

BUSINESS AND PEOPLE BUILDERS

Creating a health promotion campaign

0.5
CPD CREDIT

Promoting good health is an important professional role for pharmacists. As the most accessible health professionals in the community, we have the opportunity to interact with people at all stages of their life and health journey. While they may come into the pharmacy to fulfil a specific and immediate need, during their time in your store there are many avenues you can use to raise awareness about other health issues, disease prevention and more long-term concerns.



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Set your objectives

A health promotion activity aims to have consumers make some change to their behaviour in order to improve their health. To illustrate with the example of a quit-smoking campaign, there are five stages a smoker goes through to quit¹ (see table 1).

These same stages can be applied to any type of behaviour change. In creating your campaign, it's important to consider what type of change you are trying to drive.

A health promotion campaign can be quite ineffective if the activities undertaken don't match the change stage of the people being targeted. In the smoking example, this means that if you are offering to help smokers prepare a quit plan, this will not appeal to those in the pre-contemplation stage. Instead, they will need information and questions answered. You may prompt them to ask these questions and have this conversation with a pharmacist through other activities you conduct as part of your campaign.

It's not necessary to target all stages at once in a health promotion campaign. Indeed, it is probably more effective to target a specific stage. However, part of the training and preparation for your campaign should include making sure that all staff are aware of these change stages, so that they can identify the type of help that may be required for each person.

Learning objectives:

After completing this CPD activity, pharmacists should be able to:

- Plan a basic in-store health promotion event.

Pharmacist competencies addressed: 1.3, 2.3, 3.1, 6.3.

Accreditation number: A1412RP3

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The objective of your campaign should not be 'to sell more nicotine patches'. However, it's important to realise that customers will not be ready to purchase nicotine replacement until the later stages of their change journey. Trying to 'sell' to them before they're ready may sabotage their quitting attempts and reduce your professional credibility in their eyes.

Focus your efforts

To focus your efforts it may be useful to create a health promotion schedule for your pharmacy, so that you can plan ahead to target different conditions. Depending on your resources, you could choose to focus on one health issue each month. A good starting point for creating this schedule is to

consult the Australian Government's Health Calendar at www.health.gov.au/calendar. This site gives a full listing of the various health promotional events that take place nationwide throughout the year.

During these campaigns, there are usually many resources you can access through:

- Councils.
- State Government Health Department.
- Federal Government Health Department.
- Health promotion organisations.
- Consumer groups.
- Professional bodies.
- Pharmacy Guild.
- Pharmaceutical companies.
- Universities.

Looking ahead to January 2015, Kidney Health Australia (KHA) hosts its Big Red BBQ on Australia Day, January 26. You could use this opportunity to host a barbecue yourself or sponsor one at a community event. Although fundraising is important, the main focus for the pharmacy should be raising awareness to improve patient outcomes.

Ideas for linking a health promotion campaign to the Big Red BBQ:

- Make January Kidney Health Month in your pharmacy.
- Access the resources for health professionals via Kidney Health Australia to update your knowledge on kidney health.
- Undertake kidney related CPD.
- Stock up on self care fact card 'Looking after your kidneys'.
- Request promotional resources such as fact sheets, posters and brochures from Kidney Health Australia.
- If your banner group supports it, you may choose to become part of the KHA kidney health monitoring program. Other pharmacies can refer patients to a GP for this screening.
- Choose a focus for your campaign.

The three key messages are to maintain a healthy weight, manage salt intake, and make water your first choice. You could highlight these factors by offering free weigh-ins and BMI calculation using a creative display to illustrate the amount of salt in various foods, or offering every customer a drink of water while they wait in the store.

Table 1: examples of behaviour changes at each stage for smoking cessation:

| Stage | Desired change |
|--------------------|--|
| Pre-contemplation. | Move from 'thinking about it' to seeking information. |
| Contemplation. | Move from gathering information to making plans to quit. |
| Preparation. | Make a specific quitting plan, including dates and sources of support. |
| Action. | Cease smoking, as planned. |
| Maintenance. | Access support as required to prevent relapse to smoking. |

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- Use eye-catching techniques to draw customer attention to the promotion. In this case, you could use red balloons/decorations: staff could wear red badges or bands and so on.
- Identify patients who may already be at risk based on their medication history and ensure the pharmacist has a conversation with them regarding their kidney health.
- If you are open on Australia Day, host a Big Red BBQ outside your store, highlighting the healthy ingredients, as promoted by KHA. If you are not open, perhaps host a barbecue for staff to thank them for their efforts and celebrate the success of the campaign.

Measure your success

Choose relevant measures to gauge how successful you have been with your activities.

Relevant measures might include:

- How many brochures/fact cards were distributed?
- How many people were weighed?
- How many were referred to their GPs?
- How many kidney health-related



The five stages of change in health behaviour, as illustrated through smoking cessation.

conversations did pharmacists have with patients during the month?

- Were there any interventions?
- How much training was provided for staff?

Avoid measures that are out of your control, or that can't be achieved during the time frame

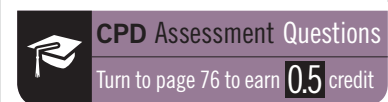
of the campaign. For example, in a short campaign, it would be more relevant to measure how many people made a quit plan rather than how many people quit smoking. In this case, you may wish to follow-up several months afterwards on how many people quit or maintained quitting. You

may also want to measure the impact in terms of customer loyalty after an elapsed period of time. Ensure all staff are well briefed on what you are trying to achieve and how it will be carried out. Ensure you have a clear plan for the duration of the campaign and any special events or promotions that will happen. Prepare a staged approach in responding to customer queries, depending on their level of knowledge, their health status and their stage in the change process.

