Chapter-1 | Social Pharmacy

Introduction of Social Pharmacy

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Social pharmacy

Definition of Social Pharmacy:

The drug and medicine sector is studied from the social scientific and humanistic perspectives.

Social pharmacy consist of all the social factors that influence medicine use such as medicine and health related beliefs, attitudes, rules, relationship and processes.

OR

Social pharmacy may be defined as the discipline dealing with the role of medicines from the social, scientific and humanistic perspectives.

Scope of Social Pharmacy in Improving The Public Health

Health financing

In an effort to protect vulnerable populations from financial hardships, pharmacists ensure the provision of cost-effective health care through rational use of medical products and modern technologies. Majority of published studies have demonstrated the potential of pharmacists in substantially increasing health care savings across various settings, attributing such result to pharmacists' expertise in reducing and preventing medication-related problems and in providing cheaper alternatives or suggesting medicines that are covered by insurance.

Medical products, vaccines, and technologies

With an increasingly wide range of new and analogous medical products, vaccines, and technologies, the complexity of pharmacy practice continues to broaden. The roles of pharmacists are not only limited to medical products, but also include vaccines and medical devices, especially those that demand special knowledge with regard to uses and risks. Pharmacists, therefore, are responsible for ensuring the efficacy, integrity, and security of medical products, devices, and, vaccines to safeguard a patient's health.

Health services

As medicine experts, pharmacists hold the responsibility to deliver effective, safe, and quality medicines and services to achieve optimal health outcomes. Competency in their discipline and up-to-date knowledge, therefore, are pharmacists' core in tailoring information and advice to their patients.

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Health workforce

Well-performing pharmacists are responsive to patient's needs and preferences. In fact, involving patients in the health care decision-making process has shown greater satisfaction and reduced complaints to offered services. Given the paradigm shift from a product-oriented to a patient-centered pharmacy service, putting the interests of patients and treating them with dignity is a must.

Health information

As one of the most-accessible health care professionals, pharmacists are involved in health screening and surveillance programs - checking immunization status and detecting potential public health hazards. With reliable and timely health information, pharmacists support the development of the public health system and collectively reduce vulnerability to public health threats.

Leadership and governance

Pharmacists take part in public health policy development; linking disease prevalence and drug utilization, pharmacists enable development of effective health policies, as well as they allow disease prevention to be placed within a larger context. In addition, pharmacists contribute to the emergencies in terms of designing response plans and protocols, and they contribute to resource mobilization through optimization of medication use and distribution.

Private and public health care.

Time to time India provide the health care model regarding to the patient care and other manifestations.

India healthcare delivery system is categorized into two major components.

- 1. Private health care system
- 2. Public health care system.

Private health care system.

- Private health care system provide the all facilities regarding to the public health and full fill the public requirement and pay the appropriate amount of fee.
- In the private system new and improve quality equipment and hygienic system provide to the patient and also provided the proper and counsel medication by the pharmacists or nurses.
- Private sectors provide the suited aeration condition, proper ventilation, neat and clean places, for the patient and guardians.
- ➤ In the private sector, well-educated and trained medical professionals are diagnosed the patient and provide the personalized attention to the patient.
- > During the admit condition it provide the different facilities like (general ward, private ward, and special ward) accordance to our budget or fee payment.
- > Staffs (doctors, nurses, pharmacists) and workers are very active in private and timely checkup the patient conditions and provide the sufficient drug doses and treatment.
- > Private sectors provide the quick treatment during the emergency condition or trauma and also provide the successful surgery.

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Example of private health care system: — Multispecialty hospitals, nursing homes, private clinics, NGOs clinics or hospital.

In India: 43486 private hospitals, 1.18 million beds, 59264 ICUs and 29631 ventilators.

Note:—Total private infrastructure accounts for nearly 62% of all of India health infrastructure.

Public health care system.

- All people are not afford the high payment or fee so, the government open up new Public Health Care System to full fill the poor and needy persons need for their treatment.
- > These systems are very helpful in rural area.
- In public sector many advancement equipment and hygienic materials are provided by the government for the checkup and diagnosis of the patients.
- ➤ In public sector also appointed well educated and trend medical professional (Doctors, Nurses, Pharmacists).
- ➤ In public system, medication and checkup facilities provide without any fee or payment.
- ➤ OPD and IPD systems are always open timely to timely and emergency ward are always open for curing of patients.
- ➤ In public health care primary, secondary, tertiary, facilities are provide according to the patient conditions and needs.
- Sovernment also provided the regular vaccination and separate the different department according to patients needs like (Cardiology department, ophthalmology department, oncology department, tuberculosis department, gynecology department).

