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Research Article

Predicting pharmacy students' intention to apply for a residency: A systematic theory of planned behavior approach[☆]



Stephen C. Hickerson, PharmD, MS^a, Marc L. Fleming, PhD, MPH, RPh^b,
Ruta V. Sawant, MS^b, Nancy D. Ordonez, PharmD^b, Sujit S. Sansgiry, MS, PhD^{b,*}

^a Emergency Department, Houston Methodist Hospital, Houston, TX

^b Department of Pharmaceutical Health Outcomes and Policy, University of Houston College of Pharmacy, Houston, TX

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ABSTRACT

Objective: The current literature has identified many motivating factors and barriers influencing pharmacy students' decision to apply for residency training. Despite a growing need for residency trained pharmacists to advance the profession, it is not clear why only about one in four pharmacy students decide to pursue a residency, and which of these factors have the most influence on student decision-making. The study examines the factors associated with pharmacy students' intention to apply for a postgraduate residency using the theory of planned behavior (TPB) framework.

Methods: Second and third-year students from four Texas pharmacy schools were surveyed using an online questionnaire based on the TPB. Descriptive statistics and multiple linear regression analyses were utilized to assess the study objectives.

Results: A total of 251 completed responses were received. Attitude, subjective norms (SN), and perceived behavioral control (PBC) were significant predictors of intention to apply for a pharmacy residency ($\beta = 0.32, 0.58, \text{ and } 0.36$, respectively, $p < 0.001$). Attending ASHP's midyear meeting or other residency showcase was a significant predictor of intention ($\beta = 0.71, p = 0.006$). Additional significant predictors of intention include believing a residency would increase confidence in practicing pharmacy ($\beta = 0.36, p < 0.001$) and help achieve career goals ($\beta = 0.16, p < 0.02$); the social influence of faculty members ($\beta = 0.10, p = 0.003$) and family ($\beta = 0.08, p = 0.02$); believing financial obligations ($\beta = 0.20, p = 0.006$), feeling afraid of the competition and/or not matching ($\beta = 0.24, p < 0.001$), needing to relocate ($\beta = 0.09, p = 0.04$), and the lengthy application and/or interview process ($\beta = 0.12, p = 0.04$) would make it more difficult to apply for a residency.

Conclusions: The TPB model was useful in predicting pharmacy students' intention to apply for a residency, and all TPB constructs were significant predictors. Therefore, interventions that target students' attitude, SN, and PBC may be valuable to increase their intention, especially the specific beliefs identified to significantly predict intention. Future research into methods in which these motivating factors can be encouraged and perceived barriers can be addressed by pharmacy stakeholders will increase interest and participation in residency training.

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* Corresponding author: Sujit S. Sansgiry, MS, PhD, Department of Pharmaceutical Health Outcomes and Policy, University of Houston College of Pharmacy, 1441 Moursund, Houston, TX 77030.

E-mail address: sansgiry@central.uh.edu (S.S. Sansgiry).

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Introduction

Residency programs are designed to train pharmacists to perform as highly skilled clinicians and are an important contributor to the professional growth of new pharmacists providing direct patient care. Due to an increasing demand for clinically trained pharmacists, the number of applicants for postgraduate residencies is on the rise.¹ However, the majority of pharmacy students do not plan to pursue a residency after graduation.² It is therefore worthwhile to investigate the factors which may influence pharmacy students' decisions to pursue residency training. A better understanding of the student decision process is crucial to form targeted initiatives at the individual college and national level designed to promote residency training by fostering interest and participation in residency programs.³

Today, there is an ongoing debate about mandatory postgraduate training for the next generation of pharmacists.⁴ At a conference led by the American Society of Health-System Pharmacists (ASHP) and several key pharmacy groups in 2005, the stakeholders concluded that by 2015 many more pharmacists will be routinely providing direct patient care and will need residency training to acquire the skills necessary to care for more complex patients.⁵ In 2006, the American College of Clinical Pharmacy (ACCP) stated a postgraduate year 1 (PGY1) residency should be a prerequisite for practice in direct patient care settings. In addition, both ACCP and ASHP declared that by 2020 direct patient care will be provided by pharmacists in all settings, and therefore residency training should be a requirement for all new pharmacists entering pharmacy practice.^{6,7} As 2020 approaches, the rising competition for residency positions is increasing the number of unmatched residency applicants each year.⁸

In recent years many events have shaped the existing pharmacist supply and demand, the need for pharmacy residency training, and the overall vision of the profession. Pharmacists have continued to gain new skills and expand their roles in health care delivery, which has led to increased educational and training requirements for new pharmacists entering practice.^{4,9} Despite the large push by pharmacy stakeholders, only 25% of respondents from the 2014 American Association of Colleges of Pharmacy (AACCP) Graduating Student Survey had plans to pursue a pharmacy residency.² Of the 2014 graduates, 28% went on to participate in the match process and 18% matched with a program.⁸ In addition, a study of every United States pharmacy school graduating class from 2008 to 2011 revealed that only 14.2% of all graduates matched with a residency program.¹

Students face various challenges from the economic landscape that may influence their decision to pursue a residency. These include the growing number of pharmacy graduates each year resulting in an increased competitiveness for jobs and residency positions,^{10–13} the availability of community pharmacy jobs not requiring residency training,^{3,13} the rising tuition costs and student loan debt,^{2,14} and the large income gap between residents and staff pharmacists.¹¹ The current literature on this topic has provided some insight into the student decision process by identifying common motivating factors and barriers.^{3,11,15–19} However, it remains predominantly uncertain why only about one in four pharmacy students pursue residency training after graduation, and which of these factors have the most influence on student decision-making.

The theory of planned behavior

The Theory of Planned Behavior (TPB) is a well-established behavioral theory that has been used to predict deliberate human behavior.²⁰ The conceptual framework states that three constructs [attitude, subjective norm (SN), and perceived behavioral control (PBC)] form an individual's intention that leads to the behavior under consideration. Intention captures factors that influence a behavior, and is an indication of how much effort an individual is willing to exert in order to perform the behavior.²¹ The TPB was designed to explain almost any human behavior, and has been used successfully to explain many health-related behaviors by providing strong predictions of intention and behavior.²² The proposed *TPB extended model* for this study is shown in the [Figure](#).

To appropriately measure all constructs of the TPB, Francis et al. suggest *direct* and *indirect* measurements of each construct to be considered since both methods make distinct assumptions about the underlying cognitive structures.²³ Each variable may be measured directly by asking individuals about their overall attitude, or indirectly by asking individuals about specific behavioral beliefs and the influence of those beliefs. An individual's *attitude* refers to the extent in which an individual has a favorable or unfavorable evaluation of a behavior, and is influenced by perceived consequences and potential benefits of performing the behavior.²¹ The specific attitudinal beliefs can be measured indirectly from two components: *behavioral beliefs* and *outcome evaluations*.²³ The *SN* refers to how an individual perceives social pressures to perform the behavior, and are reflective of attitudes

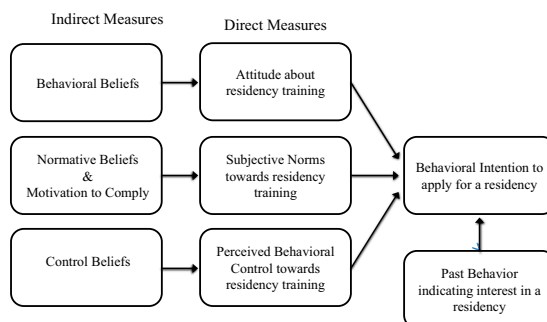


Fig. Theory of Planned Behavior extended model.

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