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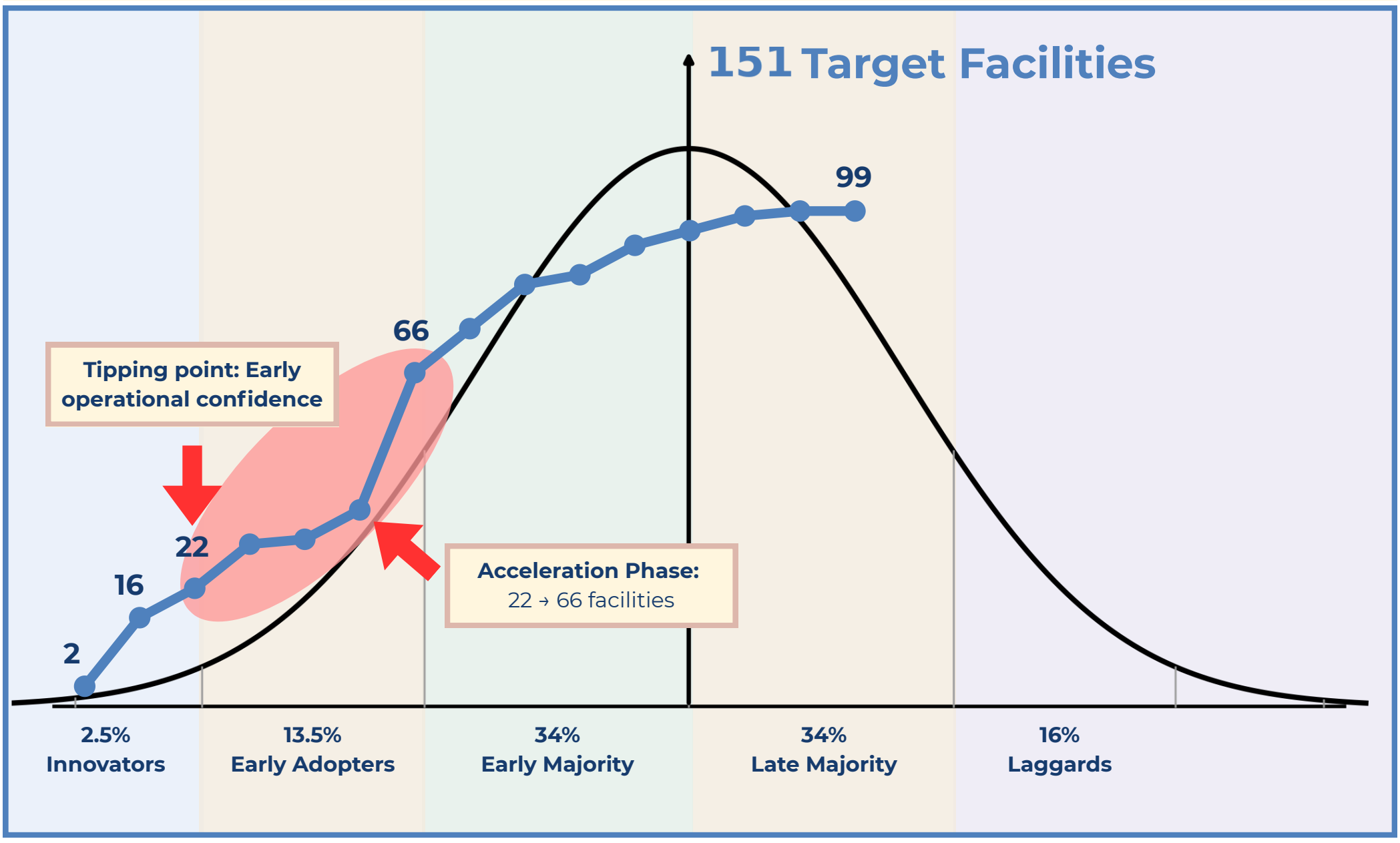
DIGITAL HEALTH ADOPTION AS BEHAVIOR CHANGE

Insights from MPIS Implementation

MEDICAL PROGRAMME INFORMATION SYSTEM
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Introduction: Digital transformation in healthcare is often framed as a technology rollout. However, implementation success depends on how people and institutions respond to change. The Medical Programme Information System (MPIS) provided a practical case for observing digital adoption as a staged behavior change process across Ministry of Health facilities in Malaysia.



Objectives:

- Describe MPIS implementation using a behavior change lens.
- Interpret facility uptake through the Diffusion of Innovation framework.
- Highlight why adopter segmentation matters in digital health implementation.

Methodology:

- Descriptive implementation review of MPIS uptake across targeted facilities.
- Adoption trend mapped conceptually to adopter categories: innovators, early adopters, early majority, late majority, and laggards.
- Focus on phases of slow early uptake, accelerated adoption, and later-stage plateau.

Results:

- MPIS adoption was not uniform across facilities.
- Early uptake was limited to a smaller group, followed by broader expansion as confidence and operational acceptance increased.
- Uptake progressed from 22 to 66 and later 99 facilities, suggesting movement from early adopters into the majority phase.
- Slower late-stage uptake indicates persistent barriers such as workflow inertia, variable readiness, and resistance to change.

Discussion and Conclusion:

MPIS implementation suggests that digital adoption behaves like a phased change journey rather than a simultaneous system rollout. Different adopter groups likely require different implementation strategies, including champions, local leadership support, tailored engagement, and context-specific reinforcement. Viewing implementation through a behavioral lens may improve adoption planning and sustainability in public healthcare systems.

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