

Comparing Student Pharmacist and Pharmacist Perceived Role in Depression Screening and Suicide Prevention

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INTRODUCTION

- The United States Preventative Services Task Force recommends depression screening for the general adult population as suicide is now a major public health crisis, yet only 1.5-4.2% of adults have been screened^{1,2}.
- Suicide is the 10th leading cause of death of all ages in the United States.³
- Certain negative opinions and social stigmas surrounding mental health disorders have been identified as barriers to objectivity and patient utilization of pharmacists as health providers.⁵
- Student pharmacists' and pharmacists' perceived responsibilities in suicide prevention and depression screening are assessed using qualitative semi-structured interviews and the theory of planned behavior model (TPB).

Community pharmacists are the most accessible health resource, which could improve outcomes with early diagnosis and proper treatment.⁴

Pharmacists' and student pharmacists' perceptions of mental health care services have discrepancies with respect to responsibility, specifically in community pharmacy, which could exert barriers further.^{5,6,7}

OBJECTIVE

To assess the similarities and discrepancies in the perceived role of community pharmacists and student pharmacists in depression screening and suicide prevention by use of the theory of planned behavior model (TPB).

METHODS

- Qualitative semi-structured key informant interviews
- Inclusion: second-year and third-year student pharmacists enrolled at Wingate University School of Pharmacy, pharmacists licensed in North Carolina who practice in the community setting.
- The study was approved by Wingate University RRB.

Interview

Transcribe

Analyze

The interview guide was developed according to the TPB. The TPB was chosen as a theoretical framework as it allows prediction of an individual's intent to engage in a behavior at a specific time and place.

Interviews were recorded, either by voice recorder or Zoom video technology, transcribed, and deidentified prior to data analysis.

NVivo12 software was used to code the transcripts and to analyze the codes. Qualitative methods will be used to identify major themes and illustrative quotes will be selected.

RESULTS

Table 3. Student Themes and Supporting Quotes

Theme	Illustrative Quotes
Theme 1: Student Pharmacists Were Generally Less Prohibitive of Their Potential Role	<ul style="list-style-type: none"> "At the current moment not as prepared. But that's because we haven't had Psych yet. I think after Psych and being able to kind of get that diagnostic criteria, I myself, will feel more prepared." (Student 3) "...if somebody approaches me in practice my instinct would be to most likely direct them to another resource." (Pharmacist 9)

Table 4. Pharmacist Themes and Supporting Quotes

Theme	Illustrative Quotes
Theme 1: Need to Integrate Into Existing Workflows and Established Services	<ul style="list-style-type: none"> "I pay attention to the alerts on the computer. So it would be easier if it gets rolled into, for instance, the pioneer software that we're using. If it's something that was an easy add on"(Pharmacist 3) "I think it would take a long time to implement which I don't think is different from other things that we've tried to implement, you know, every probably every clinical program we try to implement takes time and you know repeated training" (Pharmacist 4)

Table 5. Mutual Student and Pharmacist Themes and Supporting Quotes

Theme	Illustrative Quotes
Theme 1: Perceived Role of the Pharmacist in Suicide Prevention was Influenced by Community Pharmacy Setting	<ul style="list-style-type: none"> "if it's an independent pharmacy, you know, they may likely be more likely to say something and have that interaction, because the relationship is likely stronger." (Pharmacist 7) "If I think about previous roles and like when I worked for a large chain right out of school I definitely didn't have much time for consultations, let alone to step away from the computer where I was verifying at, so I can't imagine that I would have done any there." (Pharmacist 11)
Theme 2: Need for Increased Training and Preparation	<ul style="list-style-type: none"> "I think probably the biggest thing is just having the right training to know exactly how to, you know, implement these measures, learn about what kind of resources are available in the community..." (Pharmacist 5) "I feel like I personally wouldn't know how to respond because I don't have that background training." (Pharmacist 6)
Theme 3: Challenges in Implementing with Current Workflow	<ul style="list-style-type: none"> "I think pharmacists would probably be mad that they're being asked to do something else. I feel like especially in the community it's you know meet these metrics meet these metrics." (Student 1) "We're trying to obviously incorporate in our workflow, you know, just like any other clinical service." (Pharmacist 9)
Theme 4: Recognized Potential Role of Pharmacist in Suicide Prevention May Not Be Profession- Wide	<ul style="list-style-type: none"> "I think I probably would have some kickback with some of the older pharmacists and trying to get them to kind of get out of their comfort zone" (Pharmacist 1) "Maybe the older type of pharmacist where they already feel overwhelmed with the new roles that's been happening with the pharmacist over the last 5-10 years" (Student 7) "...I feel like that not because of school. I feel like that's because family things I've experienced that I can talk about mental help with people no problem. And you know the Mental Health First Aid Certification helps to kind of different tools and techniques to talk about things like that."(Student 1)

DEMOGRAPHICS

Table 1. Student Demographics (n=17)

Years in Pharmacy School	
P2:	59%
P3:	41%
Female:	71%
Age: 18-24	59%
Caucasian:	76%
Community Setting (n=14):	82%
≥3 years:	57%
Chain:	50%
Area lived in	
Rural:	47%
Suburban:	47%
Known someone who attempted suicide:	88%
had suicidal thoughts:	64%
died from suicide:	35%
Mental Health Training	
Mental Health First Aid:	47%
Associates (Human Services):	6%

Table 2. Pharmacist Demographics (n=13)

NC Community Pharmacist::	100%
Type- Independent:	46%
Location- Suburban:	46%
Female:	69%
Post-graduate training:	31%
5+ years practicing:	62%
Age (30+):	69%
Caucasian:	69%
Attended NC Pharmacy school:	62%
Known someone who attempted suicide:	69%
had suicidal thoughts:	85%
died from suicide:	8%
Mental Health Training	
Mental Health First Aid:	8%
Suicide Awareness/Prevention:	8%
Currently performs screenings:	15%
How frequently:	Sometimes
Aware of resources available:	54%

LIMITATIONS

- The population studied is not robust, representing students from only one institution and pharmacists from only one state.
- Pharmacist respondents primarily practiced in independent community pharmacies, limiting generalizability to chain and grocery store community pharmacies.

CONCLUSION & IMPLICATIONS

- Student pharmacists generally feel they will be prepared to assess patients for suicidal ideations by the time they graduate.
- Pharmacists are more likely to implement suicidal ideation assessments into already existing workflow parameters.
- Students and pharmacists both feel that more training and support will be needed to viable implementation. Personal experience and barriers will also determine possible outcomes.

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