

TEACHERS' TOPICS

A Pharmacy Political Advocacy Elective Course

Elizabeth W. Blake, PharmD, and Patricia H. Powell, PharmD

South Carolina College of Pharmacy, Columbia

Submitted March 24, 2011; accepted June 6, 2011; published September 10, 2011.

Objective. To develop and implement an elective course to increase pharmacy students' awareness of legislation that might affect the pharmacy profession and to promote advocacy for the profession.

Design. Students participated in class discussions regarding current legislative issues and methods to advocate for the pharmacy profession. Assignments included a student-led presentation of the advocacy agendas for various pharmacy organizations, a take-home examination, participation in class debates, and a legislative presentation.

Assessment. Forty-eight students enrolled in the elective course over 3 years. Assignments and class participation were assessed using grading rubrics. At the end of the semester, students completed a questionnaire to assess the overall benefit of the course.

Conclusions. Participation in an elective course devoted to pharmacy political advocacy increased awareness of legislation and the desire to become involved in pharmacy organizations to promote the pharmacy profession.

Keywords: pharmacy, advocacy, legislation, policy, elective

INTRODUCTION

Students of accredited doctor of pharmacy (PharmD) programs are expected to have some awareness and involvement in public health issues after graduation.¹ The Accreditation Council for Pharmaceutical Education (ACPE) accreditation standards require that pharmacy students understand the health care delivery system in the United States, including the factors that may influence this care.² These standards require that pharmacy students learn pharmacy law and regulatory issues, but not necessarily how to change them. Pharmacy students also should understand how their involvement with pharmacy organizations potentially could affect regulatory and legislative issues. Most importantly, pharmacy students should be aware of the current and future roles of pharmacists as part of the health care team and the effect of health care reform on this role. The Joint Commission of Pharmacy Practitioners has clearly stated that by 2015, "Pharmacists will be the health care professionals responsible for providing patient care that ensures optimal medication therapy outcomes."³ Although this is explicitly stated, pharmacists will need to advocate for this expanded role in order to make it happen. Based on this, the American Association of Colleges of Pharmacy (AACP) has proposed that students learn more

skills in leadership and advocacy as part of the AACP Curricular Change Summit.⁴

Little information is available in the literature regarding the incorporation of pharmacy advocacy into the curriculum.^{5,6} A policy analysis project in a required Pharmacy Law and Ethics course taught basic law to pharmacy students and allowed them to propose changes in state laws to the state board of pharmacy.⁵ However, this was a project within a required law course rather than an entire course devoted to pharmacy advocacy. As a result of a leadership and advocacy elective at the University of Maryland in collaboration with Virginia Commonwealth University intended "to develop doctor of pharmacy students' leadership and political advocacy,"⁶ students and faculty members became more involved in advocating for the pharmacy profession. However, this course focused on developing leadership skills in an effort to create future leaders rather than promoting pharmacy advocacy in average pharmacy students who may not be interested in leadership positions.

A review of the South Carolina College of Pharmacy (SCCP) curriculum and discussion with course coordinators determined that minimal time was devoted to discussing current legislation that could affect the pharmacy profession or methods to affect this legislation. Periodic updates were given during the Health Care Systems and Management course, which is offered in the fall semester of the third year. Approximately 2 hours were devoted to advocacy but only as it related to Medicaid and Medicare.

Corresponding Author: Elizabeth W. Blake, PharmD, South Carolina College of Pharmacy, USC Campus, 715 Sumter Street, CLS 314A, Columbia, SC 29208. Tel: 803-777-6058. Fax: 803-777-2820. E-mail: blake@sccp.sc.edu

Student organizations minimally exposed students to the advocacy efforts of pharmacy organizations. Additionally, the newly integrated SCCP increased the requirement for electives to 8 hours. Because the previous curricula for the Medical University of South Carolina (MUSC) and the University of South Carolina College of Pharmacy required fewer elective hours, faculty members were requested to develop more elective courses. To meet this demand and to increase student exposure to legislation and advocacy, the Pharmacy Political Advocacy elective was created.

