


Are pharmacists willing to work in disasters?

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Received 2 June 2020, accepted 4 June 2020, published online 16 June 2020

The recent Australian bushfires and the global COVID-19 pandemic have highlighted the critical need for ensuring health workforce capacity during disasters. National, state and local disaster response plans assume that health professionals are prepared and willing to respond to disasters. However, the literature suggests that, depending on the disaster, health professionals may not be as willing as we may expect. This hesitancy potentially leads to critical gaps in health services delivery during and following disasters.¹

Pharmacists provide essential health services to the public and are highly accessible because of their numbers and locality within the community.² They are uniquely placed to provide frontline health care to a large portion of the population in everyday practice and during a disaster. Recent disaster events in Australia have underlined the importance of pharmacists' roles in their communities (e.g. through extension of medication supply legislation).^{3,4} Understanding the willingness of the pharmacy workforce to respond during a disaster is important to prevent disruptions to the essential services provided by pharmacists during disasters.

We conducted an Australia-wide 13-question online survey to determine the willingness of the pharmacy workforce to respond to a disaster and the factors affecting that willingness (Queensland University of Technology Human Research Ethics Committee Approval no. 1700000682). The survey was completed by 60 participants. Most participants reported they would be likely to report to work during a pandemic or biological disaster (73%; 44/60) or natural disaster (78%; 47/60). The two

major factors likely to prevent participants from working in a disaster were family concerns and safety concerns for themselves or other staff members.

This research provides the first insight into pharmacists' willingness to work in a disaster in an Australian context. It suggests that most pharmacists may be willing to work during or following a disaster. This idea is supported by recent media coverage of pharmacists responding to the Australian bushfires and during the COVID-19 pandemic.^{5–8} However, 40% (24/60) of participants stated they would be unwilling to work if they had safety concerns for themselves or their staff. Recent media coverage of COVID-19 has reported on health professionals being unwilling to work or resigning from their workplaces due to fears for their safety caused by verbally and physically abusive patients.^{9,10} Abuse and violence in the healthcare setting is a critical issue faced every day by health professionals, but the heightened stress, frustration and anxiety of disaster situations may make abuse from patients more likely.

Although the present survey focused on the pharmacy workforce, it is likely that similar barriers to a willingness to work exist for other health professionals.¹¹ So, how can we make sure our critical health workforce is willing to respond to future disaster events in Australia? We need to ensure we have interventions and resources that allow health professionals to educate and protect themselves, their staff and colleagues, as well as their families.

Competing interests

None.

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Acknowledgement

This research did not receive any specific funding.

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