



Research

Study investigating pharmacy students' interprofessional perceptions toward the pharmacy profession in Saudi Arabia

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Abstract

Objectives: To assess Doctor of Pharmacy (PharmD) students' interprofessional perceptions about the pharmacy profession in Saudi Arabia.

Method: A 26-item questionnaire was used to attain the aims of the study. The contents of the study tool were adapted and modified from *The Interdisciplinary Education Perception Scale (IEPS)*. Factor analysis was performed as mentioned by Luecht, Madsen, and Taugher. Data analysis was performed using Statistical Package for Social Science (SPSS) version 13[®].

Results: The response rate to this survey was 89.7%. Overall, the female respondents were found to have lower interprofessional perception scores than male students, 13.4 ± 2.17 . Overall, the final-year (fifth year) students had a better perception regarding professional competence and autonomy (14.1 ± 2.06), followed by the first-year students. In terms of the perceived need for professional cooperation, significant differences were noted based on motivation to choose pharmacy as a profession and participation in any workshop or conference in the last six months. Regarding the perception of actual cooperation/resource sharing within and across professions, significant differences were seen in terms of academic years. Previous job experience, attendance at a workshop, and hospital/community pharmacy training in the last six months were found to significantly affect the students' perceptions of Factor 4.

Conclusion: Final-year students have better interprofessional perceptions than their juniors do. In addition, motivation to enter the pharmacy profession, participation in recent scientific conferences, and practice exposure were found to significantly affect the interprofessional perceptions of students.

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Introduction

In recent years, pharmacists' involvement in direct patient care has modified their traditional role.¹ These

advances have facilitated the concept of multidisciplinary team-based approaches to achieve therapeutic goals.² Thus, it has become essential for a clinical pharmacist to have up-to-date knowledge about drugs and disease states.^{3,4} Up-to-date knowledge about therapy enables the clinical pharmacist to gain the trust of the health care team. In addition, it helps to establish better interprofessional relationships among the health care team. The prime focus of most pharmacy colleges is to adopt didactic and experiential

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strategies that inculcate interprofessionalism.^{3,5–7} For pharmacy students, the professional development process starts on day one and progresses slowly through interaction with faculty members, senior students, and alumni students.^{5–7} These interprofessional skills are further developed when students attend introductory pharmacy practice experience (IPPE) and advance pharmacy practice experience (APPE) rotations.^{3,6,7}

However, the interprofessional practices in developed countries are far more established than those in developing nations.^{8–11} For example, in Saudi Arabia, pharmacy education started to progress at the beginning of the 21st century.¹² Previously, few colleges offered Bachelor of Pharmacy programs. However, since that time, almost every institution has upgraded its program and now awards a Doctor of Pharmacy (PharmD) degree based on the standards outlined by the Accreditation Council for Pharmacy Education (ACPE).

Assessing the practice scenario in the Saudi pharmacy system, hospital and community pharmacy services are well-established in the region, while clinical pharmacy services (i.e., direct patient care services in wards, medication therapy management and adherence clinics, and specialty clinics monitored by pharmacists) are still in the process of being established. Overall, most of the Saudi pharmacy graduates prefer to work in hospital and clinical setups rather than community pharmacies. This is perhaps due to high job demand for the hospital and clinical pharmacist in private and public health facilities. While assessing the scenario for the community pharmacy practice, both chain and independent pharmacy setups are actively meeting the needs of Saudi community. However, most of the pharmacists practicing in community pharmacies are expatriates. It is assumed that in future there will be many job opportunities in community pharmacies for the Saudi graduates.

At present, there is a high demand for pharmacy professionals in Saudi Arabia, and due to deficient number of local number of Saudi pharmacist is being met by expatriates from developed and developing countries.¹³ Nearly the same situation can be found in academia, in which both local and foreign faculty is contributing their efforts to attain program goals and objectives, and thus, to ensure that, upon their graduation, clinical pharmacists are knowledgeable and skillful. However, interprofessionalism among pharmacy students is never assessed. This perhaps should be a top priority to ensure the effective outcomes of the introductory pharmacy practices experiences (IPPE) and advanced pharmacy practices experiences (APPE) modules to further nurture interprofessionalism. Moreover, to synchronize the Saudi health care system with international health standards, multidisciplinary team-based approaches are also currently practiced or in progress.¹⁴ This progression in the role of clinical pharmacists may create a situation in which their contribution is below or exceeds their expectations.¹⁵ For example, in a multidisciplinary team, if a nursing staff is making decisions about the optimization

of drug therapy and dose adjustments, pharmacists' skills and knowledge will be underutilized. At first glance, this seems to enhance a multidisciplinary relationship (nurse–pharmacist), but on other hand, it may affect the expected contribution by other health care professionals (nurses and physicians) and other members of the same profession (pharmacists).^{14,16} Particularly, when PharmD students attend IPPEs and APPEs, such situations will not only affect their views about the role of pharmacists on the health care team but also will present a different job description for other team members. Such repetitive practices will convince team members to expect a lower profile role for pharmacists than the desired one. According to Lister,¹⁷ one's job function is the outcome of self-perception and the expected role perceived by other team members. A PharmD graduate trained in such an environment may underestimate his/her professional role based on his observations. Furthermore, certain cultural issues such as sexual inequalities in education may prevent professionalism from improving.¹⁸

Therefore, in countries like Saudi Arabia, where pharmacy education and practice is in a transitional phase, it is mandatory that the views of pharmacy students regarding their professional role be assessed. In this way, pharmacy colleges also can predict how successful they will be in designing a module to clarify the practice-oriented concepts of their graduates. Otherwise, the result will be a disillusioned and dissatisfied pharmacy graduate.⁶ According to Wessell,¹⁹ a better “understanding toward [the] role of a health profession is important for beginning a better inter-professional practice.” In Saudi Arabia, this will be perhaps the first effort to assess pharmacy students' interprofessional perceptions. The findings from the current study also will act as a basis for the modification of and planning for current didactic and experiential modules to enhance interprofessionalism among Saudi pharmacy graduates.

Method

This study utilized a non-experimental questionnaire-based survey among PharmD students at a college in Saudi Arabia.

Study sample

The entire student population enrolled [prep years (first year) to fifth year (final year); $N = 248$] for the Doctor of Clinical Pharmacy Program (PharmD) at the college were invited to participate in this study. Clerkship students (sixth-year students attending the APPE rotation; $N = 31$) also were approached, but the response rate was too poor ($N = 2$) to include them.

Study tool

A 26-item questionnaire was used to attain the aims of the study. The contents of the study tool were adapted and

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