

CONTENTS

Abstract	i
Declaration	iii
Acknowledgements	iv
Contents	v
List of figures	ix
List of tables	x
List of extracts	xi
CHAPTER 1: INTRODUCTION.....	1
CHAPTER 2: HIV/AIDS AND ADHERENCE.....	8
2.1 HIV/AIDS: CURRENT STATUS IN SOUTH AFRICA.....	8
2.2 HEALTH CARE IN SOUTH AFRICA.....	9
2.3 ADHERENCE AND HIV.....	11
2.3.1 Adherence, compliance and concordance.....	12
2.3.2 Barriers to adherence to ARVs.....	13
2.3.3 Adherence studies in South Africa.....	17
2.3.4 Stigma, disclosure and adherence.....	18
2.3.5 Measurement of adherence.....	21
2.3.6 Communication and language issues in adherence.....	22
2.4 SUMMARY OF CHAPTER.....	25
CHAPTER 3: PHARMACISTS AND PATIENTS: BACKGROUND INFORMATION	26
3.1 THE TSWANA.....	26
3.1.1 Tribe structure.....	26
3.1.2 Family structure and kinship.....	28
3.1.3 Spirituality.....	30
3.1.4 Disease and healing.....	30
3.1.5 History of the tribe.....	31
3.2 THE WORK OF THE PHARMACIST.....	35
3.2.1 History of the profession of pharmacy in South Africa.....	35
3.2.2 Training of pharmacists.....	36
3.2.3 The ‘professional obligation’ of the pharmacist.....	38
3.2.4 The pharmacist’s role in HIV/Aids.....	39
3.3 CULTURAL ISSUES IN PHARMACY PRACTICE.....	41
3.3.1 Cultural barriers.....	41
3.3.2 Culture and traditional medicine.....	43
3.3.3 Cross-linguistic pharmaceutical care.....	46
3.3.4 Health communication and the pharmacist.....	48
3.4 SUMMARY OF CHAPTER.....	49
CHAPTER 4: AN OVERVIEW OF HEALTH COMMUNICATION RESEARCH AND MEDICAL SOCIOLOGICAL CONCEPTS	51
4.1 HEALTH COMMUNICATION RESEARCH: A BRIEF OVERVIEW.....	51
4.2 COMMUNICATION RESEARCH IN PHARMACY SETTINGS.....	55
4.2.1 Overview.....	55
4.2.2 Pilnick’s study.....	56
4.2.3 Salter’s study.....	60
4.3 PREVIOUS RESEARCH CONDUCTED AT RUSTENBURG HOSPITAL.....	61
4.4 CONCEPTS AND THEORIES FROM MEDICAL SOCIOLOGY.....	62
4.4.1 Mishler’s Voices of Medicine and the Lifeworld.....	62
4.4.2 Power and asymmetry in medical encounters.....	65

