

Engaging undergraduate pharmacy students in community action: The 20 is Plenty campaign

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Abstract

In order to avoid high prescription costs to patients, individuals and families are exempt from prescription charges after paying for 20 items in one year. This paper reports on a community action project where a group of students designed, implemented and evaluated a campaign to raise awareness of this exemption.

Keywords: *Pharmacy Education, Community Action, Public Health, New Zealand*

Introduction

Health promotion is an important aspect of professional pharmacy practice (Anderson, 2000; Centre for the Advancement of Pharmacy Education, 2013). Patient advocacy, including assisting patients in navigating the healthcare system is also a key aspect of providing patient-centred care (Medina *et al.*, 2013). Previous literature on student involvement in health promotion (Moskowitz *et al.*, 2006; Cerulli & Malone, 2008; Begley *et al.*, 2009; Sookaneknun *et al.*, 2009; Saini *et al.*, 2011; Owusu-Daaku & Smith, 2015) reports mainly on ongoing health promotion programmes or new initiatives developed by pharmacy academics. These tend to focus on health-related behaviour (Cerulli & Malone, 2008; Begley *et al.*, 2009) rather than advocacy or improving access to health services. This paper reports on a novel initiative to use a 150 hour group research elective where students developed an innovative health promotion/advocacy project.

In New Zealand the government pays most of the cost of most prescriptions. Patients pay a NZ\$5 co-payment for each prescription item. To protect people from excessive charges, when a person or family have paid for 20 prescription items in one year, there is no co-payment for subsequent items. However, this is poorly advertised and many people continue to pay the co-payment unnecessarily (Norris *et al.*, 2012; 2017). Since other research has found that even small prescription charges can prevent people from picking up prescription medicines (Jatrana *et al.*, 2010; Norris *et al.*, 2016), there is concern that lack of knowledge of the system may dissuade people from picking up medicines that in reality should be free.

In 2015 the first author ran a class on health promotion for third year pharmacy students in which they developed ideas for health promotion campaigns. One of these was

raising awareness of the exemption from co-payments. The last six authors developed the slogan “20 is Plenty”. With consent, the students’ ideas were discussed at a meeting of the Otago Branch of the Pharmaceutical Society of New Zealand (PSNZ Otago). Pharmacists liked the slogan and supported the idea of a Dunedin-based campaign to raise awareness. They suggested the idea of stickers to put on prescription bags.

During 2016 the first two authors supervised the last six to carry out the campaign as part of their group research project. The aims of the project were to raise awareness of the exemption, and to provide students with practical experience of health promotion.

The ‘20 is Plenty’ campaign

A logo was designed (Figure 1) and input from local pharmacists was sought to design appropriate stickers for prescription bags. PSNZ Otago contributed towards the sticker cost. Students investigated companies who could print the stickers, negotiated with them and ordered 10,000 stickers. Twenty local pharmacies were recruited through email and telephone calls to participate in the campaign. The students also designed a pamphlet for pharmacy staff to give to patients to explain the scheme in more detail.

The students created accounts on Facebook (<https://www.facebook.com/20isplenty/>), Twitter and Instagram and posted on these regularly. Most of the posts consisted of an eye-catching picture, graphic or link. These included graphics displaying results of relevant previous research, photographs of the students meeting Members of Parliament (MPs), and links to other media. The Facebook posts reached a total of 1,296 people and 632 people were engaged with the Facebook photographs.

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Figure 1: The 20 is Plenty logo

The students made an informational video to explain the scheme. It depicted two characters having a conversation in a café about the costs of prescriptions, and one informing the other of the scheme. The video was placed on YouTube and linked with the Facebook page. Ninety-eight people viewed it in the first month. The students also created handmade t-shirts displaying the campaign logo and met with two local MPs to ask for their assistance in increasing awareness about the scheme. The MPs promoted the campaign through their social media networks and newsletters, and also sent information to local schools to put in their newsletters. The students were interviewed for a story in the local newspaper (Otago Daily Times, estimated circulation 105,000) and 482 people shared the article on Facebook and 15 on Twitter.

Evaluating the campaign

Students carried out a brief survey of 121 people both before and after the campaign. Members of the public were approached on the pavement in three busy locations around Dunedin. Participants were asked some demographic questions, whether they knew the usual prescription co-payment, and whether they knew about the exemption after 20 items. In the post-intervention survey participants were also asked if they had heard about the campaign, and if so how. Ethics approval was gained from the School of Pharmacy under delegated authority from the University of Otago Human Ethics Committee (ref: SoP:6-16).

Forty-three percent of participants in the first survey and 52% in the second were aware of the usual prescription co-payment. In the first survey 24% of participants knew about the exemption after 20 items, and in the second 31%. Seven point four per cent of participants in the second survey had heard of the campaign. Most of these (n=4) had heard about it through the newspaper article. Others had heard about it through Facebook (n=2), from a sticker in a pharmacy (n=2) or elsewhere (n=1).

Discussion

The students developed a multi-faceted, innovative and successful campaign and enjoyed the experience. The campaign reached a large audience. Although the sample size for the surveys was small there did appear to be an increase in the number of people who knew about the exemption, and those who were aware of the campaign reported a range of ways they had heard about it. Although limited resources were available for the campaign, the project showed that it is possible and very rewarding for students and staff to be involved in health promotion, and in advocacy.

During the project the students met and engaged with a range of people, including MPs, who they would not normally meet. They utilised their considerable artistic and movie-making skills, extended their organisational skills, and engaged more with practicing pharmacists and with the professional association. The project provided some valuable lessons in health promotion, including the importance of working in a team, the usefulness of a multi-faceted approach, the usefulness of political support and it encouraged students to think that pharmacists can and should play an active role in promoting health in the community.

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