to monitor and record various metrics relating to their fitness programme.

CONDITIONING

Reinforces positive behaviours through reward. E.g. Foursquare uses status based rewards such as badges and titles to encourage users to revisit locations.

Although interactive technology has always been a powerful tool, its pervading presence in modern day life has caused us to become very quick adopters of digital interaction techniques. 'Like' buttons, pinching and zooming hand gestures, and hash-tagging are now as engrained in our unthinking behavioural patterns as more traditional habits, permeating well beyond the platforms that introduced them.

Dr. Fogg believes there is a lot of opportunity to utilise motivational techniques in mobile health applications for positive benefit. Indeed, as more-or-less constant companions, mobile phones are in a 'unique position' to alter habits through methods of persuasion[9]. This is in part due to their obvious convenience, but also their ability to store and detect data relating to a range of different factors (such as our location, the time of day, our schedule, who we're with etc) and utilise this data to offer timely prompts that influence our behaviour[10]. The sheer quantity of personal data potentially available to mobile devices means that they can very easily 'get to know' a huge number of personal habits. When combined with methods of persuasion and interaction, this kind of digital empathy offers some incredible potential to deliver timely disruptive interventions that encourage positive behaviours.

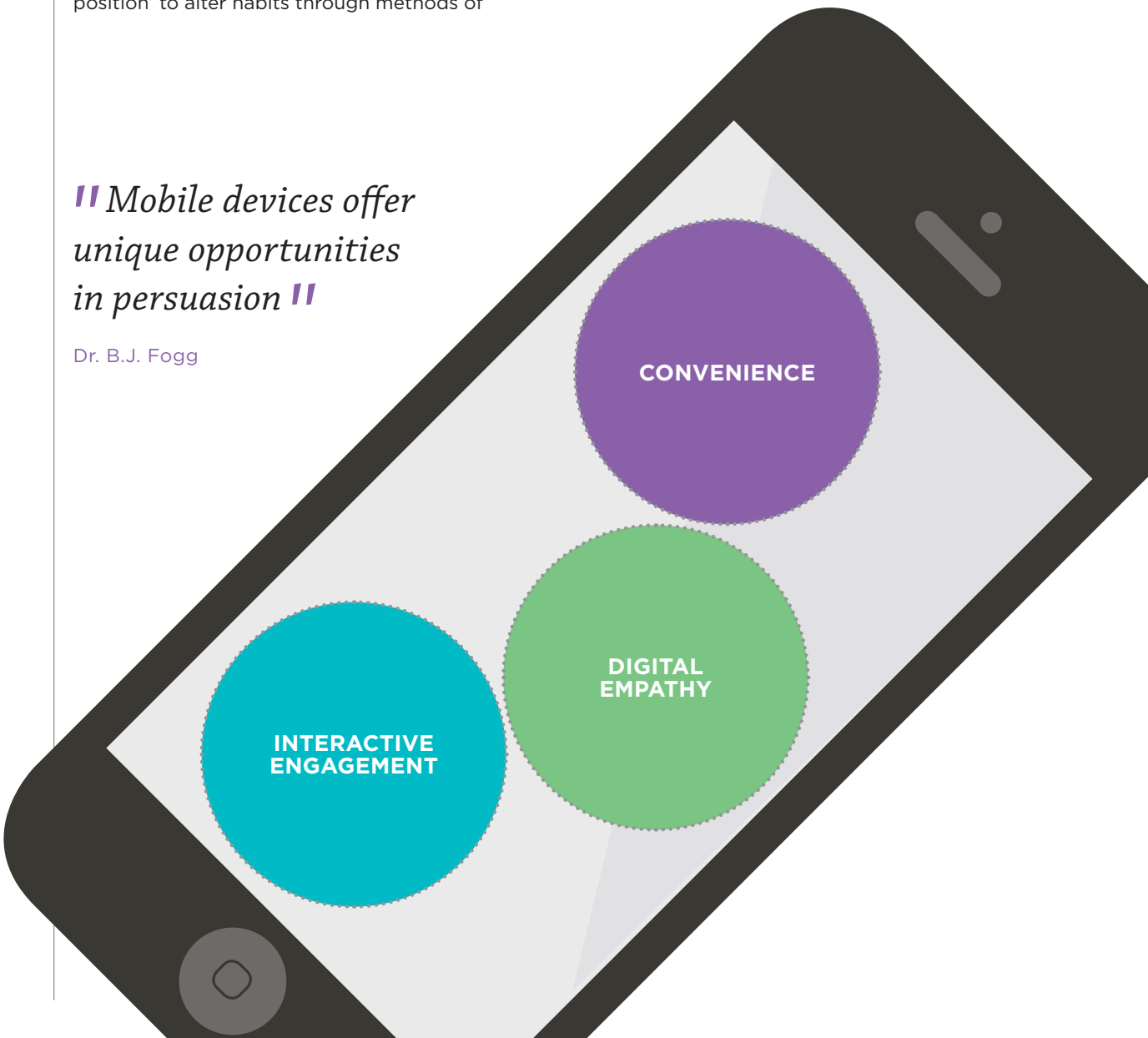
8 *Persuasive Technology* by Dr. B.J. Fogg, p. 34-49