4.4.3	Agendas and control	67
4.4.4	Ecological models of health communication	69
4.5	SUMMARY OF CHAPTER	75
CHAPTER 5: METHODOLOGY		77
5.1	OVERVIEW	77
5.2	AIMS	78
5.3	RESEARCH DESIGN	79
5.3.1	Why choose qualitative research?	79
5.3.2	Research design.....	81
5.4	THE RESEARCH SETTING	82
5.5	PARTICIPANTS	83
5.5.1	Sample size	83
5.5.2	Sampling of Participants.....	83
5.6	ETHICAL CONSIDERATIONS	85
5.6.1	Identification of risks involved in participation in the study	85
5.6.2	Obtaining consent from patients.....	86
5.6.3	Ethical dilemmas.....	88
5.6.4	Confidentiality	90
5.7	DATA COLLECTION.....	90
5.7.1	The research assistant	91
5.7.2	Ethnographic, participant observation.....	91
5.7.3	Video recording of interactions	94
5.7.4	Semi-structured interviews	95
5.8	DATA TREATMENT	98
5.8.1	Transcription of audio recorded interviews with participants	98
5.8.2	Transcription of verbal elements in the interactions.....	98
5.8.3	Transcription of non-verbal elements in the interactions	99
5.8.4	Reliability of transcription and translation.....	101
5.9	THEORETICAL BACKGROUND.....	102
5.9.1	Defining macro and micro	103
5.9.2	Why include context?	104
5.9.3	Theoretical background to the study	107
5.9.4	Theoretical background to Conversation Analysis (CA).....	108
5.9.5	Theoretical background to Discourse Analysis (DA)	111
5.9.6	Combining different approaches	114
5.9.7	Application of a combined approach to institutional interactions	115
5.10	DATA ANALYSIS	116
5.10.1	The method of Conversation Analysis (CA)	117
5.10.2	The method of Thematic Content Analysis (TCA).....	118
5.10.3	The method of Discourse Analysis (DA).....	119
5.10.4	Theme-oriented discourse analysis	120
5.10.5	The process of micro analysis	120
5.10.6	The process of macro analysis and the inclusion of contextual information	125
5.11	ENSURING RIGOROUS QUALITATIVE RESEARCH.....	128
5.12	FEEDBACK	130
5.13	SUMMARY OF CHAPTER	130
CHAPTER 6: ARVS AT RUSTENBURG WELLNESS CLINIC: ETHNOGRAPHIC BACKGROUND INFORMATION		132
6.1	DESCRIPTION OF SETTING	132
6.1.1	Rustenburg Provincial Hospital.....	132
6.1.2	RPH Wellness Clinic	135
6.1.3	RPH Wellness Clinic Pharmacy.....	136
6.1.4	Ethnographic description of the Wellness Clinic Pharmacy.....	138
6.2	DESCRIPTION OF PARTICIPANTS	145
6.2.1	Pharmacists	145
6.2.2	Patients	146

6.3	INFORMATION ABOUT ARVS AND REGIMENS	150
6.3.1	What are ARVs?	150
6.3.2	What is the referral process and how do patients obtain ARVs?.....	151
6.3.3	When should a patient begin ART?.....	153
6.3.4	Who tells the patient about ARVs?	154
6.3.5	How often does the patient visit the Clinic or Pharmacy?.....	154
6.3.6	How should ARVs be taken?.....	154
6.3.7	What level of adherence is required?	155
6.3.8	Generics.....	156
6.3.9	Side effects	156
6.3.10	Adult ARV Regimens.....	158
6.3.11	Paediatric ARV Regimens.....	160
6.4	INFORMATION THAT PATIENTS NEED TO UNDERSTAND ABOUT ARVS.....	166
6.4.1	Adult regimens.....	166
6.4.2	Paediatric regimens.....	167
6.5	ADHERENCE PRACTICES AT RPH.....	168
6.5.1	Pharmacists' views on adherence.....	168
6.5.2	Adherence support tools used in the Wellness Pharmacy	169
6.5.3	Adherence strategies used in the Wellness Pharmacy	170
6.5.4	Verification of patients' adherence behaviours.....	175
6.5.5	Disclosure and adherence	179
6.5.6	Factors which may jeopardise adherence.....	181
6.6	SUMMARY OF CHAPTER	182

