An Educational Strategy to Enhance Pharmacy Students’ Attitudes Towards Addressing Health Literacy of Patients

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Background

- Approximately one-half of the U.S. adult population possesses inadequate health literacy. This is occurring precisely the same segment that exists between the limited health literacy of patients, inappropriate medication use, and poor health outcomes.2,3
- The Institute of Medicine and the National Work Group on Health and Literacy offered the charge to professional schools and continuing education programs in the health fields to incorporate health literacy into their curricula and areas of competence.4
- Little published research addressing this issue exists in the pharmacy literature.6 It is believed that schools of pharmacy be proactive and better integrate health literacy into their curricula.

Objective

- The purpose of this investigation was to evaluate the impact of an educational intervention, based on Theory of Planned Behavior (TPB), on enhancing pharmacy students’ attitudes, perceived behavioral control, and intentions concerning identifying and communicating with patients possessing inadequate health literacy.

Conceptual Framework

- It was believed using a theoretical approach to guide the development of the intervention would help focus the attention on the most critical concepts and skills and create a more efficient learning process. Therefore, the Theory of Planned Behavior (TPB) served as the basis for this investigation.
- TPB has been widely cited in the literature as an effective model for eliciting behavior change and assessing intention to perform a given behavior. The TPB is an extension of the Theory of Reasoned Action which suggests the strongest predictor of behavior is an individual’s intention to perform the given behavior.
- TPB hypothesizes the greater an individual’s perceived behavioral control and attitude, the greater his or her intention to perform the behavior will be.7 These three constructs served as the dependent variables and the intervention as the independent variable.

Educational Intervention

- This educational approach consisted of two 50 minute in-class sessions held one week apart and two out of class assignments.
- During the first 50 minute session a presentation on health literacy was provided to the experimental group.
- Students were then provided two out of class assignments, which included conducting a formal health literacy assessment and evaluating “Is our Pharmacy Meeting Patients’ Needs? A Pharmacy Health Literacy Assessment Tool,” which is a publication produced under contract to the Agency for Healthcare Research and Quality (AHRQ).

Data

- This TPB-based educational approach employed a pretest-posttest control group design. The intervention was given to the second (P2) and third (P3) year pharmacy students. The student group (n=42) served as the control and did not receive the intervention. The intervention was administered to the P3 student group (n=40) as part of a required Patient Assessment course.
- Protest and posttest data were collected from all study participants approximately one week before and one week after the intervention was delivered to the experimental group.
- Psychometrically tested instruments were developed for measuring constructs of TPB Readability, face validity, and content validity of the instrument were established by a panel of university professors and the researchers in a two round review process.
- Construct a alpha of 0.80 for the scales assessing TPB constructs ranged from 0.70 to 0.88.
- Descriptive statistics, chi-squares, ANOVA and ANCova were generated to examine the data. All comparisons were made using a prior alpha level of 0.05. The Union University Institutional Review Board (IRB) approved this IRB Study.

Conclusions

- The two groups did not differ in the distribution of demographic or TPB variables at pretest.
- Analyses revealed significant improvements at posttest for the experimental group when compared to the control for attitudes towards health literacy (p=0.003) and perceived behavioral control for communicating with patients with inadequate health literacy (p=0.033).
- Intentions to communicate were high for both groups at pretest and no differences were found to exist for this construct in any analyses.

References

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