Educating Children about Medicines in Community Pharmacies: Perspectives of Parents



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INTRODUCTION

Parents assume the dominant role in medical decisions for children¹

- ☐ Parents report having concerns about their children's prescriptions²
- ☐ Parents address medication concerns by consulting healthcare professionals without involving the child³
- ☐ Medication counseling by community pharmacists is mainly directed towards parents⁴

Little is known about parent perceptions of the childpharmacist relationship

- ☐ Studies have shown that parents' medication beliefs influences children's adherence⁵
- ☐ Parents' views are important to understand how pharmacists can directly communicate with children about medicines

OBJECTIVE

☐ To describe parents' perceptions and preferences for community pharmacist-provided medication counseling for children

METHODS

Recruitment

☐ Parents of children aged 7 to 17 with chronic conditions were recruited from three community pharmacies in two Eastern states

Study Design

☐ A semi-structured interview guide elicited parents' perceptions of the importance of children's medication education in the pharmacy

Data Collection and Analysis

- ☐ 19 interviews were conducted lasting approximately 20 minutes
- ☐ All interviews were audio-recorded and professionally transcribed
- ☐ Transcripts were reviewed for accuracy and a codebook was developed
- □ NVivo 10 software was used for content analysis and identifying prevalent themes

RESULTS

Child-Pharmacist Communication: Parent Perspectives

Barriers

Lack of Child-Pharmacist Interaction

"I come every month but she's not with me every single time, so maybe half the amount of time."

☐ "They whine and complain. That's how I got in the habit of not bringing them."

☐ "His doctor already did it. It would be

redundant and he would be bored and

"Our doctor is from Children's Hospital.

didn't really need any counseling"

☐ "Sometimes they're inpatient and they'd

☐ "Especially if they had to wait... I don't

think either one of them would be all that

rather not be here."

Interactive Educational Tools

☐ "He's very into technology and gaming and has an

read it. Something interactive."

iPhone. I think he would rather see something than

Facilitators

- ☐ "I think a comic book you can take home...a comic
- book is easy and inexpensive and he could do it at his leisure, or on the car ride home."

☐ "I think that the pharmacist, if they have the time,

could reinforce what's been communicated by the

reinforce formulary availability and reimbursement,

doctors. They could reinforce side effects to look out

for and those types of things. To a parent, they could

Pharmacist-Directed She sat with him for probably an hour and a half, talked him through everything so he

Counseling

Age-

Appropriate

Education

☐ At this point I'd have to say no, just because of her age. I mean, if she were younger I might encourage

and those types of things."

"Depending on what's more age appropriate for the kids...with the 16-year-old, soon-to-be-17, it would probably not be the pamphlet, but if there was a laptop or an iPad."

Time Constraints

Physician-

Directed

Counseling

Child Not

Interested

- ☐ "They're just so busy every time I go. They're always very busy there."
- ☐ "The trip to the pharmacy is typically an in-and-out type trip...we will stop on the way home from work and our kids are usually not with us."

Private Counseling

- 'If he did a closed door consultation and the pharmacist was like, "This is the medicine that you're taking and this is how it affects you." "Just a private area. The way the medicines are
- picked up it's not private...I would hate to make [name] feel like he had to do something different to his pharmacy because I love his pharmacy"

Parents' Medication Information Sources

Educated by Physician

"Well first I always ask the psychiatrist that prescribes it, and we talk that through."

'She was our primary source. And then she sat us down and she said, "Do NOT go on the internet." She gave me a website. She said, "There is one website you can use and this is it.'

Package Inserts

"Patient education brochures...the internet would be how we learned about the medicines."

"When we were first getting it we got the inserts that come with the medicine, so I read it over just to see—because it affects kids different than it does adults.

Internet Resources

- "Just like my child, I look stuff up on the internet all the
- "Occasionally, you know, websites, look up medication if it's something really exotic."

Examples of Educational Tools

- Tablets such as an iPad
 - "I could see them using the iPad because it would be fun and games."
- TV/Videos
 - "Any screen that look—if it looked like a video game, if it had fun characters—not a doctor."
- Comic Books
 - "Well, with the age of mine, probably not. I mean with my younger kids, probably"
- Patient Information Pamphlets
 - "The information packet, if it was geared towards children, could be very helpful."

Recommendations for Appropriate Times to Counsel Children and Parents

- First time medication picked up
- Dosage change
- Directions change
- Scheduled time with pharmacist

CONCLUSIONS

- ☐ Pharmacists are the most accessible healthcare professionals in the community and are well positioned to counsel children and parents about medicines⁶
- ☐ Study findings shed light on parents' recommendations for age-appropriate educational resources and times for childtailored counseling
- ☐ Pharmacists should use interactive educational tools such as tablets like an iPad or videos on a TV to engage children in counseling

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