CHAPTER 7: LINGUISTIC AND COMMUNICATIVE ASPECTS OF THE PHARMACIST-PATIENT INTERACTION184

7.1	ORGANISATION OF THE PHARMACIST-PATIENT INTERACTION	185
7.1.1	Content of the pharmacist-patient interactions.....	185
7.1.2	Structure of the pharmacist-patient interactions	189
7.2	EXPLANATIONS AND INSTRUCTIONS.....	203
7.2.1	Stipulation of agenda	204
7.2.2	Demarcation of ARVs from other drugs	206
7.2.3	Explanation of dosage instructions for ARVs and other medications.....	208
7.2.4	Provision of additional information.....	210
7.2.5	Use of analogies	217
7.2.6	Repetition and summation of information.....	218
7.3	NON-VERBAL BEHAVIOURS, VISUAL DEMONSTRATION AND USE OF PROPS.....	224
7.3.1	Visual demonstration and props	224
7.3.2	Gesture	232
7.3.3	Body posture	235
7.3.4	Emphasis of information and instructions.....	236
7.3.5	Eye gaze	237
7.4	CHECKING UNDERSTANDING	245
7.4.1	Strategies used to verify patients' understanding of ARV instructions.....	245
7.4.2	Evidence of comprehension of instructions	256
7.5	REPAIR SEQUENCES AND STRATEGIES.....	263
7.5.1	Patient-initiated repairs	263
7.5.2	Pharmacist-initiated repairs	265
7.5.3	Subtle misunderstandings, failed repairs and awkward moments	266
7.6	CODE SWITCHING	278
7.6.1	Code switching by pharmacists and patients.....	278
7.7	INTERPRETERS	291
7.7.1	The use of interpreters by pharmacists and patients	291
7.8	FACILITATORS AND BARRIERS TO COMMUNICATION	305
7.8.1	Facilitative strategies	307
7.8.2	Potential barriers to communication.....	314
7.8	SUMMARY OF CHAPTER	319

CHAPTER 8: TOWARDS A MODEL OF CONCORDANCE IN THE PHARMACY	321
8.1 SIDE EFFECTS AND THE EXPERIENCE OF BEING ILL	323
8.1.1 Discovering the status of ‘HIV positive’	324
8.1.2 Side effects from ARVs	327
8.1.3 Consequences of being ill	335
8.2 PRESSURES AND ANXIETIES	336
8.2.1 Pressures experienced by patients	337
8.2.2 Pressures experienced by pharmacists	346
8.3 CREATING RAPPORT AND ENCOURAGING COLLABORATION	373
8.3.1 Rapport	374
8.3.2 Promoting Collaboration	384
8.4 VOICES: MEDICINE AND THE LIFEWORLD	397
8.4.1 Mutual Lifeworld	399
8.4.2 Lifeworld Ignored by Patients	402
8.4.3 Strictly Medicine	404
8.4.5 Reasons for Lifeworld Ignored by Patient and Strictly Medicine	409
8.5 SUMMARY OF CHAPTER	414
CHAPTER 9: CASE STUDIES	416
9.1 AARON: THE CASE OF A DEFAULTER	416
9.2 MARY AND JAMES: THE BURDEN OF CARE	434
9.3 MARTHA: THE ASSERTIVE PATIENT	447
9.4 SOLLY: THE IMPACT OF HIV/AIDS ON THE PHARMACIST-PATIENT INTERACTION	457
9.4.1 Life, death and hope: references to ARVs	458
9.4.2 Pharmacists’ communication style – is this condescending?	462
9.5 SUMMARY OF CHAPTER	471
CHAPTER 10: GENERAL DISCUSSION AND CONCLUSION	472
10.1 DISCUSSION OF THE FINDINGS	472
10.2 IMPLICATIONS FOR PHARMACISTS AND OTHER HEALTH PROFESSIONALS	476
10.3 RESEARCH METHODOLOGY	483
10.4 IMPLICATIONS FOR DRUG MANUFACTURERS	486
10.5 FINAL REFLECTIONS	488
REFERENCES	490
APPENDICES	525
APPENDIX 1: ETHICAL CLEARANCE FORM	525
APPENDIX 2: INFORMATION SHEETS AND CONSENT FORMS	526
APPENDIX 3: QUESTION SCHEDULES FOR INTERVIEWS	531
APPENDIX 4: TRANSCRIPTION CONVENTIONS	534
APPENDIX 5: RPH ARV GUIDELINES (BASED ON NATIONAL GUIDELINES)	537
APPENDIX 6: YELLOW DIARY CARDS (ADHERENCE SUPPORT TOOL)	539
APPENDIX 7: MEDICATION LABELS	541
APPENDIX 8: ADHERENCE-PROMOTING POSTERS	542
APPENDIX 9: DRUG INFORMATION SHEET FOR PATIENTS	544
APPENDIX 10: STOCRIN BOOKLET	545
APPENDIX 11: POSTERS TO EXPLAIN HIV-RELATED CONCEPTS	546

