CHANGING ROLE OF PHARMACISTS AND THEIR SKILLS OF COMMUNICATION: A STUDY IN ERITREA

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Summary

Pharmaceutical care is a new practice in the field of pharmacy giving greater responsibility to pharmacists to meet the drug related needs of patients. To accept and implement pharmaceutical care pharmacist should change their traditional role of product oriented focus to service oriented focus. This study was conducted to find out to what extent the pharmacist s in Eritrea had embraced this role as perceived by the clients and how effectively they were using the skills of communication in this process.177 clients attending three different types of pharmacists filled a questionnaire related to various aspects of medicine management and their skills of communication. The results showed that the pharmacists had not changed significantly in their roles. The clients reported that they continue to adopt a product oriented focus .There is a difference in perception based on the type of pharmacy. The community pharmacists had been perceived more positively by the clients. The communication skills used by the pharmacist were perceived to be adequate by the clients.

Key-words: Pharmaceutical care, communication skills, patient perception,

Introduction

Role of Pharmacists has shifted from a product oriented focus to a client oriented focus in the recent past known as pharmaceutical care. Their task is to identify, resolve and prevent drug related problems. It is a professional practice that can give an opportunity to pharmacists to prove themselves as a real health care professional. Strand defines pharmaceutical care as a practice in which the practitioners take responsibilities for a patient's drug related needs and is held accountable for this commitment. Pharmacist is the acknowledged medication expert today (1).

Increasing prevalence of drug use and complexity of therapeutic regimens and misuse of prescription drugs has become very common these days. Many countries have the problem of rising health care costs. Studies have shown that drug related problems could cause additional health care expenses (2, 3). It is reported that the estimate of the annual cost of drug related morbidity and mortality in ambulatory care setting was 76.6 billion dollars (3). Pharmaceutical care role of pharmacist can play an important role of to manage a patient's drug therapy to improve patient outcome in terms of clinical economic and humanistic outcomes (4). It is said that cost of drug related mortality and morbidity exceed drug sales. Pharmaceutical care is key to the effective and rational use of medicines. Educating the client regarding various aspects of medicine management becomes absolutely important. Pharmacists have to be more effective educators and advocates for the client.

Education of a client takes place only when the cognitive, behavioral and affective needs of the client are addressed. Poor Education is usually a product of poor communication on the part of the provider. Adequate education using appropriate communication skills leads to better client satisfaction and better treatment adherence, better client retention and reduction in complaints of malpractices. A study conducted by Abdul Tawal and Roter in Egypt reported that Client centered communication improved client satisfaction and continued use of family planning methods (5).

With a redefinition of the role of pharmacists all over the world and a shift in focus of their roles, the present study was carried out to understand the client's perception of the changed role of pharmacists as an educator in drug management and the extent of communication skills used by them in this process of education in the country of Eritrea. Measuring the perceptions of patient is essential in evaluating the success of therapy and needs of patient (6)

Objectives:
1. To understand the clients perception on the role of pharmacist as an educator regarding drug management.
2. To know the extent of adequate communication skills used by them in the process of educating the client.
3. To study the difference in clients perception in terms of their education, age and gender difference.
4. To understand the difference in perception of the clients attending a community, hospital or private pharmacist for drug therapy.

Materials and methods

Sample
 Sample was randomly selected from the clients attending various hospital pharmacists, community pharmacists or private pharmacists in the city of Asmara, in Eritrea for drug management.

Tools used
 A questionnaire related to various aspects of medicine management on which the pharmacists are expected to educate their clients and the skills of communication required by them was developed for the present study in consultation with experts in the field. It included 21 items on a 3 point rating scale (never, sometimes, and always) and two open ended questions. This questionnaire was initially developed in English and then translated to Tigrinya adopting the standards for vernacular translation. The questionnaire was completed by the clients individually. Client's age, education, gender and details of diagnosis too were recorded.

The weight age given to the average score of 21 items was as follows: never (1-1.75), sometimes (1.76-2.25) and always (2.26-3).Descriptive statistics were used to present the characteristics of the sample. One way Analysis of variance (ANOVA) and t-test were also carried out to test statistical significance effect and difference between respondent's socio demographic characteristics and their perception towards pharmacist's skill of communication and their in role in educating patients about their medication.

Results

Table 1: Shows the sample characteristics (N=177)

		Frequency	Valid percentage
Age	<20	47	27.2
	21-30	68	39.3
	31-50	42	24.3
	>50	16	9.2
Educational status	Illiterate	21	12.2
	Grade 1-8	27	15.7
	Grade 9-12	50	29.1
	College	74	43.0
Gender	Male	101	58.0
	Female	73	42.0
Pharmacy type	Community	59	33.3
	Private	28	15.8
	Hospital	90	50.8

Table 1 shows that 39.3% of the sample belongs to age 21-30 category, 43% had college education, 58% males and 50.8% clients were attending hospital pharmacy.

