

Using social marketing to improve appropriate antibiotic use amongst 15-18 year olds: an international project. England Preliminary Findings.

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BACKGROUND INFORMATION

Patient over-expectation for antibiotics and inappropriate use may be due to misunderstanding and lack of knowledge about use. Surveys show that 15 – 24 year olds were the least informed and highest users of antimicrobials¹, but were the most likely to change their minds on antibiotic use after receiving information about it. This poster focuses on the behavioural findings of the audience research in the UK, as part of the social marketing approach.

SOCIAL MARKETING FRAMEWORK

The Social Marketing Framework aims to motivate exchange of behaviour to improve health outcomes².

Audience research was undertaken to decide the marketing mix in each country.

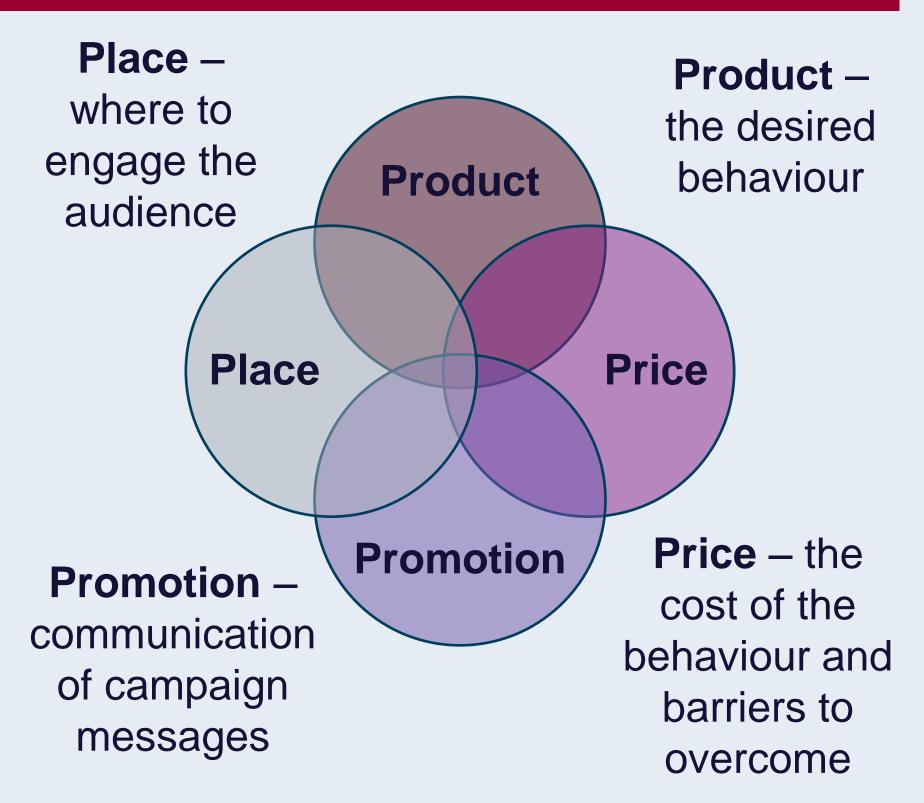


Figure 1. The Marketing Mix

AIMS & METHODS

The UK, France, Cyprus and Saudi Arabia used the social marketing framework to inform the development of a resource for 15-18 year olds to improve awareness and appropriate use of antibiotics.

Project Aims

- 1. Determine the most appropriate educational venues.
- 2. Research young adults' attitudes towards antibiotic use.
- 3. Research approaches that are effective in changing attitudes to antibiotic use and behaviours in young adults.
- 4. Develop an educational resource using the social marketing framework to facilitate behaviour change to help contain AMR

Work Package 1: A detailed review of the educational structure and information on antibiotics, to determine the most appropriate implementation strategy in the educational environment.

Work Package 2: Qualitative investigation into knowledge and attitudes of students and educators toward antibiotics was then undertaken. Thematic analysis of the data was conducted.

English Sample

• 74 students participated: 21 student interviews and 7 focus groups with a total of 53 students, at 7 schools in the South of England. 8 educators from 5 schools participated.

PRELIMINARY FINDINGS: ENGLAND Not finishing the full course of antibiotics Taking antibiotics for respiratory tract infections Peer Group Views "They just think it's Some Think young people "He wasn't sure whether it just like any other students have shouldn't have to was viral or bacterial so medicine that they difficulty worry about AMR he gave me antibiotics. are taking." swallowing Think it is After the first week I was Male student, Sixth form "Because they just Antibiotics tablets 'normal' to not still not better, but then think they're better seen as a finish the after the second week I **Antibiotics** now, so what's the 'cure all' like was, so taking them must course are not point in taking them?" painkillers work" interesting Female student, Sixth form Female student, FE College or relevant Some stop early to Easy to get drink from the GP alcohol or - some Low knowledge they feel expect Low knowledge about why they Aring antibiotics antibiotics about the difference should finish course between viruses and AMR. and bacteria. Don't like taking Personal medication, think it Students don't experience of taking will weaken their antibiotics for RTI take antibiotics immune system Thought that the following believe they work or stop early were 'serious' conditions: because of the chest infection, tonsillitis, side effects laryngitis, sinus infection "A lot of young people Feel that GPs don't explain and chesty cough have so much on their Some confuse Have difficulty why they should finish the plate, so they forget" painkillers and communicating course and students are not Female student, FE College antibiotics with GPs taught why at school

IMPLICATIONS – Not finishing the full course

- Information should focus on personal responsibility and what an individual can do to help prevent AMR and the collective responsibility we have to safeguard antibiotics for the future.
- The campaign should give suggestions to help students remember to take their antibiotics, e.g. setting reminders on their phone or associating the tablets with part of their daily routine. Also include what to do if you forget to take a tablet and how to catch up with your course.
- · Include information on drinking alcohol and antibiotics.

IMPLICATIONS – Taking antibiotics for RTIs

- GPs are expected to give students treatment for RTIs, especially if they have had antibiotics for the same illness before or they feel the illness is 'serious'.
- Information should cover why antibiotics are not always appropriate, and how to manage their symptoms.
- Students expect help or advice if prescribed treatment isn't suitable, so if antibiotics are not necessary this should be explained in a way that students understand otherwise this can be misunderstood as the GP being unhelpful.

REFERENCES

1. Directorate General for Health and Consumers, 2010. Special Eurobarometer 338: 'Antimicrobial Resistance'. TNS Opinion and Social: Belgium 2. Edgar T, Boyd SD & Palame MJ. 2009. Sustainability for behaviour change in the fight against antibiotic resistance: a social marketing framework. *JAC* 63:230-237.