

An exploration of how a simulated adherence activity may increase empathy in undergraduate pharmacy students

John Hayden¹, Sam Maher¹, Paul Gallagher¹, Annie Ó Breacháin², Patricia Cummins³, Michelle Flood¹

1. School of Pharmacy, RCSI, 2. School of Arts Education and Movement, DCU, 3. Pharmacy Department, OLCHC



RCSI





Background

Clinical empathy

- Associated with positive clinical outcomes
- A potential decline throughout healthcare studies

Adherence

- 20-50% of patients on chronic medicines reported as being non adherent,
- Higher non-adherence for lifestyle interventions
- Core duty of pharmacists - under-represented in pharmacy curricula

Simulation activities

- Pill-taking experiences reported to help understanding of adherence
- Noted as beneficial to various healthcare student groups

Simulation increasing empathy?

- Several evaluations describe student reported increase in empathy
- However, empathy is a complex concept

Morse's Components of Empathy



Emotive

The ability to subjectively experience and share in another's psychological state or intrinsic feelings



Moral

An internal altruistic force that motivates the practice of empathy



Cognitive

The helper's intellectual ability to identify and understand another person's feelings and perspectives from an objective stance



Behavioural

Communicative response to convey understanding of another's perspective

Study Design



Launch

DAY 1

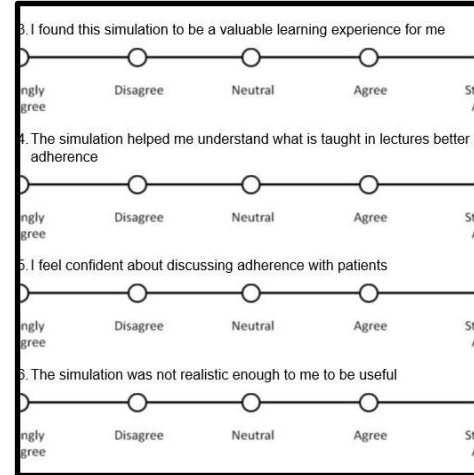
Introductory Pharmacy
Professionalism module
28 day supply of jellybeans
& Exercise recommendations



Adherence Intervention

DAY 14

Introduction of an SMS reminder
to assist adherence



Individual Evaluation

DAY 28

End of activity
Likert scale statements and
open-ended questions



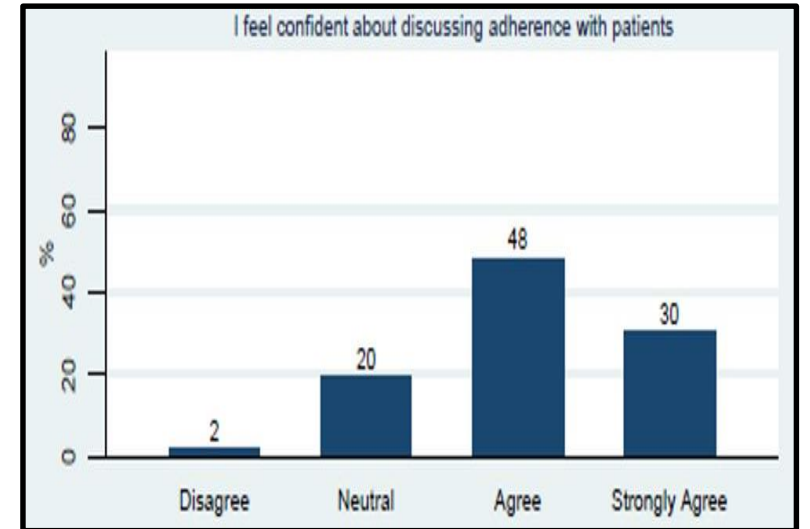
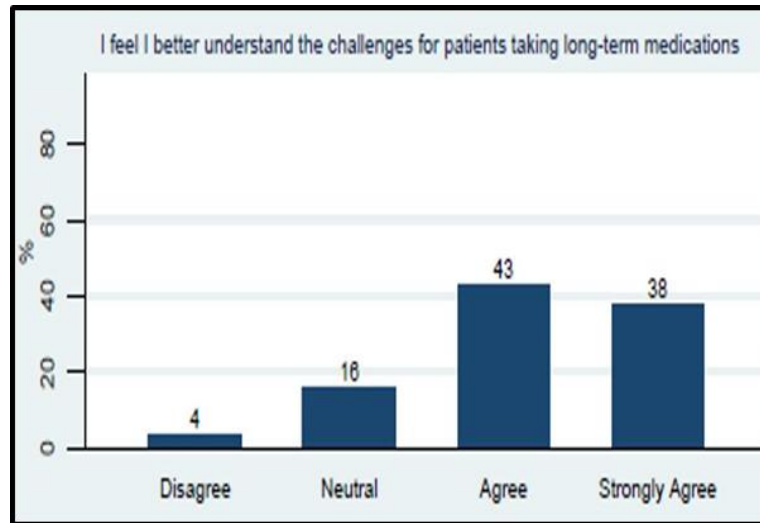
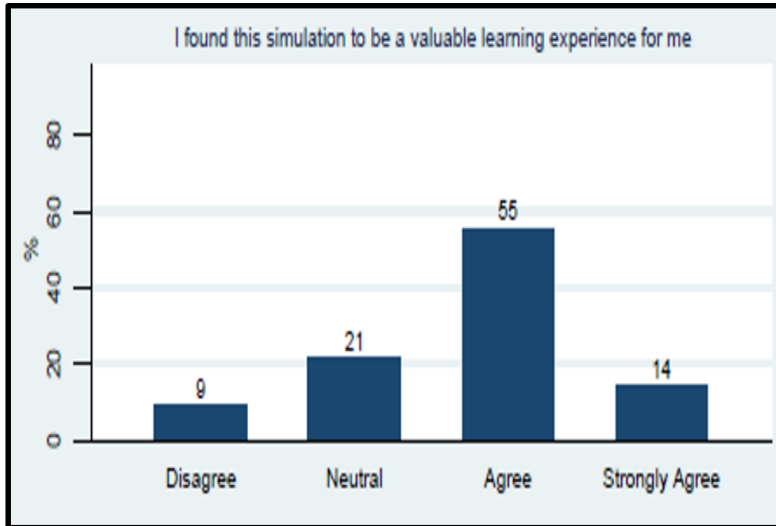
Debrief