Table 2: Shows the frequency and percentage of response on the questionnaire for the total sample

		Frequency	Valid Percent
Do pharmacists educate patients and communicate well	never	30	18.6
	some times	85	52.8
	always	46	28.6

Table 2 indicates that 18.6% clients perception is that pharmacist never educate them or communicate well; where as 52.8% report that they do it sometimes and 28.6 % perceive them as good educators using good communication skills.

Table3: Shows the frequency and percentages responses for two open-ended questions for the total sample

Variables		Frequency	Valid Percent
Who gives you information about medication	doctor	73	41.7
	pharmacist	81	46.3
	nurse	21	12.0
In case of wrong or unclear prescription what does the pharmacist do	Not experienced	11	6.3
	Dispenses your drug as he feels	39	22.2
	Communicate back with your physician	19	10.8
	Sends you back to see your doctor again	107	60.8

Both pharmacists and doctors give them information about the medication. 60.8% respondents report that pharmacist send them back to see the doctor in case of unclear prescription. 22.2% report that they dispense the medicine as they feel and 10.8% report that the pharmacist take the responsibility to communicate with the physician. 6.3 % never experienced such a situation.

Table 4: Item wise frequency, percentage, mean score and Standard deviation on questionnaire

No.	Items My pharmacist	never	sometimes	Always	Mean	Std. de
1	Explains clearly about the details of my medication	31(17.5)	61(34.5)	85(48)	2.31	.752
2	Listens to my questions patiently	8(4.6	67(38.5)	99(56.9)	2.52	.586
3	Takes enough time with me	23(13)	78(44.1)	76(42.9)	2.30	.687
4	Is friendly and helpful	16(9)	68(38.4	93(52.5)	2.44	.655
5	Answers my questions clearly	8(4.6)	62(35.4)	105(60)	2.55	.583
6	Explains whether I should take the medicines on empty stomach or after food	21(11.9)	43(24.3)	113(63.8)	2.52	.700
7	Clarifies all my doubts clearly	27(15.5)	70(40.2)	77(44.3)	2.29	.720
8	Is very cooperative and ready to educate about my medication	24(13.6)	79(44.6)	74(41.8)	2.28	.690
9	Communicate clearly and completely	14(8)	67(38.1)	95(54)	2.46	.640
10	Explains the drug administration schedule	35(19.9)	34(19.3)	107(60.8)	2.41	.802
11	Explains the need of taking complete medication	68(38.4)	39(22)	70(39.5)	2.01	.885
12	Explains drug food interaction	73(41.5)	54(30.7)	49(27.8)	1.86	.824
13	Explains the problem in taking expired medicines	78(44.3)	39(22.2)	59(33.3)	1.89	.878
14	Explains the details of medications only when I ask	49(29)	61(36.1)	59(34.9)	2.06	.800
15	Explains the possible side effects of medicines	108(61)	45(25.4)	24(13.6)	1.53	.724
16	Explains the drug interaction effect	102(57.6)	52(29.4)	23(13)	1.55	.714
17	Explains the drug benefits	85(48.3)	57(32.4)	34(19.3)	1.71	.772
18	Explains the actions to be taken incase of missed doses	134(76.6)	26(14.9)	15(8.6)	1.32	.626
19	Explains the proper storage of medicines	110(62.9)	39(20.5)	28(16.6)	1.51	.717
20	Ask me in case I have additional medical problems	117(66.9)	37(21.1)	21(12)	1.45	.700
21	The pharmacy environment is comfortable and secure to interact	83(47.4)	46(26.3)	46(26.3)	1.79	.835

Table 4 shows that on items 1-10 nearly half or more than half of the respondents had a fairly good positive perception of the pharmacist. The mean score also indicates it. Items

1-9 essentially deal with communication aspects of pharmacists. However, items 11-20, the specific aspects related to medication, where more than half of the clients reported that they sometimes or never get such information from the pharmacist. Item no. 21, the statement related to pharmacy environment, almost half of the respondents reported that it is not comfortable and secure for them to interact.