DESIGN

The Pharmacy Political Advocacy elective was offered initially to second- and third-year pharmacy students in the spring semester of 2008. Due to time constraints and room availability, however, the course was limited to second-year students. At this point in the curriculum, second-year pharmacy students had completed mostly basic science courses and an Introduction to Drug Information and Self-Care and Complementary Medicines course. During the same semester as the elective, students began their first pharmacotherapy course and an outcomes course. As the elective did not require a strong knowledge of clinical sciences, faculty members felt it was appropriate for all student levels. The 2 credit-hour elective met for 2 hours 1 day a week. The goal of the course was to increase pharmacy students' awareness of and involvement in legislative issues affecting the pharmacy profession and/or healthcare by providing various ways for them to become advocates and influence legislative decisions. Students were required to actively participate in class discussions and work with their peers to present various assignments related to advocacy and legislation. In addition, students learned how to identify their legislators and any legislation that may pertain to the pharmacy profession, and then determine methods to support the legislation or recommend revisions that would make the legislation more

amenable to the practice of pharmacy. The objectives for the course are listed in Table 1 and were designed using all levels of Bloom's Taxonomy in order to provide students with basic knowledge of political advocacy and then have them use that information to advocate for the pharmacy profession.⁷

The elective convened during spring semester 2008 to coincide with the session of the South Carolina Legislature. Because the SCCP-Columbia campus is located 2 blocks from the state house, students had easy access to state legislators, 3 of whom were pharmacists. Columbia also is a central location for many state-based health care organizations, increasing the availability of guest speakers who advocate for pharmacy and other health professionals. Because of the interactive nature of the course, the elective was offered only at the Columbia campus and not by distance technology to the college's other campus.

The initial class session included an orientation to the course and an overview of the legislative process, highlighting the points in the process at which the greatest impact on a specific bill could be made by a citizen, advocate, or lobbyist. Additional class sessions consisted of either a topic discussion or a facilitated discussion by an invited guest. Guest speakers were selected based on their current role in creating or influencing pharmacy legislation or regulatory issues. Table 2 shows the variety of speakers who have participated in the course over the past few years. Optimally, guest speakers with varying opinions on current issues were recruited to expose students to diverse views and encourage them to form more objective positions on topics. The diversity of content allowed students to learn about the process of passing legislation and developing policy statements for pharmacy organizations, as well as to debate current legislation. Students toured the South Carolina State House to learn more about the legislative process. When possible, students were invited to attend subcommittee meetings in which pharmacy legislation was discussed. Feedback from students in the first

Table 1. Course Goals and Objectives for a Pharmacy Political Advocacy Elective Course

Goals:

To enable pharmacy students to become actively involved in legislative issues affecting the pharmacy profession and/or healthcare by providing them with various ways to become advocates and influence legislative and administrative decisions.

Objectives:

- (1) To define advocacy and mechanisms to become an advocate
 - (2) To outline the effect of current legislation on the practice of pharmacy
 - (3) To review current legislation and recommend revisions that would be more amenable to the practice of pharmacy
 - (4) To engage in interactive commentaries regarding current legislation and evidence-based medicine
 - (5) To analyze the viewpoints of local and national representatives regarding current legislation and develop a plan to support or oppose these viewpoints
 - (6) To interact with policymakers and legislators and learn appropriate mechanisms for contact
-

Table 2. Guest Speakers in a Pharmacy Political Advocacy Elective Course

Director of Government and Professional Affairs, American College of Clinical Pharmacy
Chief Executive Officer, South Carolina Pharmacy Association
Senior Vice President, Quality and Patient Safety, South Carolina Hospital Association
Current and Past Presidents, South Carolina Pharmacy Association
Current and Past Presidents, South Carolina Society of Health-System Pharmacists
State Senator, Independent Pharmacy Owner
Director of Governmental Affairs for state lobbying group
Director for Medication Safety, Cardinal Health
Faculty Members of SCCP who are current or past member of legislative or advocacy committees on a state and/or national level

course offering led to a requirement in subsequent course offerings for students to either attend the House of Delegates meeting for the South Carolina Pharmacy Association or watch the archived video of the most recent South Carolina Board of Pharmacy meeting. The remaining class sessions focused on discussions of current issues and student assignments facilitated by the course coordinator.