DAY 28

Facilitated small-group debrief
exploring aspects of empathy
development

Quantitative Evaluation

Response Rate 56/61 students (92%)



A central graphic for 'Qualitative Evaluation' featuring a black circle with the text 'Qualitative Evaluation' in white. This is surrounded by several concentric circles of varying shades of gray and black, with small dots and a square marker placed at various points along these circles.

Qualitative Evaluation



Emotive

“I was embarrassed by how difficult I found it to take the medication 30 minutes before food.”

“Stressful”

“It felt so bad.”



Moral

“I liked the discussion it brought up with classmates about taking meds.”

“It gave us personal insight into the commitment and dedication that a patient must give when taking long-term medication.”



Cognitive

“I felt like I was a real patient and gave me a small understanding of what a patient on long-term medication goes through.”

“I learned of the struggle and difficulty in following a medication to the prescription.”



Behavioural

“Make them comfortable, explain the information they share is confidential and will aid the patient.”

“I would share my own personal experience.”



The Good

More challenging – especially for those without a daily medicine

Out-of-classroom experience – useful reference examples

Eye-opening for some - the patient dilemmas



The Bad

An unmasked placebo – limiting buy-in

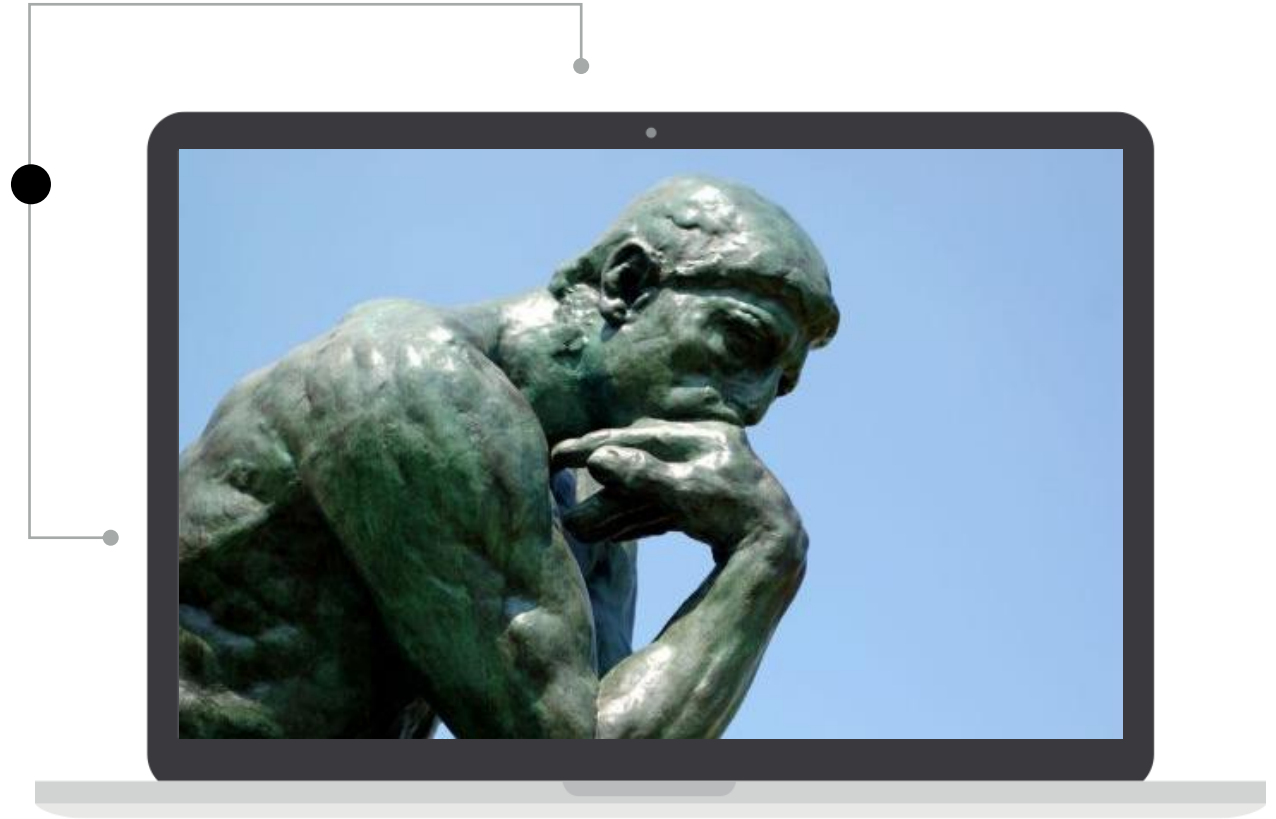
Novelty wears off quickly- naivety



Future work

Optimal place in curriculum

Link to empathic communication workshops



The Thinker | Rodin Museum - Musée Rodin

Thank you

johnhayden@rcsi.ie