Table 5: Perception of respondents and statistical significance of difference between variables

Variables		Clients perception		Level of significance
		Mean	Std. deviation	
Pharmacy type	Community	2.19	0.36	F = 10.87* Sig. =0.000 ANOVA
	Private	2.02	0.30	
	Hospital	1.93	0.31	
Gender	male	2.06	0.34	T =0.773 Sig. =0.441 t-test
	female	2.02	0.37	
Educational status	illiterate	2.13	0.35	F = 3.15 Sig. =0.026 ANOVA
	Grade 1-8	2.20	0.37	
	Grade 9-12	1.99	0.41	
	college	1.98	0.28	
If wrong or unclear prescription ,what does the pharmacist do	Not experienced	2.02	0.46	F = 4.49* Sig. =0.005 ANOVA
	Dispenses your drug as he feels	2.04	0.28	
	Communicate back with your physician	2.31	0.33	
	Sends you back to see your doctor again	1.99	0.85	
Who gives you information about medication	doctor	2.04	0.37	F = 3.87 Sig. = 0.23 ANOVA
	pharmacist	2.09	0.33	
	nurse	1.85	0.26	

Table 5 shows whether there is any statistically significant difference between some of the variables and clients perception on the questionnaire. The pharmacy type has a sig. effect on perception of clients. The clients attending community and private pharmacies have a better perception of pharmacist's role.

Respondent's gender or educational status do not make any significant difference regarding their perception of pharmacists. However, the mean scores indicate that as the educational level goes high, the clients report less satisfaction about the pharmacist. In case of wrong or unclear prescription, what action the pharmacist takes has a significant effect on client's perception. The mean score indicates that when they are sent back to the

doctor the clients tend to perceive the role of pharmacist in a negative way. There is no significant difference in the perception of pharmacist's role based on who gives them information regarding the drug management and it shows that the doctors continue to take an active role in educating them.

Table 6: Difference between pharmacy type and respondents perception of pharmacy environment

Variables		The pharmacy environment is comfortable and secure			
		Mean	Std.	No.	ANOVA
Type of Pharmacy	Community	2.15	0.738	59	F = 11.64* df.=2 Sig.= 0.000
	Private	1.88	0.766	26	
	Hospital	1.52	0.820	90	

Table 6 indicates that the pharmacy environment has a sig. effect on the perception of clients. Clients attending community pharmacy feels much more secure to interact and their perception of pharmacist is more positive compared to private or hospital pharmacy. Hospital pharmacy and pharmacists have been perceived negatively by the clients.

Discussion

This study brings out many observations regarding the pharmaceutical care offered by the pharmacist in Eritrea as perceived by the clients. The clients do not perceive the pharmacist as a good educator regarding their drug management when more than 50% report that the education takes place only "sometimes" and 18% reports it never happens. However, the clients attending community pharmacists perceive them in a better way. Most of the clients perceived the pharmacists as having good communication skills. However, the education regarding the various aspects related to medicine does not seem to be taking place. Though there is less statistically significant difference between respondents educational status, the mean scores indicate that as the educational level goes high the clients are more dissatisfied with pharmacist's role as an educator using good communication skills. The gender shows no significant difference in their perception. When there is a wrong or unclear prescription from the side of doctors and if the client is sent back to the doctor the clients perception of pharmacist become significantly negative as an educator using good communication skills. Doctors too play a considerable role in giving information regarding the drug management as the pharmacist. The pharmacy's environment continues to be a barrier in adequate education and communication, especially the hospital pharmacy environment.

This study thus shows that the role of pharmacist has not changed considerably from a product oriented focus to a client oriented focus in this country. According to the philosophy of pharmaceutical care, the pharmacist's essential responsibility is to contribute to meeting societies need for appropriate, safe and convenient drug therapy. Though they have many good skills of communication (listening skills, friendly nature, empathy and so on) the education regarding drug management is not taking place adequately. Similar finding was reported by Erah and Chuks-Eboka that patient monitoring and provision of non medication information as well as specific education and

counseling on medication interactions, side effects exercises, weight control, and healthy living were not conveyed to them by pharmacists (7). This may be due to the fact that the pharmacists are not aware of the changed role, or they don't want to accept the changed role and take responsibility but continue to give the responsibility to the doctors regarding medicine management .They don't use the assertive skills which are very essential in education and communicating with clients, but they tend to take a passive role. The pharmacists have to be an advocate for the client in their changed role. To provide pharmaceutical care practice successfully the pharmacist must be able to incorporate themselves into health care team and communicate with other health care providers and patients. The pharmacy environments have to be made more clients friendly and conducive so that effective communication takes place and consequently the education too.Sakthong in his article also reiterate the lack of private counseling area as a barrier in providing pharmaceutical care (4).

Pharmacists have to acknowledge that they have a responsibility to not only dispense appropriate medicines but also ensure client understanding of what they are used for and what outcome could be expected. They have to establish relationship that creates true partnership with clients in helping them reach their therapeutic goals. An increased focus on enhancing this relationship with client can result in reduction in medical error by making them more comfortable to ask the health care professional about their medication and treatment.Therefor pharmacists in Eritrea need to fully embrace pharmaceutical care and work in collaboration with other professional bodies.

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