In India: — 25778 public hospitals, 713986 beds, ICUs and 17850 ventilators.

Role of Pharmacists in Public Health

- 1. Review Prescriptions
- 2. Dispense Prescription / Non-Prescription Medicines
- 3. Provide Patient Counselling / Education
- 4. Hospital and Community Pharmacy Management
- 5. Expertise on Medications
- 6. Proficiency on drugs / pharmaceuticals
- 7. Entrepreneurship and Leadership
- 8. Deliver Primary and Preventive Healthcare
- 9. Professional, Ethical and Legal Practice
- 10. Continuing Professional Development
- **1. Review Prescriptions:** The student should receive and handle prescriptions in a professional manner and be able to check for their completeness and correctness. Also, the prescribers should be contacted for any clarifications and corrections in the prescriptions with suggestions if any.

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- **2. Dispense Prescription / Non-Prescription Medicines:** The student should be able to dispense the various scheduled drugs / medicines as per the implications of the Drug & Cosmetics Act and Rules thereunder. Also, the non-prescription medicines (over-the-counter drugs) should be dispensed judicially to the patients as required.
- **3. Provide Patient Counselling / Education:** The student should be able to effectively counsel / educate the patients / caretakers about the prescription / nonprescription medicines and other health related issues. Effective communication includes using both oral and written communication skills and various communication techniques.
- **4. Hospital and Community Pharmacy Management:** The student should be able to manage the drug distribution system as per the policies and guidelines of the hospital pharmacy, good community pharmacy practice and the recommendations of regulatory agencies. Also, be able to manage the procurement, inventory, and distribution of medicines in hospital / community pharmacy settings.
- **5. Expertise on Medications:** The student should be able to provide an expert opinion on medications to health care professionals on safe and effective medication-use, relevant policies and procedures based on available evidences.
- **6. Proficiency on Pharmaceutical Formulations:** The student should be able to describe the chemistry, characteristics, types, merits and demerits of both drugs and excipients used in pharmaceutical formulations based on her/his knowledge and scientific resources.
- **7. Entrepreneurship and Leadership:** The student should be able to acquire the entrepreneurial skills in the dynamic professional environments. Also, be able to achieve leadership skills through teamwork and sound decision- making skills.
- **8. Deliver Primary and Preventive Healthcare:** The student should be able to contribute to various healthcare programs of the nation including disease prevention initiatives to improve public health. Also contribute to the promotion of national health policies.
- **9. Professional, Ethical and Legal Practice:** The student should be able to deliver professional services in accordance with legal, ethical, and professional guidelines with integrity.
- **10. Continuing Professional Development:** The student should be able to recognize the gaps in the knowledge and skills in the effective delivery of professional services from time to time and be self-motivated to bridge such gaps by attending continuing professional development programs.

Concept of Health

WHO Definition:- A condition or quality of the human organism expressing the adequate functioning of the organism in given conditions, einetic or environmental.

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Health is a state of complete physical, mental and social wellbeing and not merely an absence of disease or infirmity and the ability to lead a socially and economically productive life.

Various Dimensions/Type of health:

The concept of Health refers to many Types or dimensions such as-

1. Physical Health Dimensions:

- It is defined as state in which every cell and every organ is functioning at optimum capacity and imperfect harmony with the rest of the body.
- It refers to perfect functioning of body.
- It indicate that all body organ are structurally and functional in a normal state and their the organ and organ systems.

2. Mental health Dimensions:

Mental Health has been defined as "a state of balance between the individual and the surrounding world, a state of harmony between oneself and others, a coexistence between the realities of the self and that of other people and that of the environment".

3. Social Health Dimensions:

Social wellbeing implies "Quality and quantity of an individuals interpersonal ties and the extent of involvement with the community".

The social health consider the endive member of society and his health status in relation to social conditions of the social group and which he life.

4. Spiritual Health:

Spiritual health in this context, refers to that part of the individual which reaches out and strives for meaning and purpose in life.