The first offering of this class occurred in spring 2008, during the presidential primaries, which provided a great opportunity to talk about each candidate's platform for health care reform. Students enrolled in subsequent semesters were able to review the development of the Patient Protection and Affordable Care Act and the implications of this legislation for pharmacists. Additionally, in some offerings of the course, students were required to present summaries of how specific pharmacy organizations advocated for the pharmacy profession, not only for health care reform, but also for other important issues. Because USC is a state-funded institution and requires faculty members to prevent their personal political beliefs from influencing students and other employees, great effort was taken to present multiple sides of each issue, remain objective, and limit political bias. A disclaimer for this objectivity was not specifically described in the syllabus but was mentioned verbally throughout the semester.

Multiple activities were assessed throughout the semester to calculate the final grade. Although the weight assigned to each activity changed as the course evolved, the components of the final grade remained the same (Table 3). To promote active engagement with guest speakers and faculty members, students were required to interact and be involved in discussions and were assigned a grade for class participation. Students also researched controversial

topics in the pharmacy profession and engaged in debates with classmates (eg, creation of a separate class of behind-the-counter medications, the pharmacist's right to refuse, and allowing direct-to-consumer advertising of prescription drugs).

Halfway through the semester, students completed a midpoint examination. As the examination assessed the applicability of knowledge learned in the class, students were given 2 to 3 weeks to return the examination. The students were required to provide detailed responses to the questions and to reference the source used for each answer. Questions varied in complexity from students determining the specific legislators for the district in which they lived based on their zip code, to preparing a response to a legislator in support of or opposition to a current controversial topic. Students also were required to research other issues that might not have been discussed in class and to provide a summary of the issue and reflect on the possible outcomes associated with it. The examination assessed skills the students would need in the future to research various issues and then advocate for or against them.

The final assignment for the course was preparation of a legislative presentation. For the most part, students worked in teams of 2 to complete the assignment. Based on trial and error, the presentation assignment changed over the years. In the first offering of the course, students reviewed the health care reform platforms of 1 of the top 2 Republican and Democratic presidential candidates. The next year, student teams were required to contact the office of a US senator or representative to prepare presentations to determine the legislator's support of or opposition to the health care reform proposal submitted by the president of the United States as well as potential changes the legislator would recommend for the proposal. The presentation assignment also was required in the third offering of the course in 2010, but changed considerably. Students paired up to summarize the legislative process along with several state and national legislative and regulatory issues that would affect the pharmacy profession, including the Patient Protection and Affordable Care Act. The students then combined their work into a single presentation to present to other students in the pharmacy program at a

Table 3. Grading Components in a Pharmacy Political Advocacy Elective Course

Component	Percentage of Final Grade
Take-home Test	30
Debates	20
Legislative Presentation	30
Class Participation	20

monthly meeting of the Academy of Student Pharmacists and the Student Society of Health-System Pharmacists. This allowed the students enrolled in the elective course to share their newly gained knowledge in the hope of increasing awareness among and future involvement of other students in advocating for the pharmacy profession.

EVALUATION AND ASSESSMENT

Forty-eight students completed the Pharmacy Political Advocacy elective from 2008 to 2010. Enrollment increased from 9 students in the first course offering to 20 in the third course offering. For the first 2 offerings, the elective was designated as a pass/fail course; however, based on student comments, it was changed to a graded course in 2010.

Grading rubrics were used to assess class participation, debates, and legislative presentations (Appendix 1 and Appendix 2), and students performed well on all assignments. Point values were assigned to each question of the take-home examination, with a maximum possible score of 50 points. The average cumulative score for the examination was 96.9% with a range of 80% to 100%, demonstrating the applicability of knowledge gained from the course.