9 *Persuasive Technology* by Dr. B.J. Fogg, p. 186

10 The ability to present a message at an opportune moment is known as the Kairos principle. For more, see "Kairos in Aristotle's Rhetoric" by James Kinneavy and Catherine Eskin, in *Written Communication*, 11 (1), p.131-132

"Mobile devices offer unique opportunities in persuasion"

Dr. B.J. Fogg



ASKING IS THE ANSWER

"The only true wisdom is in knowing you know nothing"

Socrates

When we talk about 'knowing the user', it's easy to let our existing knowledge of the people we're dealing with blind us from new insights. Sometimes, the best thing we can do is forget everything we 'know' and start enquiring afresh. Revealing and overlooked insights are often right in front of us; we just need to know how to go about finding them. There's a vast toolbox of research methods capable of shedding new light on people and their behaviours. The key is in picking the right one for the job. Some techniques will be more appropriate to a project than others and modes of investigation are most effective when tailored to the specific needs of each undertaking.

Bigger doesn't necessarily mean better when it comes to research and testing. For instance, in the initial stages of developing a prototype it might be more beneficial to work with a small focus group than to do large-scale testing. It's worth considering the comparative values of qualitative and quantitative data. An intimate one-to-one patient interview with an interviewer they trust, in an environment where they feel comfortable, has the potential to reveal far more poignant insights than an online survey distributed to hundreds of people. With this in mind it becomes apparent that tight budgets need not be a barrier to effective investigation. There are plenty of economical research tools that applied intelligently, can be extremely powerful. It's not important how user research is conducted, it's what's gained from it that counts.

EVOLUTION

"Performance by the aggregation of marginal gains. We are always striving for improvement, for those 1% gains, in absolutely every single thing we do."

Dave Brailsford, Performance Director of British Cycling and Manager of Team Sky

NOT REVOLUTION

Not all problems need to be solved with a 'big idea'. Innovation doesn't have to be about inventing something new, it can be a simple matter of improving what's available. Sometimes the ideal solution already exists but hasn't been implemented as well as it could have been. Google wasn't the first search engine. Facebook wasn't the first social network. Amazon wasn't the first online retailer. All three triumphed by being the best, not the first.

Dave Brailsford is one of the most successful coaches in sport of the modern era. As the Performance Director of British Cycling he steered his riders to eight gold medals at the 2012 Olympics and Team Sky have achieved back-to-back victories in the Tour de France under his direction. Brailsford credits his success to the 'aggregation of marginal gains; finding the 1% margin for improvement in everything'. The cumulative effect of lots of small improvements can make a big difference; all the one percents add up. It's a concept that's particularly relevant to user experiences in healthcare. In terms of individual applications such as websites, subtle improvements in tone of voice, navigation and hierarchy of content can significantly improve the user experience.