At the end, ensure that you celebrate your success. Host an event, provide a reward, or give a prize for the best staff performance during the campaign. This will motivate your team to extend its efforts in the next campaign. Don't forget to plan ahead for it. ^{RP}

References

1. Di Clemente, C., Fairhurst, S. et al. 1991. 'The process of smoking cessation: an analysis of pre-contemplation, contemplation and preparation stages of change'. *Journal of Consulting and Clinical Psychology*. Vol.39. No.2. pp.295-304.



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PHARMACY AT THE COALFACE

Do not take this medicine with alcohol!

Accreditation number: A1412RP1 **1** Credit



This activity has been accredited for 0.5 hours of Group 1 CPD (or 0.5 CPD credits) suitable for inclusion in an individual pharmacist's CPD plan, which can be converted to one hour of Group 2 CPD (or 1 CPD credits) upon successful completion of relevant assessment activities.

Consumers are often presented with blanket statements in the media that medicines should not be taken with alcohol. This message potentially also comes from pharmacists, via the use of additional cautionary labels that intend to communicate certain medicines must *never* be taken with alcohol. Label 2 is used where there is a potential for either a pharmacodynamic or pharmacokinetic interaction between the medicine and alcohol. However, what is the evidence supporting this advice? Are pharmacists being overly cautious by counselling *all* patients against taking medicines with alcohol? Or should we be putting the potential for interaction into context so that patients can better understand the implications of taking medicines with alcohol?

1. The disulfiram reaction is associated with which of the following?

- A) A slow rate of conversion of ethanol to acetaldehyde.
- B) Rapid onset of nausea and facial flushing.
- C) Conversion of acitretin to etretinate in the presence of alcohol.
- D) High but not low blood levels of alcohol.
- E) Chronic but not acute alcohol consumption.

2. Which of the following medicines is associated with the disulfiram-like reaction?

- A) Phenytoin.
- B) Nitrates.
- C) Phenezine.
- D) Chlorpropamide.
- E) Bicalutamide.

3. A week ago, Albert (72 years old) commenced daily isosorbide mononitrate for worsening angina. He feels fine so far, but asks you if his new medicine is going to stop him from enjoying a beer at the club on a Saturday afternoon. What is your response?

- A) Alcohol can cause nausea and facial flushing when taken with isosorbide mononitrate. He needs to stop drinking beer.
- B) Alcohol may worsen his angina if taken with isosorbide mononitrate. He needs to stop drinking beer.
- C) Alcohol and isosorbide mononitrate together can drop his blood pressure and make him feel dizzy. He needs to take care as he might have a fall if this occurs.
- D) If he has a weekly beer with his isosorbide mononitrate, he risks developing a bleeding ulcer.

- E) He should not take his isosorbide mononitrate on a Saturday if he is going to have a beer.

4. You are counselling Cheryl about her new script for metronidazole. She laughs and says her sister has had this antibiotic many times and has had a drink on a Saturday night and felt fine. What is your response?

- A) It is possible that it doesn't affect her sister, but there are reports of severe reactions when metronidazole is taken with alcohol. It can cause nausea, facial flushing and a racing heart.
- B) If she has only one or two drinks she won't get sick from metronidazole.
- C) If she is going out on Saturday night she should skip that one metronidazole tablet to prevent her from having the reaction.
- D) The computer says I have to put this little label about alcohol on your script.
- E) I find it hard to believe that your sister took metronidazole with alcohol without being really sick.

5. Which of the following statements is correct?

- A) Acute alcohol intake increases the clearance of phenytoin.
- B) Glimepiride increases the blood levels of acetaldehyde when taken with alcohol.
- C) Tranylcypromine interacts with the tyramine in red wine, not the alcohol.
- D) Alcohol inhibits aldehyde dehydrogenase to worsen nicotinic acid facial flushing.
- E) Alcohol increases the risk of fetal malformation by acitretin by affecting the oral contraceptive.

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Accreditation number: A1412RP3 **0.5** Credit



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Promoting good health is an important professional role for pharmacists. As the most accessible health professionals in the community, we have the opportunity to interact with people at all stages of their life and health journey. While they may come into the pharmacy to fulfil a specific and immediate need, during their time in your store there are many avenues you can use to raise awareness about other health issues, disease prevention and more long-term concerns.

1. What is the aim of a health promotion campaign?

- A) To drive immediate increased sales for your pharmacy.
- B) To get all patients to an ideal health status by the end of the campaign.
- C) To stimulate a positive change in health behaviour.
- D) To raise money for health charities.

2. Which two of the following are stages of Di Clemente's model of smoking cessation?

- A) Contemplation and refusal.
- B) Pre-contemplation and contemplation.
- C) Maintenance and adherence.
- D) Action and reaction.

3. Access to the Australian Government Health Calendar is:

- A) Available via the Health Department website.
- B) Not available to pharmacists.
- C) Not useful for planning a health promotion campaign.
- D) Only provides information regarding health-related holidays.

4. Tools to aid your planning of a health promotion campaign include:

- A) Self care fact cards.
- B) A calendar.
- C) Health promotion display materials.
- D) All of the above.

5. Relevant measures for the success of your campaign should be:

- A) Easy to collect and record.
- B) Unrelated to the activities you are undertaking.
- C) Financial measures only.
- D) Long-term health indicators.

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