Course Assessment

At the conclusion of each semester, students completed an anonymous 45-item course assessment. The questionnaire collected demographic information, quantified students' previous political activity, and assessed changes in their political knowledge and awareness after completion of the elective. Student perceptions about the elective also were assessed using a standard 5-point Likert scale (1 = strongly disagree to 5 = strongly agree). The Institutional Review Board for Research with Human Subjects at USC approved assessment of the Pharmacy Political Advocacy Course as an exempt study.

Over the 3 course offerings, 40 students completed the course assessment (83.3% response rate). The average age of respondents was 23 years with a range of 21 to 33 years. A slight majority of respondents were female (52.5%).

Only 13 respondents (32.5%) had ever taken a college political science course. Since beginning college, 67.5% had served in an elected position for an organization. Additionally, most respondents were members of a pharmacy organization (72.5%) with 50% of all respondents active in multiple pharmacy organizations. At the conclusion of the semester, 37 of the 40 respondents declared that they definitely would or might become involved in a pharmacy organization in the future.

Although a few students knew how to access or obtain legislation affecting pharmacy prior to taking the elective, 92.5% and 95% of students learned how to access and obtain information, respectively, after completing the elective. Most students were registered to vote (92.5%), though only 80.6% of respondents who were eligible to vote did so in the 2008 presidential election. The majority of respondents indicated that they believed voting was important and that voting was an effective way to influence change (Table 4). Additionally, most respondents agreed that pharmacists could affect legislation. The majority of respondents indicated that their knowledge of current issues and their awareness of legislation that could affect the pharmacy profession increased as a result of completing the elective.

The course assessment also provided a section for comments from students regarding the strengths and weaknesses of the course. Students most frequently commented that the class highlighted the need to remain aware of current legislation and to become actively involved in advocating for the pharmacy profession. Students also enjoyed the interactive nature of the class. As stated previously, students enrolled in the first offering of the course requested the option of attending a meeting where legislative issues or policies would be discussed. Students also suggested that a letter grade be given for the course rather than just pass/fail. Additionally, they recommended that future students be given the opportunity to advocate for a specific issue being debated by legislators.

The final presentation for the course changed each year for the first 3 years based on the successes and failures

Table 4. Responses of Pharmacy Students Enrolled in a Political Advocacy Course (N = 40)

Items	Strongly				Strongly Disagree
	Agree	Agree	Uncertain	Disagree	
Voting is important.	18	17	2	1	2
I believe that voting is an effective way to influence change.	14	18	3	3	2
I believe that pharmacists can affect current legislation.	14	23	2	0	1
This class has increased my <u>knowledge</u> of current issues in government and public affairs.	27	11	0	1	1
This class has increased my awareness of legislation that would affect the pharmacy profession.	29	10	0	0	1

of the initial projects. The presidential candidate presentations the first year were limited by candidate withdrawals during the semester. During the second year, legislators did not respond promptly to student requests for comments. One team finally received a response in August after the class concluded in April. The presentation during the third year proved to be the most successful.

DISCUSSION

Although some changes were made to the course over the 3 years since its creation, the overall goal of the course remained the same and appears to have been accomplished based on student responses. Once the course has been planned for the semester, little additional work is required of the coordinator except to remain aware of current issues and ensure guest speakers will be available. During the first offering, the coordinator prepared numerous lectures for the course, including a review of the advocacy agendas for several pharmacy organizations. However, the students lost attention easily and did not retain the material taught in the lectures. As a result, responsibility for course learning has been transferred to the students so that the coordinator only has to prepare 2 didactic lectures. Assuming more responsibility for their learning encourages active participation by students throughout the semester and minimizes faculty workload. Although fewer lectures have to be prepared, the coordinator still facilitates class discussions and debates and therefore must remain current on many regulatory and legislative topics.

