

The Concept of Social Pharmacy

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The 13th International Social Pharmacy Workshop will be held in Malta in July 2004. The Social Pharmacy Workshops are international conferences for research in social and behavioural pharmacy. Meetings are held every second year and participation has grown steadily since the first Workshop was held in Helsinki, Finland, in 1980. Following the successful 2002 conference in Sydney, Australia, the 2004 meeting in Malta will be the first one held in the Mediterranean area!

Introduction

But what is Social Pharmacy? In this article, we give a brief overview of this field. We identify key questions addressed in Social Pharmacy research and introduce its major theories, concepts, and research methods. Finally, we discuss the future of Social Pharmacy and how it relates to the future of Pharmacy in general.

What is Social Pharmacy?

Traditionally, chemistry, biochemistry, physics and physiology form Pharmacy's core knowledge base. Knowledge of medications and their effects is the basis of the pharmacists' professional expertise. Practising pharmacy, however, is carried out among human beings, the persons referred to as customers or patients or users. They, in turn, are connected with one another in families, organizations and health systems in countries and cultures around the world. Thus, when trying to explain, understand or change pharmacy practice, the natural

sciences simply do not provide adequate tools or perspectives. They need to be supplemented with knowledge from the disciplines that deal with people and systems, i.e., the humanistic and social sciences. And this is where Social Pharmacy comes into the picture.

Within Social Pharmacy, the drug/medicine sector is studied from the social scientific and humanistic perspectives. Topics relevant to Social Pharmacy consist of all the social factors that influence medicine use, such as medicine- and health-related beliefs, attitudes, rules, relationships, and processes. One general area of research focus addresses social aspects of drugs themselves including: drug research and development, drug production, drug distribution, drug prescription, drug information and drug control. Examples of questions within this area are:

- How do laws influence development and approval of new drug products?

- What is the influence of a newly developed product on health and health economics?
- How is drug distribution carried out in countries that have different education and availability of pharmacists?
- How do pharmacists perceive and act upon their expanded roles in health care delivery?

The other general area of research in Social Pharmacy addresses user (or patient or customer) perceptions and use of drugs/medicines. Research questions in this area are as diverse as the patients and providers involved in medication use activities, for example:

- Why is the patient taking (or not taking) a medicine as it was prescribed?
- What kind(s) of drug information has the best effect on patient understanding and when should it be provided?
- How can a pharmacist most effectively identify a patient's drug-related problems/side effects?
- How can new pharmaceutical services for the patient/customer be implemented in health care?

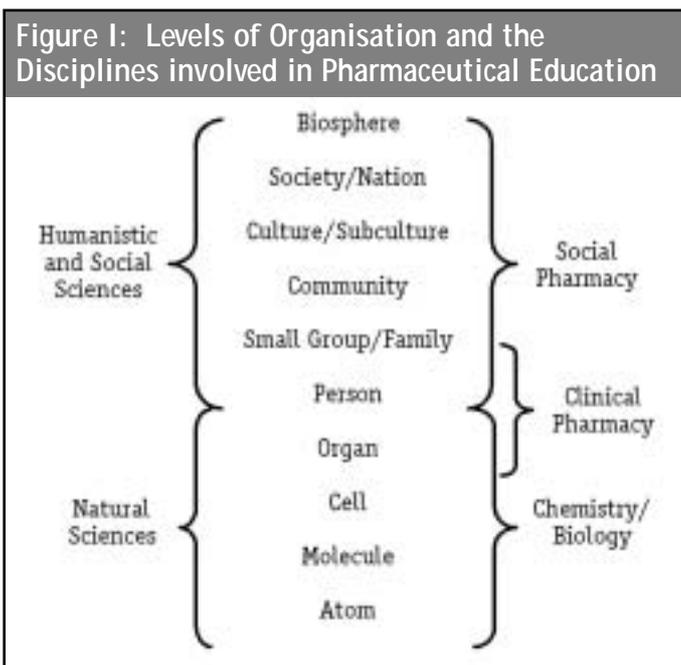
Thus, Social Pharmacy can assist anyone who wants to use a scientific approach to describe, explain, understand, and/or change practice. As such, it offers benefits to researchers, policy-makers, and pharmacists as well as other health care providers.

The primary pursuit of Social Pharmacy research is to investigate questions and themes concerning pharmacy practice and medicine use. It is a hybrid field that uses theories and methods from numerous humanistic and social scientific disciplines in order to explore all aspects of pharmacy practice. Because of this interdisciplinary nature, it is necessary to be familiar with diverse disciplines and skilled in applying their methods of inquiry. Social Pharmacy regularly draws upon the disciplines of sociology, social psychology, psychology, political sciences, educational studies, communications, economics, history, and anthropology. It leans more heavily on psychology, social psychology, sociology, political science, and economics, especially as these relate to issues in public health and social politics.

Figure I shows the hierarchy of natural systems, the levels of organisation and the disciplines in the pharmaceutical education. This is the way³ that we at the Danish University of Pharmaceutical Sciences explain the relationships between the

different pharmaceutical disciplines. This also illustrates how Clinical Pharmacy serves as a bridge that overlaps with and connects the natural sciences and Social Pharmacy.

Social Pharmacy has strong connections to Pharmacy Practice. In virtually all cases, books^b addressing subjects, theories and methods of Social Pharmacy associate Social Pharmacy with the term, activities, and/or field of Pharmacy Practice. This is illustrated^c by Wertheimer and Smith,¹ and Taylor and Harding.⁵ In fact, in some countries, Social Pharmacy actually is incorporated under the more general term "pharmacy practice".⁴



relevant to Social Pharmacy research, a series of articles by Bissell, Traulsen, and Haugbølle¹³⁻¹⁵ is being published in the International Journal of Pharmacy Practice. Each article examines an area of sociological theory and its relation to pharmacy practice research. Approaches being examined include: functionalism, marxism, symbolic interactionism and ethno-methodology, feminism, post-modernism and post-structuralism, the work of Michel Foucault and the developing sociology of the body.