CONT.

When you consider the bigger picture of user pathways, the effect becomes even more significant. At HAVAS LYNX, we've worked extensively with Janssen in schizophrenia. Although we have added new tools, content and systems to the patient landscape, a lot of our work has been based around better curating and rendering existing elements:

- awareness videos were too negative in tone and didn't deliver the right message
- some online content was valuable but there was no one central hub for quality information
- post-discharge programmes were available to patients but not universally, neither were they systemised or monitored
- professionals held post-discharge classes for patients but they didn't have interactive or engaging content.

By addressing these and other areas of need within the patient pathway, we have managed to transform patient outcomes in schizophrenia. Hospital days due to relapse have been significantly reduced and over 90% of those who have participated in the programme say they would recommend it to a fellow patient.

CASE STUDY

IDEO
The Power of Little Changes

Global agency IDEO was employed by Minnesota health-system DePaul to improve their patients' experience. Initially, DePaul was under the impression that improvement would require some sort of grand reshuffle of how the organisation operated. However, IDEO instead focussed on the importance of the tiny details that make up a patient's day on a DePaul ward. Working closely with the nurses, they prototyped a series of smaller solutions. These included:

- attaching a car wing mirror to hospital beds so that patients could see (and felt more inclined to talk to) the porter pushing them when their bed was moved around the hospital
- using a different type of floor vinyl in patients' rooms to that which was used throughout the rest of the ward, emphasising the difference between public and private space
- decorating the ceiling that patients spend so long looking at
- covering a wall of the patients' rooms in whiteboard vinyl, so that family and friends could leave messages and draw pictures for their loved ones

Each alone was only a small thing, but added together they created a significantly happier patient experience.[11]

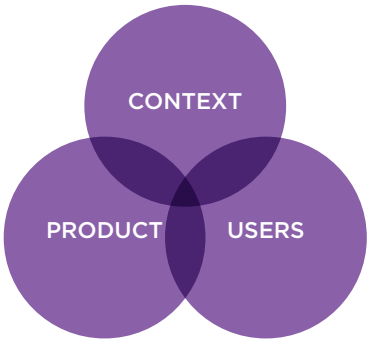
11 For more, see IDEO Creative Director Paul Bennett's TED talk, Oxford, 2005: www.ted.com/talks/paul_bennett_finds_design_in_the_details.html

SEE THE BIGGER PICTURE

When teasing out the value in each interaction we must always keep one eye on the bigger picture. We can't fix problems simply by adding features.

Adding an extra button, a slider, reshuffling the navigation – it's pointless if it's not done with a view of the overall experience in mind. Moreover, we should be aware of how our products and services fit within the greater scheme of the user's life. Our competitors aren't only those in the same therapy area, they're everything else we're competing with for the user's attention (online and offline). Emails, Facebook, job pressures, newspapers, text messages from friends, paying utilities, TV, looking after the family – our lives are a complex tapestry of competing elements. We need to understand how our product impacts upon this landscape. There's no point having the best website in the sector if it still doesn't offer an experience compelling enough to pull a user's attention away from their inbox.

In pharma we talk about connected health experiences and healthcare ecosystems; essentially these are a matter of who the user is, what and who is around them (the context), and what tools they have access to (the product). These factors will not remain the same throughout the user journey and we must be aware of the impact that their changing has. E.g. NatWest's website and smartphone app are very different because the context (private vs public) dictates that the user's goals will be different.



USERS

Who is going to be using your product/system/service? What are their motivations and desires? As well as your product's functionality, communication design depends on this information; branding, look and feel.

Modes of investigation: Survey, Focus groups, Preference interviews, Persona-building exercises

CONTEXT

The environment in which the user will be engaging with your product. Where are they? What will they be doing? What platform will they be using to access your product? How will these things affect their goals? Context will influence factors such as interaction design, navigation and flow.

Modes of investigation: Mental modelling, Ethnography, Contextual inquiry.