LIST OF FIGURES

Figure 1: Map of Rustenburg, South Africa	27
Figure 2: Map of the Rustenburg area	27
Figure 3: Street's (2003) ecological model of communication in medical encounters	71
Figure 4: Street et al.'s (2007) model of potential influences on physician's communication.....	71
Figure 5: Chick's (1990, as cited in Chick, 1995) negative cycle of socially created discrimination	72
Figure 6: Ecological model of potential influences on pharmacist-patient communication	76
Figure 7: The process of analysis.....	127
Figure 8: Diagram illustrating the layout of Rustenburg Provincial Hospital	142
Figure 9: Diagram illustrating the layout of Rustenburg Provincial Hospital Wellness Clinic	143
Figure 10: Diagram illustrating the layout of Rustenburg Provincial Hospital Wellness Clinic Pharmacy	144
Figure 11: RPH Wellness Clinic Referral Process.....	151
Figure 12: Department of Health Adult HIV Management Flowchart	152
Figure 13: Distinct cycle in the pharmacist-patient interaction	202

LIST OF TABLES

Table 1: Biographical information for patients included in the study	147
Table 2: Regimen 1A	159
Table 3: Regimen 1B	159
Table 4: Regimen 2	160
Table 5: Paediatric Regimen 1A	163
Table 6: Paediatric Regimen 1AZ.....	164
Table 7: Paediatric Regimen 2	165
Table 8: Potential Facilitators of Communication	308
Table 9: Potential Barriers to Communication.....	315

LIST OF EXTRACTS

Extract 001: Patient 26 (lines 11-14)	170
Extract 002: Patient 12 (lines 77-80)	170
Extract 003: Patient 13 (lines 88-93)	171
Extract 004: Patient 9 (lines 161-166)	172
Extract 005: Patient 24 (lines 53-54)	172
Extract 006: Patient 13 (lines 64-71)	173
Extract 007: Patient 7 (lines 88-89)	174
Extract 008: Patient 6 (lines 150-152)	174
Extract 009: Patient 19 (line 132)	174
Extract 010: Ph B interview	175
Extract 011: Patient 2 (lines 1-14)	176
Extract 012: Patient 1 (lines 12-22)	178
Extract 013: Patient 23 (lines 10-21)	179
Extract 014: Patient 8 interview	180
Extract 015: Patient 13 (lines 96-97, 107-112)	180
Extract 016: Patient 7 interview	181
Extract 017: Patient 12 (lines 2-5)	189
Extract 018: Patient 6 (lines 57-58, 74-76, 122-123).....	192
Extract 019: Patient 10 (lines 190-193)	194
Extract 020: Patient 22 (lines 126-130)	194
Extract 021: Patient 19 (lines 198-200)	195
Extract 022: Patient 11 (lines 87-90)	196
Extract 023: Patient 17 (lines 200-217)	198
Extract 024: Patient 11 (line 83)	204
Extract 025: Patient 18 (line 101)	204
Extract 026: Patient 18 (lines 1, 11, 74, 92, 179, 207, 209, 241, 251, 312).....	205
Extract 027: Patient 14 (lines 66-68)	206
Extract 028: Patient 11 (lines 83-87, 97-102)	206
Extract 029: Patient 7 (line 48)	207
Extract 030: Patient 10 (line 158)	207
Extract 031: Patient 19 (lines 57-62, 66-73)	208
Extract 032: Patient 14 (lines 90-92)	209
Extract 033: Patient 15 (lines 87-90)	209
Extract 034: Patient 22 (lines 15-17, 44, 99-100)	210
Extract 035: Patient 19 (lines 8-12, 35-36)	211
Extract 036: Patient 18 (lines 216-230)	211
Extract 037: Patient 12 (lines 26-31)	212
Extract 038: Patient 7 (lines 56-57)	214
Extract 039: Patient 18 (lines 196-200)	214
Extract 040: Patient 1 (lines 54-61)	215
Extract 041: Patient 5 (lines 45-49)	215
Extract 042: Patient 19 (lines 198-203)	216
Extract 043: Patient 20 (lines 140-152)	216
Extract 044: Patient 7 (lines 95-96)	217
Extract 045: Patient 16 (line 4)	217
Extract 046: Patient 17 (lines 297-299, 303-305)	218