5. Emotional (Initially mental and emotional dimensions were seen one in the same thing but as more research becomes available a definite difference is emerging. Mental health can be seen as "Knowing"

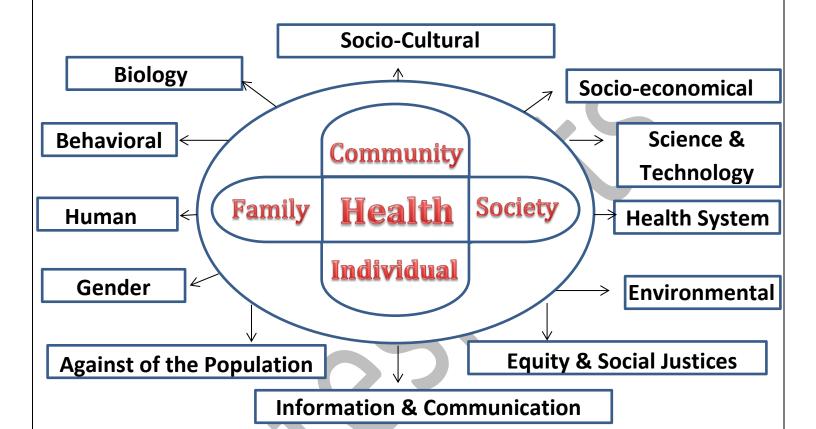
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"Cognition", while Emotional health refers to "Feeling"

6. Other Dimensions include Philosophical, Cultural, Socioeconomic, environmental, educational, nutritional, curative and preventive.

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Determinants of Health:



Health dose not exists in isolation. It can be influenced by many factor lie with in individual & society this factor interact & can promote or Determinants the Health of the induvial of community.

Type of indicators:

A number of indicator are used for the assessment of health the important indicator of health are.

- > Mortality
- > Morbidity Indicator
- > Disability Rate
- Nutritional status Indicator(Sulvian's Index)
- ➤ Health care delivery Indicator
- Utilization rates Indicator
- > Social and Mental health Indicator
- **Environmental**
- > Socio-economic

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- > Health Policy
- > Indicators of Quality of life

National Health Policy - Indian perspective

- **Health policy** Health policy of a nation is its strategy for controlling and optimizing the social uses of its health knowledge of intended objectives. The main aim of health policy is decide or complete physical health, mental health, social health.
- Due to changing our nation conditions like population growth, pollutions, new disease conditions we are not insure our development so Ministry of Health release the various health programs and commitment to achieving the goal of happiness or developed nation.
- The slogan Health for (HFA) All was given by the world health organization (WHO) in year 1977(May).
- The WHO has established 12 global indicators as the basic point of reference for assessing the progress towards HFA
- The joint WHO- UNICEF international conference in 1978 at Alma-Ata (USSR) declared that.
- The existing gross inequalities in the status of health of people particularly between developed and developing countries as well as within the countries is politically, socially, and economically unacceptable.
- The Alma-Ata (Almaty) declaration of 1978 emerged as a major milestone of the twentieth century in the field of public health and it identified primary health care as the key to the attainment of the goal of Health for All around the globes.
- It is the first international declaration on primary health care (PHC) in Kazakhstan.

Three National Health Policy was launched by the Ministry of health and family welfare.

- 1. First National Health Policy(1983)
- 2. Second National Health Policy(2002)
- 3. Third National Health Policy(2017)

National Health Policy (NHP) 2017

- The NHP-2017 was launched by the Ministry of Health and Family Welfare on March 15,2017.
- In this policy the focus of the government will shift from care of the sick to welfare of the sick. This is the third NHP government of India.
- The main goal of the NHP 2017 as follows.
- To bring down the mortality rate of children under five years 29(2015) to 23(2025) per thousand live birth.
- To bring the total fertility rate (TFR) to 2.1 and reducing the Maternal mortality rate (MMR) 167 to 100(2025).
- Target to increase life span from 67.5 to 70 years by 2025 and increase health expenditure from 1.51% of GDP at present to 2.5% by 2025.
- Reducing the IMR (infant mortality rate) from 34 (IN 2016) to 28 (IN 2019) and also the reducing Neonatal mortality rate from 28 to 16(IN 2025).

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- Aim to reduce by 25% premature mortality from disease such as heart disease, chronic respiratory diseases.
- Eliminate the leprosy by the year 2018, Kala-azar by the year 2017 and lymphatic filariasis by the year 2017. Reduction the rate of tuberculosis by 85% and eliminate the tuberculosis by the year in 2025.
- Aim to achieve 90% of children born by or under the supervision of trained midwives /nurses by the year 2025 and completely immunization of 90% of children of one year age.
- To reduce the incidence of occupational injury by 50% by the year 2020. At the present this rate is 334 per lakh workers in agricultural sectors.
- By the year 2020, states will have to 8% of their budget on health service.
- To reduce the current prevalence of tobacco use by 15% by 2020 and by 30% by 2025.