PRODUCT

Product covers all kinds of disruptive interventions; apps, services and treatment systems. When evaluating a product (even a competitor's) consider what is accomplished by using it. Information architecture and interaction functionality are amongst the many areas worthy of analysis.

Modes of investigation: Log analysis, Usability tests, Customer feedback.

OVER & OVER

"Ever tried.
Ever failed.
No matter.
Try again.
Fail again.
Fail better."

Samuel Beckett

It's a simple equation: the more effort you put into making the UX of your product as simple and intuitive as possible, the less effort the user has to put into using your product, and thus the greater the chance of its success.

Prototyping and initial development stages are extremely valuable learning curves. Every new design will be broken in testing but this should not be viewed as a failure. It's far better to invest in getting the maximum value out of this part of the process than to take a product all the way to market and find it's not fit for purpose.

Particularly with new or exploratory projects, an iterative approach to development can be beneficial; multiple cycles of the production process are completed, with every cycle adding more value, knowledge and refinement to each stage of the process, and therefore to each element of the product.

Doing is nearly always the best form of learning, for users and developers. Rapid prototyping or small-scale development programmes can be a highly effective way of highlighting and then tackling potential issues. Healthcare projects can often have massive lead times, becoming stuck in approval processes. To combat such problems, BBC digital development teams sometimes operate 'design sprints', repeating a five day schedule for six weeks:[12]

Day 1: Understand the problem
Day 2: Generate a wide variety of ideas
Day 3: Selectively develop some of these ideas further
Day 4: Prototype
Day 5: Carry out user research on prototypes

Highly intensive processes such as this can rapidly accelerate the development process, brutally and relentlessly honing a solution to its most essential and viable elements. However, much as Usain Bolt couldn't maintain his notorious sprint pace across 10K, development teams cannot run endless design sprints. Rapid development is not suitable to all situations and it must be coupled with more 'relaxed' periods of inquiry and investigation. Otherwise teams will burn out, their sharpness wane and effectiveness fade.

12 Jane Murison, Head of UX&D at BBC Future Media (Salford), spoke about 'design sprints' at the NUX2 conference in Manchester in 2013. A video of her talk can be found at www.uxmanc.co.uk/speakers/jane-murison/

The Iterative Development Process

Source: *Universal Principles of Design*, by William Lidwell et al, p. 79

OVERCOMING OBSTACLES

There are undoubtedly some obstacles to overcome en route to delivering compelling experiences that transform healthcare outcomes. As always, we must try to adapt our practices and attitudes to match the stakeholders that we work for.

However, we should not abandon the things that we do well in our pursuit of better experiences. The core of our business is much the same as always. Google always had a powerful system of algorithms. Amazon has long been known as the go-to place for popular consumer products. Apple, even before their popularisation, was respected as a powerhouse for products that facilitated creativity. UX was simply the catalyst that enabled these companies to propel their businesses forward.

Above all else, we should regard UX as the key to unlocking ROI. It enables us to maximise the investment of time and resource that goes into developing healthcare solutions. So that when we drive our customers towards our products – be they patients or professionals – they stick around, engage actively, and interact meaningfully. When we deliver these kinds of experiences we can have a positive impact on people's lives; an impact that empowers them to achieve their goals and catalyses growth in your business.

There are no rules to stop us doing this. As an industry, we tend to shy away from post-moderation in social media, or data feedback features on apps, for fear of incurring the wrath of 'the law'. But there's no compliance legislation that opposes good UX.

Pharma is sometimes guilty of too readily accepting a behind-the-times stance, of expecting to be unable to compete with consumer brands. When it comes to UX, it's no longer acceptable to be behind the times; it is an area we must compete in. Moreover, it's an area we can *excel* in. A soda company can deliver a great online experience but you still might not want lemonade at the end of it. And at the end of the day, it's lemonade: a fast-moving consumer product with low perceived value and even lower status in our audience's perceptions, especially when compared to their own health and wellbeing. All patients want to be better and all professionals want to help them to be better. With exceptional UX, we can help both. What's more, we can be more than industry leaders; we can be life-changers. So, why not?

NOTES

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