Extract 047: Patient 11 (lines 114-137)	219
Extract 048: Patient 5 (lines 18-23)	222
Extract 049: Patient 17 (lines 211-217, 233-237)	222
Extract 050: Patient 11 (lines 178-189)	226
Extract 051: Patient 5 (lines 25-28)	228
Extract 052: Patient 14 (lines 152-156)	229
Extract 053: Patient 7 (lines 114-119)	230
Extract 054: Patient 13 (lines 312-317, 319-322)	231
Extract 055: Patient 11 (line 91)	233
Extract 056: Patient 11 (lines 127-128)	234
Extract 057: Patient 26 (lines 31-32)	235
Extract 058: Patient 7 (lines 112-114)	236
Extract 059: Patient 11 (lines 101-102)	236
Extract 060: Patient 18 (lines 233-234)	237
Extract 061: Patient 14 (lines 128-130, 189-194)	239
Extract 062: Patient 18 (lines 163-164, 168-176, 179-184)	241
Extract 063: Patient 11 (lines 142-144, 189-191)	246
Extract 064: Patient 8 (lines 40-46)	247
Extract 065: Patient 18 (lines 190-196)	247
Extract 066: Patient 21 (lines 172-173, 176-179)	248
Extract 067: Patient 25 (lines 162-164)	248
Extract 068: Patient 11 (lines 201-208)	249
Extract 069: Patient 14 (lines 168-172)	250
Extract 070: Patient 13 (lines 115-119)	251
Extract 071: Patient 12 (lines 61-74)	253
Extract 072: Patient 22 (lines 101-106)	254
Extract 073: Pharmacist B interview	255
Extract 074: Pharmacist E interview	255
Extract 075: Patient 2 interview	256
Extract 076: Patient 3 interview	257
Extract 077: Patient 4 interview	257
Extract 078: Patient 5 interview	257
Extract 079: Patient 19 interview	258
Extract 080: Patient 24 interview	258
Extract 081: Patient 22 interview	258
Extract 082: Patient 9 interview	259
Extract 083: Patient 6 interview	260
Extract 084: Patient 7 interview	260
Extract 085: Patient 2 interview	260
Extract 086: Patient 18 interview	261
Extract 087: Patient 11 (lines 109-118)	264
Extract 088: Patient 9 (lines 4-8)	266
Extract 089: Patient 14 (lines 189-190)	266
Extract 090: Patient 15 (lines 53-74)	268
Extract 091: Patient 10 (lines 164-178)	271
Extract 092: Patient 7 (lines 59-89)	274
Extract 093: Pharmacist B interview	280
Extract 094: Patient 11 (lines 146-153)	281

