A Qualitative Analysis of the Perception of Academic Pharmacists Regarding their Role in Healthcare System of Two Pakistani Cities

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Abstract

Purpose: To investigate the role and perception of academic pharmacists regarding their role in the healthcare system of Pakistan.

Methods: Qualitative methodology was used to explore the perception of academic pharmacists, and semi-structured interview was used to collect the data. The study was conducted in the cities of Islamabad and Lahore, Pakistan from April to June 2011.

Results: On the basis of the interview guide, thematic content analysis yielded five major themes: 1) the need for a more comprehensive pharmacy curriculum; 2) perception of pharmaceutical care in Pakistan; 3) collaboration with other healthcare professionals; and 4) strategies to improve the status of pharmacist.

Conclusion: There is a necessity for curriculum alignment, which is considered important to enhance pharmacy practice activities, as this will ultimately yield several benefits for pharmacists, including job satisfaction.

Keywords: Academic pharmacist, Perception, Pharmacists’ role, Healthcare system

INTRODUCTION

A pharmacist is the healthcare professional who has responsibility of ensuring the rational use of medicine. Pharmacists play a vital role in the delivery of healthcare worldwide. There is an increasing number of opportunities for pharmacists to assume a greater role in helping patients make better use of their medications and achieve optimal therapeutic outcomes in both the public and private sector [1]. Pharmacists are highly qualified professionals who have sound knowledge about distribution channels in addition to effective inventory control and regulating the pricing and quality assurance of drugs. Besides these, they are competent enough to offer counseling regarding the use of drugs.

Over the years, Pakistan has been confronted with problems of inequity, scarcity of resources, inefficient and untrained human resources, gender insensitivity and structural...
mismanagement [2]. Academic pharmacists, like the other pharmacy professionals, are in short supply [3]. Efforts have been made to ameliorate the shortage of pharmacists and to some extent these efforts are slowly yielding fruit, but the situation in academia is still poor [4]. One of the major factors often faced by developed and developing countries is increasing enrollment of students’ schools of pharmacy [5]. Expanded enrollment presents many concerns, including its effect on the quality of teaching, the number of available pharmacy-trained academic faculty members and the academic standard of applicants, which are matched by similar increase in resources, including staffing levels [6]. There are studies which focus on the pharmacy education in both developed and developing countries, but very few studies assessed the academic pharmacists’ perceptions of their role in a healthcare system. In this regard, the main aim of the study was to assess the role of the academic pharmacist and current pharmacy education in Pakistan.

EXPERIMENTAL

Qualitative methodology was used to explore the perception of academic pharmacists. An interview guide was developed after extensively reviewing the literature. On the basis of interview guide semi-structured interviews were used to collect the data.

Interview implementation and data analysis

The participants were the academic pharmacists recruited through researcher’s personal contacts in two cities of Pakistan, namely, Islamabad and Lahore, from April to June 2011. Arrangements for the time and place of interview were made during the initial contacts. Written consent was obtained from the participants prior to the interview. All the interviews were conducted in English, audio taped and transcribed verbatim. The first author analyzed the transcripts line by line, which were read repeatedly and thematically analyzed for its content [7]. Of the 11 respondents, 6 were from the Islamabad and the remaining 5 academic pharmacists were recruited through contacts of the researchers from Lahore [8]. The interviews mainly focused on status, level and nature of pharmacy education in the country. Furthermore, information was gathered regarding the contribution of pharmacy organization towards pharmacy profession. Probing questions were used where necessary and respondents were given freedom to express their views.

RESULTS

Characteristics of the participants

Demographic characteristics of respondents are shown in Table 1.

