



Commentary

Opportunities and challenges in social pharmacy and pharmacy practice research

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Summary

Pharmacy practice and social pharmacy are two important research areas within pharmaceutical and health sciences. As the disciplines have undergone and are still undergoing changes, it is useful to reflect on the current state of their research as the basis for discussing further development. The two areas are currently beset by a lack of consensus and charged all too often with evaluating narrowly focused pharmacy services. With the added challenge of diminished funding for research and the pressures to publish results, these fields have to accommodate a much broader research framework than ever before. In this article, the challenges and opportunities in current research are reviewed, and suggestions provided on how to further research in these areas. A systematic content analysis is important to benchmark trends in the types of studies conducted, and to map the collaboration and funding within these areas.

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Introduction

Pharmacy practice and social pharmacy are two important contemporary research areas within the field of pharmaceutical sciences. As is the case with other pharmaceutical sciences, they have increasingly become multidisciplinary, combining natural sciences with social and humanistic research to study the role of medicines, patients, and pharmacists within the health care sector and society at large.^{1–3} As the disciplines have undergone and are still undergoing changes, it is useful to reflect on the current state of research in

these fields as the basis for discussing further development.

This paper in particular addresses how both disciplines are currently lacking consensus and a common understanding of what constitutes their research areas.⁴ Further, how they have been charged with aiming too often on evaluating narrowly focused pharmacy services.⁵ With the added challenge of diminished research funding and the pressure to publish results,⁶ this paper also will discuss how the disciplines have to accommodate outside pressures within a much broader research framework than ever before.

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Lack of consensus in social pharmacy and pharmacy practice research

From the authors' viewpoint, it is paramount to relate the academic field of pharmacy practice research to social pharmacy research, a well-developed academic discipline in the Nordic countries. It is evident when viewing homepages of various schools of pharmacy in different countries that different terms are used to describe what researchers in the Nordic countries call social pharmacy compared to the rest of Europe and North America. Departments or divisions within pharmacy schools often have been identified as social/administrative pharmacy, but the term pharmacoepidemiology also has appeared in recent years. In Great Britain, however, departments with a similar focus are often called pharmacy practice. In North America, pharmacy practice is also known as a research discipline, primarily carried out by clinical and/or hospital pharmacists. Also in North America, the term pharmacy administration was previously used for social and administrative aspects of pharmacy, but in the past two decades this label often refers to pharmaceutical outcomes and/or policy analysis.

Besides the lack of consensus in terminology, the subdisciplines are characterized by a disagreement about what they should do and how. Pharmacy practice and pharmacy administration have been observed in a US-based study as having “softer” or less focused research agendas than other pharmaceutical subdisciplines such as medicinal chemistry, pharmacology, and pharmaceuticals.^{4,7} The concept of hard/soft dimension in scholarly work relates to the work of Biglan⁸ as one of the three dimensions that he found to be highly predictive in determining the degree scholars were socially connected to others, their commitment to research, and scholarly productivity. This finding correlated to the hard-soft dimension in Kuhn's⁹ 1970s work on paradigmatic development or “the degree of consensus or sharing of beliefs within a scientific field about theory, methodology, techniques and problems.” Thus, the higher the degree of consensus, the “harder” the field of inquiry is viewed.

Actors and power relations

In addition to the weakness observed regarding lack of consensus, the opinion has been voiced that pharmacy practice and social pharmacy research has all too often aimed at evaluating

narrowly focused pharmacy services; i.e., how interventions are viewed by pharmacists themselves, patients, and other healthcare professionals.⁵ These claims are in line with what has been written in recent years about the field of nursing research.¹⁰ Contrary to pharmacy's quest to resist “losing ground,”^{11,12} the nursing profession was attempting to develop into a scientific discipline.¹³ Some nursing research has been criticized for relying on and reproducing an unexamined professional ideology and support to a professionalizing project,^{13,14} which should be a warning to pharmacy practice and social pharmacy researchers.

How can we understand this narrow research focus in the pharmacy profession's search for a new role in healthcare? Researchers in Canada and Australia have suggested that despite increased efforts and important policy initiatives,^{15,16} the majority of pharmacists still prefer status quo with dispensing as their main professional activity.^{5,17} The low preparedness of pharmacists indicates that research on pharmacists and how the world views them is not the most promising way forward. This may seem contrary to the role that critics say much nursing research has had in carving out a niche for the profession as a patient centered counterpart to the objective (hard) science approach of medicine.¹⁰

A recent editorial by van Mil and Fernandez-Llimos¹⁸ highlights this dilemma of a common understanding within the fields of pharmacy practice and social pharmacy. The fact is that the central concept of pharmaceutical care has never been considered for inclusion in the main biomedical thesaurus, the MeSH database, with other health care terminologies such as nursing care and dental care.

Funding within a multi-disciplinary research framework

The question of who funds pharmacy practice and social pharmacy research is crucial to how social pharmacy and pharmacy practice research is viewed. Researchers in these two disciplines likewise face pressure to secure extramural funding, whether from the state, private non-profit foundations, or industry. Pharmacy owners' associations have been prominent funders in countries as far apart geographically as Denmark and Australia.^{16,19}

In countries such as the US, Australia, and Norway healthcare payers are increasingly

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