Although students were given the opportunity to advocate for a specific issue in writing on the midterm examination, they were not required to do so as part of the class. Future offerings of the course may give students the opportunity to practice advocacy rather than just write about it. Caution will need to be used to ensure that the advocacy activity is not perceived as a reflection of the college's position. Additionally, other forms of advocacy will be addressed, including advocating for patient safety and improvement in quality of care. More attention also will be focused on regulatory issues and reasons why pharmacists are not actively involved in political advocacy.

The location of colleges and schools of pharmacy in reference to their state's capitol should not deter them from offering a political advocacy course. Although the location of the SCCP-Columbia campus in the state capitol and near the State House is fortuitous and enhanced this elective, few students actually have been able to attend a committee or subcommittee meeting involving the pharmacy profession because these meetings tend to occur during scheduled class time for required courses. Also, while many pharmacy and health care organizations are located in state capitols, their leaders often are practicing

pharmacists/health care professionals who live and work outside of the capitol. For this elective course, several state and organizational leaders drove more than 2 hours to campus to speak to the students. All guest speakers expressed gratitude for the invitation to speak to the students due to a desire to increase student and new practitioner involvement in pharmacy organizations. Although student attendance at a meeting in which legislative issues were discussed was required, students unable to physically attend a meeting have been able to accomplish this virtually as the South Carolina Board of Pharmacy video records their meetings and streams them on the Internet. Students also had the opportunity to travel to other state pharmacy meetings not located in the capitol city.

Although law and regulatory issues already are addressed in required courses, the process of advocating for these laws and issues is not as prominent in the curriculum. Only a small number of students have completed the Pharmacy Political Advocacy elective compared to the number of students who have matriculated through the SCCP-Columbia campus. It would be ideal to begin incorporating more components of advocacy into the required law course. Lack of health policy education is not limited to the pharmacy profession. Delivery of health policy education also varies greatly among US medical schools and many have identified this as an area in which they must improve.⁸

While students' grades and responses suggest that the elective did increase student awareness of pharmacy-related legislation and promote advocacy for the profession, additional research is needed to measure the lasting impact of this elective. The impact that this elective and various other advocacy activities have on increasing new practitioner involvement in the South Carolina Pharmacy Association is focus of another study.

CONCLUSION

Involvement in a Pharmacy Political Advocacy elective increased students' awareness and knowledge of legislation that might affect the pharmacy profession. Students also demonstrated an increased knowledge of how to advocate for the pharmacy profession. As these students will be the future leaders of our profession, their interest in becoming more involved in pharmacy organizations in the future is encouraging. Colleges and schools of pharmacy could incorporate courses similar to this elective to promote advocacy for the profession.

ACKNOWLEDGEMENTS

The authors would like to thank Richard Schulz, PhD, for his contributions to this course and project.

REFERENCES

1. American Association of Colleges of Pharmacy, Center for the Advancement of Pharmaceutical Education (CAPE), Advisory Panel on Educational Outcomes. Educational Outcomes, revised version 2004. <http://www.aacp.org/resources/education/documents/CAPE2004.pdf>. Accessed July 18, 2011.
2. Accreditation Council for Pharmacy Education. Accreditation standards and guidelines for the professional program in pharmacy leading to the doctor of pharmacy degree. <http://www.acpe-accredit.org/pdf/FinalS2007Guidelines2.0.pdf>. Accessed July 18, 2011.
3. Joint Commission of Pharmacy Practitioners. Future Vision of Pharmacy Practice. <http://www.aacp.org/resources/historicaldocuments/Documents/JCPPFutureVisionofPharmacyPracticeFINAL.pdf>. Accessed August 15, 2011.
4. Jungnickel PW, Kelley KW, Hammer DP, et al. AACP curricular change summit supplement: addressing competencies for the future in the professional curriculum. *Am J Pharm Educ.* 2009;73(8):Article 156.
5. Smith K, Hazlet TK, Hammer DP, Williams DH. “Fix the law” project: an innovation in students’ learning to affect change. *Am J Pharm Educ.* 2004;68(1):Article 18.
6. Boyle CJ, Beardsley RS, Hayes M. Effective leadership and advocacy: amplifying professional citizenship. *Am J Pharm Educ.* 2004;68(3):Article 63.
7. Bloom BS, ed. *Taxonomy of Educational Objectives. The Classification of Educational Goals. Handbook I: Cognitive Domain.* New York, NY: McKay, 1956.
8. Mou D, Sarma A, Sethi R, Merryman R. The state of health policy education in U.S. medical schools. *N Engl J Med.* 2011;364(10):e19.