Table 1: Academic pharmacist’s demographic data

<table>
<thead>
<tr>
<th>Variable</th>
<th>N</th>
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<tbody>
<tr>
<td><strong>Age range (years)</strong></td>
<td></td>
</tr>
<tr>
<td>&lt; 30</td>
<td>3</td>
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<tr>
<td>30-40</td>
<td>6</td>
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<tr>
<td>41-50</td>
<td>2</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>8</td>
</tr>
<tr>
<td>Female</td>
<td>3</td>
</tr>
<tr>
<td><strong>University attended</strong></td>
<td></td>
</tr>
<tr>
<td>University of Peshawar</td>
<td>1</td>
</tr>
<tr>
<td>University College of Pharmacy, University of The Punjab, Lahore</td>
<td>3</td>
</tr>
<tr>
<td>Quaid-e-Azam Medical College Bahawalpur</td>
<td>3</td>
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<tr>
<td>Bahauddin Zakria University, Multan</td>
<td>4</td>
</tr>
<tr>
<td><strong>Working experience in academia (years)</strong></td>
<td></td>
</tr>
<tr>
<td>&gt; 10</td>
<td>3</td>
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Thematic content analysis yielded five major themes: 1) the need for more comprehensive pharmacy curriculum. 2) Perception of Pharmaceutical care in Pakistan. 3) Collaboration with other healthcare professionals 4) Strategies to improve status of pharmacist.

Theme 1: The need for more comprehensive pharmacy curriculum

Most of the academic pharmacists in Pakistan were emphasized on the need for more comprehensive pharmacy curriculum.

“No, absolutely no. The curriculum has no standard; no practical application. When students go in field they are well aware of theory but have little or no practical knowledge.”(AP1).

“No, I am not satisfied. It is not covering the practical aspects which should be included. It bears more theoretical knowledge; an applied practical knowledge should be added.”(AP6).

Majority of the academic pharmacists expressed that there is no much change to the curriculum contents although after the change in the name of degree from Bachelor of Pharmacy to Doctor of Pharmacy.
“I believe there is just a change in the name of degree, not in the syllabus. Actual scenario we have to develop. There is little difference, computers, pharmaceutical marketing management and forensic pharmacy is added. Students feel proud to be called as “Doctors”. Pharm-D students are just happy due to change in name.” (AP5).

“No, I don’t think so. Just few more subjects are added. There is no details and depth subject just confidence is developed in students, just by putting Dr in front of their name.” (AP6).

Theme 2: Perception of pharmaceutical care in Pakistan

Informants were questioned regarding their perception of pharmaceutical care in Pakistan. They clearly denied the presence of pharmaceutical care and claimed that there was no pharmaceutical service in the country.

“There are certain hospitals where services are provided but in most hospitals this concept is absent. In my opinion there must be a clear cut concept of pharmaceutical care among pharmacists and they must possess knowledge where it is applied. There is no proper curriculum, no training.” (AP3).

“No proper pharmacy services are established in Pakistan. There should be a proper service sector especially for hospitals as well as for community setting. Without these; it is difficult to establish pharmaceutical care in Pakistan.” (AP6).

Theme 3: Collaboration with other healthcare professionals

Participants were asked regarding the pharmacists’ collaboration with other healthcare professions. They totally denied, and they expressed that pharmacists have to prove that they are competent enough, only then other healthcare professionals could recognize them.

“There is no working relationship of the pharmacist with doctors, one of the strongest communities in Pakistan. Due to their dominance, they always neglect the pharmacist. The government should take some initiatives in this respect.” (AP1).

“If the pharmacists prove themselves equally competent to other health care providers, then they will be definitively recognized by them and will also want the pharmacist to collaborate for patient care. In most cases, the pharmacists are not present in the hospitals, if they are; they are so busy in their own managerial job, due to which they have not enough time for counseling and providing the patient care.” (AP3).

Theme 4: Strategies to improve status of pharmacist

Volunteered suggestions were asked for from the respondents. Majority of them expect from the government to bring change in the policy with respect to their availability at the community and hospital settings.

“If we want to improve the pharmacy profession in Pakistan, then the government should support. We have brilliant talent and growth and up till now, we have on our own behalf. The Government should appoint a separate pharmacist in each section/ward of hospitals. Secondly, at community level all medical stores should be run under the supervision of the pharmacist to improve drug dispensing.” (AP7).

“The basic role of the pharmacist is in community and hospital setting, only then, the public will be aware of the pharmacist, so the government should focus on community and hospital pharmacies.” (AP8).