Extract 095: Patient 6 (lines 88-92)	282
Extract 096: Patient 7 (lines 95-96)	282
Extract 097: Patient 2 (lines 14-15)	283
Extract 098: Patient 9 (lines 201-208)	284
Extract 099: Patient 3 (lines 26-27, 31-37)	285
Extract 100: Patient 5 (lines 124-129)	287
Extract 101: Patient 21 interview	288
Extract 102: Patient 21 (lines 71-80)	289
Extract 103: Pharmacist B interview	291
Extract 104: Patient 3 (lines 7-16)	294
Extract 105: Patient 3 (lines 24-29, 39-51)	295
Extract 106: Patient 9 (lines 58-61)	297
Extract 107: Patient 9 (lines 170-193)	299
Extract 108: Patient 16 (lines 59-64)	302
Extract 109: Patient 24 (lines 56-63)	303
Extract 110: Patient 18 (lines 216-230, 235-241)	318
Extract 111: Patient 7 interview	324
Extract 112: Patient 10 interview (caregiver)	324
Extract 113: Patient 22 interview	325
Extract 114: Patient 25 interview	325
Extract 115: Patient 9 interview	325
Extract 116: Patient 10 interview (caregiver)	326
Extract 117: Patient 26 interview	326
Extract 118: Patient 22 interview	326
Extract 119: Patient 9 interview	326
Extract 120: Patient 12 (lines 20-38, 103-122)	328
Extract 121: Patient 8 (lines 56-73)	331
Extract 122: Patient 13 (lines 163-172, 177-181)	333
Extract 123: Pharmacist E interview	335
Extract 124: Patient 5 interview	335
Extract 125: Patient 17 interview	335
Extract 126: Patient 18 (lines 89-96)	338
Extract 127: Patient 14 (lines 172-181)	339
Extract 128: Patient 22 (lines 98-108, 114-119)	341
Extract 129: Patient 11 (lines 167-174)	343
Extract 130: Patient 16 (lines 1-44, 69)	344
Extract 131: Pharmacist E interview	347
Extract 132: Patient 13 (lines 292-316)	349
Extract 133: Patient 18 (lines 15-21, 28-29)	351
Extract 134: Patient 14 (lines 27-34, 43-59, 63-64)	353
Extract 135: Patient 21 (lines 127-151)	355
Extract 136: Pharmacist B	357
Extract 137: Pharmacist B	358
Extract 138: Patient 1 (lines 64-77, 80-83, 89-94, 133-139)	359
Extract 139: Patient 21 (lines 31-53, 61-76, 78-93)	362
Extract 140: Patient 13 (lines 230-239, 267-268)	369
Extract 141: Patient 13 (lines 10-31)	370
Extract 142: Patient 5 (lines 15-16)	375

Extract 143: Patient 12 (lines 152-154, 160-168, 175-184).....	375
Extract 144: Patient 13 (lines 142-145, 352-358)	378
Extract 145: Patient 17 (lines 55-59, 127-134)	379
Extract 146: Patient 11 (lines 14-32)	380
Extract 147: Patient 3 (lines 120-124)	382
Extract 148: Patient 14 (lines 145-148)	383
Extract 149: Patient 5 (lines 51-53)	383
Extract 150: Pharmacist E interview	384
Extract 151: Patient 15 (lines 31-39)	386
Extract 152: Patient 20 (lines 40-49, 53-64)	388
Extract 153: Patient 8 (lines 7-8, 13-23)	390
Extract 154: Patient 13 (lines 146-154)	391
Extract 155: Patient 17 (lines 228-254, 261-267)	393
Extract 156: Patient 2 (lines 25-35, 78-85, 122-125).....	400
Extract 157: Patient 12 (lines 48-52)	402
Extract 158: Patient 12 (lines 125-128)	403
Extract 159: Patient 26 (lines 2-15, 25-36, 45-58).....	405
Extract 160: Patient 25 (lines 17-23, 26-27)	419
Extract 161: Patient 25 (lines 28-38)	420
Extract 162: Patient 25 (lines 39-43, 60-61, 86-89, 92-110)	421
Extract 163: Patient 25 (lines 22-23, 37-38, 43, 52, 57, 62-64, 71).....	425
Extract 164: Patient 25 (lines 113-126, 157-172)	426
Extract 165: Patient 25 (lines 183-184, 192-193)	428
Extract 166: Patient 25 (lines 194-197, 204-214)	429
Extract 167: Patient 25 (lines 216-217)	431
Extract 168: Patient 10 interview (caregiver)	436
Extract 169: Patient 10 (lines 1-2, 8-12, 241-242, 248-258, 266-268, 296-303) ..	437
Extract 170: Patient 10 interview (caregiver)	439
Extract 171: Patient 10 (lines 2-6, 15-29)	439
Extract 172: Patient 10 interview (caregiver)	440
Extract 173: Patient 10 interview (caregiver)	441
Extract 174: Patient 10 (lines 30-53, 66-74, 83-92, 99-123)	442
Extract 175: Patient 13 (lines 1-7)	449
Extract 176: Patient 13 (lines 72-89)	451
Extract 177: Patient 13 (lines 323-346)	454
Extract 178: Patient 17 (lines 142-146, 469-474)	458
Extract 179: Patient 17 (lines 359-370)	463
Extract 180: Patient 17 (lines 391-402)	465
Extract 181: Patient 17 (lines 66-76)	467