

LETTER TO THE EDITOR

Gender and Minority Considerations in Pharmacy School Student Wellbeing

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The recent article by Babal and colleagues explored first year Doctor of Pharmacy students' viewpoints on individual, educational system, and health care system factors that affected their wellbeing.¹ Workload, learning environment, meaningful pharmacy school experiences, relationships, and personal factors were five themes identified in the students' reflective essays. While these findings are consistent with related wellbeing research, the intent of this letter is to emphasize gender and minority considerations absent among the author-provided themes and supporting quotes that may be more so reflected among pharmacy students across the country.

Among 49 participants in this study, 75% identified as women. It has been reported that female pharmacy students experience significantly higher levels of stress than their male peers in their first and second years in pharmacy school.² Similarly, female medical students experience reduced self-confidence and increased anxiety relative to their competence despite performing at levels comparable to their male counterparts.³

Spouses and children can influence female pharmacy student wellbeing for better or worse during demanding times. As a female pharmacy student, wife, and mother, I have felt guilty and anxious when the pharmacy school curriculum prevented my full presence in cherished life moments such as a little league baseball game or a dance recital.

Further, minority representation among the study participants was largely limited to Asian ethnicity (14.3%), with no participants who identified as Black or African American, American Indian, Alaska Native, Hispanic, Latino, Native Hawaiian, or Pacific Islanders. These numbers do not reflect national pharmacy school student ethnicity demographics.⁴ Pharmacy school minority student experience and wellbeing are unique to respective culture.⁵ In Asian culture, a high value is often

placed upon academic excellence, resulting in intense academic stress for these students.⁶ African Americans and other minorities have reported experiencing micro-aggression and discrimination from faculty members and peers at a college of pharmacy.⁷

As a minority pharmacy student, I have felt self-conscious in pharmacy lectures when disease state discussions indicated that African American ethnicity is a "nonmodifiable" risk factor. This could be construed as an inherent inferiority with respect to race. Alongside historical racism, such as unethical medical experimentation on African Americans or even segregation of schools, this created personal stress about how I was perceived by student colleagues and faculty members.

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