DISCUSSION

The practice of pharmacy, as well as pharmacy education, varies significantly across the world. Over the past decades, research into higher education has concentrated on setting standards and defining the quality of teaching as well as learning [9]. This exploratory study of academic pharmacists’ perception on their role and perception regarding pharmacy education in Pakistan has revealed a number of issues. These issues include pharmacy curriculum, and concept of pharmaceutical care. In developed countries like the United States, United Kingdom and France, the curriculum emphasizes on the experimental approach which ultimately familiarizes students’ entries into professional practice like drug monitoring and patient counseling [10].

Pharmacy education and practice is continuing to evolve in the Arab world for centuries. In pharmacy curriculum, greater focus is laid on patient care skill towards practical approach rather than theoretical [11]. Other countries, such as India, have a comparatively high number of trained pharmacists, but their pharmacy training
is focused more on industrial sector. This is mainly due to the demand from the industrial side, so, the focus of the national pharmacy curriculum in most universities also covers mainly subjects pertaining to the production aspects of pharmaceuticals [12]. The scenario is different in Pakistan. The academic pharmacists involved in this study put forward the issue of pharmacy curriculum in the country. They are totally unsatisfied with the pharmacy curriculum. The main reason they expressed was the lack of a practical approach in the curriculum content.

The present findings were consistent with the article that stated pharmacy curriculum in Pakistan has not been given due importance [13]. A majority of the participants had an opinion that there was no change except the name of degree; they believed that the confidence was built due to the “Doctor” labeled in front of their name. This is mainly due to the lack of clinical experience among the academic pharmacists, for that they have to refine their own skill. All the respondents agreed that pharmaceutical services were poor in Pakistan. The reason for this is traceable to the curriculum; they expressed that proper training was missing as there is no practical approach of students which gives them confidence to implement pharmaceutical care in the hospitals. The emphasis was made that pharmacy education and pharmaceutical services should be according to the social need [14].

The participants put forward the issue of the pharmacists’ collaboration with other healthcare professionals. According to them, the main reason is unavailability of the pharmacists and as observed in some of the hospitals where they are present in inadequate number. They focused towards the managerial job rather than providing pharmaceutical care to the patients. This finding is in accordance with an issue highlighted in the review which clearly states that in Pakistan pharmacists do have concern about their present professional role in healthcare system. The main problem they are facing is the shortage of the pharmacists, due to which their focus is towards management rather than direct patient care [15].

Pharmacists have to prove they are competent, for only then will other healthcare professionals recognize the need for their services to patients via provision of pharmaceutical care. There are studies in the developed countries which prove that the physicians believed that recommendation of the pharmacists had positive effect on the patients’ clinical status. Moreover, they are not opposed to having pharmacists involved in direct patient care [16]. Our finding is consistent with the finding of developed countries but some studies have shown in developing countries that healthcare providers considered the pharmacists as knowledge experts and they are comfortable with the pharmacists providing a broad range of activities including patient care [17].

A majority of the participants emphasized the need for government to bring about a change in policy with respect to the availability of the pharmacists in community and hospital settings. Without this, the required change cannot be effected, either in hospitals or community setting. Without the supervision of the pharmacist, rational drug use cannot be achieved. Our finding is consistent with what obtains in other countries which indicate that health authorities and policy makers need to support the leading role of pharmacists as drug consultant. Health authorities can achieve the foregoing through constructive dialogue and documented evidence that shows the benefits that would accrue to patient care if pharmacists play a greater role in the healthcare [18].

Limitation of study
As this study only involved academic pharmacists in two Pakistani cities, it cannot be taken for granted that pharmacists in other parts of the country would have similar perception towards their role in the healthcare system. Therefore, the finding should not be generalized to the entire academic pharmacists working in other parts of Pakistan.

CONCLUSION
It can be anticipated that with the support of the government health authorities, university academics, Pakistan Pharmacists Association and Pharmacy Council, the practice of pharmacy will evolve rapidly by a more appropriate role of pharmacy, especially a clinically one, thus uplifting pharmacists’ professional status. Based on the qualitative results obtained, there is urgent need for curriculum review that would enhance the capacity of graduating pharmacists to meet the demand for pharmaceutical care.

REFERENCES