Methods

In Social Pharmacy, as in the social and humanistic sciences, there is no one single method of research but several, because the types of question that need to be

Research in Social Pharmacy

Social Pharmacy/Pharmacy Practice Research is linked to the broad field known as health services research. This linkage emphasises that this is an applied field of research, concerned with both understanding and improving pharmacy practice and medication use. Why is research of this type so important? Increasingly, we recognise that pharmacy practice must be evidence-based and must make use of best practices. Thus, it is important that pharmacy practices be evaluated and that findings of such research be implemented. Much work is still needed in this area. Reviews such as those by De Young,⁶ Schumock⁷ and Singhal *et al*,⁸ conclude that pharmacist consultation and pharmacy-based interventions have positive effects. Applying the strict criteria used to conduct a systematic review, however, Beney, Bero and Bond⁹ concluded that more rigorous research is needed to document the effects of pharmacist interventions. Thus, it is important that pharmacist practitioners participate in collaborative Social Pharmacy research or undertake their own research and professional audits.

What topics require investigation?

The Pharmacy Practice and Research Group¹⁰ recommended eight themes and topics for pharmacy practice research:

1. Supply, distribution and availability of services
2. Demand of services
3. Organisation and process of service delivery
4. Effectiveness and outcomes of services

5. Improving quality of services and quality assurance
6. Evaluations of policy and practise experiments and innovations
7. Interface between pharmaceutical and other health services
8. Payment and remuneration for services and pharmaceuticals

Addressing all these topics obviously is a major challenge, one that leads researchers into many different areas of investigation and application. How can such diverse studies be united with one another? By using theories developed in the humanistic and social sciences to guide Social Pharmacy investigations, we are able to develop a more general understanding of social factors that influence pharmacy practice and medicine use.

As a relatively new discipline, though, the theoretical bases of research in the area of Social Pharmacy and Pharmacy Practice still are in the process development.¹¹ The number and range of theories useful for research, however, are enormous and varied.¹² In the Social Pharmacy research community and at the Social Pharmacy Workshops, we recognize and try to improve upon this; theories are discussed, critiqued, and further integrated into current research. Reflecting the wide array of theories

answered differ. Research is classified into four types in relation to the core questions they can answer, the typical design and research method(s) used, and the different quality criteria for each type.¹⁶ This is shown in Table I.

Research methodology in Social Pharmacy/pharmacy practice is described in by Taylor *et al*⁸ and Smith.¹⁷

Further information about research in Social Pharmacy, may be sought from the following sources:

International journals:

- Journal of Social and Administrative Pharmacy
- International Journal of Pharmacy Practice

Books about Social Pharmacy/Pharmacy Practice:

- Taylor K, Harding G (2001) Pharmacy Practice. London: Taylor and Francis.

National or international conferences:

- International Social Pharmacy Workshop
- Pharmaceutical Care Network Europe (PCNE)
- European Society of Clinical pharmacy (ESCP)

a) A similar model is described by Mount in Wertheimer and Smith (1989).¹

b) This section is based on the following sources: Lilja, 1988;² Wertheimer and Smith, 1989;¹ Harding, Nettleton and Taylor 1990;³ Harding, Nettleton and Taylor, 1994;⁴ Taylor and Harding 2001.⁵

c) Language usage reflects social changes. For example, in their 1996 revised edition, Wertheimer and Smith revised the title to Social and Behavioral Aspects of Pharmaceutical Care and Harding and colleagues used the terms Sociology and Social Pharmacy in their earlier textbooks (Harding *et al* 1990; Harding *et al* 1994).^{3,4}

- Health Services and Pharmacy Practice Research conferences
- FIP: The International Pharmaceutical Federation
- American Pharmacists Association
- American Society of Health-System Pharmacists

Conclusion: The Future

Social Pharmacy has come to stay, and there are reasons to believe that Social Pharmacy will play an even more crucial role in future pharmacy, i.e. drug engineering based on gene technology and nanotechnology and the increasing reliance on drugs in dealing with human ailments will pose and empower new challenges for pharmacists. The nature of modern and future drugs calls for interdisciplinary approaches in both research and practice in order to fully understand the associated complexity. In the future, health care systems will be stretched far as the “invading nature” of future drugs will have substantial impact on pharmacists’ performance, health care policies and expenditures, as well as on the individual user whose life might be altered radically.

Social Pharmacy is the interdisciplinary discipline that enables the pharmacy profession to act, take part and take responsibility in drug matters at a societal level. Being a discipline developing very fast due to social demand, Social Pharmacy is likely to have a central position in the future curricula in Pharmacy Schools.

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Table I: The Main Types of Research¹⁴

Research Type	Descriptive	Explanatory	Understanding	Action-oriented
Core Question	How is X distributed?	What X causes Y? What Y results from X?	What is X?	How do people involved develop the action on basis of the knowledge gained and communicated during the research process?
Typical Design	Survey	Experimental	Case study	<ul style="list-style-type: none"> • Action research • Formative evaluation
Dominating Method	Quantitative	Quantitative	Quantitative	Qualitative and quantitative
Quality Criteria	<ul style="list-style-type: none"> • Reliability • Validity • Precision • Generalisation 	<ul style="list-style-type: none"> • Reliability • Validity • Precision • Generalisation • Prediction 	<ul style="list-style-type: none"> • Validity • Wholeness • Looking-glass • Provocation • Enlargement of meaning 	<ul style="list-style-type: none"> • Validity • Does learning occur? • What direction does change take? • What does change mean?