Appendix 1. Grading Rubric for Class Participation in a Pharmacy Political Advocacy Elective

Class Participation Rubric				
	4	3	2	1
Interaction/participation in group discussion	Always a willing participant; Responds frequently to questions; Routinely volunteers point of view	Often a willing participant; Responds occasionally to questions; Occasionally volunteers point of view	Rarely a willing participant; Rarely able to respond to questions; Rarely volunteers point of view	Never a willing participant; Never able to respond to questions; Never volunteers point of view
Listening skills	Listens when others talk; Incorporates or builds off the ideas of others	Listens when others talk	Does not listen when others talk.	Does not listen when others talk. Often interrupts when others speak.
Preparation	Always prepared for class with assignments and required readings	Usually prepared for class with assignments and required readings	Rarely prepared for class with assignments and required readings	Never prepared for class with assignments and required readings
Attendance	Always prompt; Attends the entire class; Prepared to start on time	Late to class; Attends the entire class; Almost prepared to start on time	Late to class; Missed ≥ 30% of class; Not prepared to start on time	Late to class; Missed ≥ 60% of class; Not prepared to start on time
Behavior	Never displays disruptive behavior during class	Rarely displays disruptive behavior during class	Occasionally displays disruptive behavior during class	Almost always displays disruptive behavior during class

Appendix 2. Legislative presentation rubric for a pharmacy political advocacy elective.

Legislative Presentation Rubric				
	4	3	2	1
Organization	Student presented information in a logical, interesting sequence which audience could follow	Student presented information in a logical sequence which audience could follow	Audience had difficulty following presentation because student jumped around	Audience could not understand presentation because there was no logical sequence of information
Content knowledge	Student demonstrated full knowledge (more than required) with explanations and elaboration	Student was at ease with content, but failed to elaborate	Student was uncomfortable with information and was able to answer only rudimentary questions.	Student did not have grasp of information; student could not answer questions about subject
Graphics	Student used easy-to-read visuals to reinforce presentation with an appropriate amount of information per slide	Student used easy-to-read visuals to reinforce presentation but displayed too much information per slide	Visuals were difficult to read and/or displayed too much information per slide	Student used no visuals
Mechanics	Presentation had no misspellings or grammatical errors	Presentation had two to three misspellings and/or grammatical errors	Presentation had four to five misspellings and/or grammatical errors	Presentation had more than five spelling errors and/or grammatical errors
Eye contact	Student maintained eye contact with audience, seldom returning to notes	Student maintained eye contact most the time but frequently returned to notes	Student occasionally used eye contact, but still read most of the presentation	Student read all of presentation with no contact
Elocution	Student spoke clearly and correctly with precise pronunciation and appropriate volume	Student spoke clearly with most words pronounced correctly with acceptable volume	Audience had difficulty hearing presentation. Student pronounced some word incorrectly.	Student mumbled, pronounced many terms incorrectly, and spoke too softly to be heard by entire audience
Assignment	Student accurately completed all components of the assignment and included conclusions that reinforced the impact on the pharmacy profession	Student did not complete all components of the assignment but did include conclusions that reinforced the impact on the pharmacy profession	Student completed most components of the assignment but did not include conclusions that reinforced the impact on the pharmacy profession	Student did not complete all assignment components or provide conclusions that reinforced the impact on the pharmacy profession