Millennium Development Goals

• The Millennium Development Goals (MDGs) are eight goals to be achieved by 2015 that respond to the world's main development challenges. The 8 MDGs break down into 18 quantifiable targets that are measured by 48 indicators. This article comprehensively provides all the details pertaining to Millenium Development Goals (MDGs).

All 191 United Nations member states, and at least 22 international organizations, committed to help achieve the following Millennium Development Goals by 2015:

- To eradicate extreme poverty and hunger
- To achieve universal primary education
- To promote gender equality and empower women
- To reduce child mortality
- To improve maternal health
- To combat HIV/AIDS, malaria, and other diseases
- To ensure environmental sustainability
- To develop a global partnership for development

Sustainable Development Goals (SDGs)

- The Sustainable Development Goals (SDGs), also known as the Global Goals, were adopted by the United Nations in 2015 as a universal call to action to end poverty, protect the planet, and ensure that by 2030 all people enjoy peace and prosperity.
- The 17 SDGs are integrated—they recognize that action in one area will affect outcomes in others, and that development must balance social, economic and environmental sustainability.
- The 17 SDGs are:
- 1. No Poverty,
- 2. Zero Hunger,

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- 3. Good Health and Well-being,
- 4. Quality Education,
- 5. Gender Equality
- 6. Clean Water and Sanitation
- 7. Affordable and Clean Energy
- 8. Decent Work and Economic Growth
- 9. Industry, Innovation and Infrastructure
- 10. Reducing Inequality
- 11. Sustainable Cities and Communities
- 12. Responsible Consumption and Production
- 13. Climate Action
- 14. Life Below Water
- 15. Life On Land
- 16. Peace, Justice, and Strong Institutions
- 17. Partnerships for the Goals.

FIP Development Goal (International Pharmaceutical Federation):

- Engagement with pharmaceutical higher education development policies and ready access to leaders in
- all sectors of pharmacy practice and pharmaceutical science in order to support supply-side workforce development agendas.
- Increase the capacity to provide a competent pharmaceutical workforce by developing initial education and training programmes that are fit for purpose, according to national health resource needs (clinical practice, pharmaceutical science areas and stakeholders across all cadres)
- The Foundation's objectives are to promote the education of, and research by pharmacists and pharmaceutical scientists within the general fields of design, manufacture, distribution and use of medicines for humans and/or animals.
- The FIP Foundation for Education and Research was set up in 1993 with a programme of grants and awards. In addition to the Awards in Recognition of Excellence, the FIP Foundation also makes available FIP Development Grants to young pharmacists in training or research, FIP International Travel Scholarships and FIP Fellowships. In 1997 it introduced the Young Poster Presenter's Awards, which are given to a number of people who have submitted abstracts for the FIP Congress, which have been screened and approved by either the scientific or professional secretary.

National health mission.

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National health mission (NHM) was launched by the government of India in 2013 subsuming the National Rural Health Mission and National Urban Health Mission. It was further extended in March 2018, to continue till March 2020.

Due to the poor knowledge and sources (mainly rural) some people are not able to take the government facilities. For releasing this problem government introduce the new programs (NHM one of them) to full fill the requirement and improve the health of the needy person.

NHM components include the – Maternal health, Neonatal-child health, Reproductive health, Adolescence health, and against any disease (Tuberculosis, cardio etc.)

NHM facilities are reached to the people by advertisement, posters, radio, socials media and by newspaper etc.

AIM OF NHM—

- > Improve the health conditions of the people.
- > Awareness about Adolescence and bad habits.
- > Prevention against disease.
- > Improve hygienic condition.
- Aware about the natural sources.
- Maintenance of population growth.
- > Provide the all facilities to required persons
- > On the basis of development NHM are divided into two parts—
- National Rural Health Mission.
- National Urban Health Mission.

National Rural Health Mission (NRHM)

NHRM was launched in 12 April 2005, to address the health needs of the undeserved rural population especially women, children, vulnerable sections of the society and to provide affordable, accessible and quality healthcare.

In NRHM Ayush (Ayurveda, Yoga, Siddhi, and Unani and Homeopathic) for promotion of healthy life style.

National Urban Health Mission (NUHM)

The NUHM was launched in May 2013 and was subsumed with NRHM as a sub- mission of the overarching National Health Mission.

NUHM seeks to improve the health status of the urban population particularly urban poor and other vulnerable sections by facilitating their access to quality primary health.