S3 Table: The HEALTHCARE-PROFESSIONAL-Medication Adherence Instrument (H-MAI-9)

Please answer the following questions by placing a tick $(\sqrt{})$ in the appropriate box

Sect	ion A: Adherence					
		¹ Strongly disagree	² Disagree	³ Neutral	⁴ Agree	⁵ Strongly Agree
1.	My patient does not take his/her medication(s) MORE than directed					
2.	My patient does not take his/her medication(s) <u>LESS</u> than directed					
	Section B: Knowledge and belie	f				
3.	My patient is taking his/her medication(s) everyday as directed					
4.	My patient has a good understanding of his/her illness					
5.	My patient is confident that his/her medication(s) are helping him/her					
5.	My patient is satisfied with the information shared by his/her doctor					
7.	My patient is able to make a decision together with his/her doctor regarding his/her medication(s)					
3.	My patient knows how to take his/her medication(s) (eg. dose, frequency)					
€.	My patient knows why he/she is taking their medication(s) (eg. indication)					