

Burnout Management and Resilience: Factors Affecting the Filipino Pharmacists' Practice

Barbie Rose G. Fairchild¹, Josephine N. Halder¹, Chrystlle Joan C. Riego de Dios¹, Nadzra T. Salapuddin¹, Ferlien Mae B. Brieta²

¹Student Researchers, College of Pharmacy and Chemistry, University of the Immaculate Conception, Davao City, Philippines

²Faculty Researcher, College of Pharmacy and Chemistry, University of the Immaculate Conception, Davao City, Philippines

Corresponding Author(s): Ferlien Mae B. Brieta (fbrieta@uic.edu.ph)

Abstract

Background: Pharmacists in today's setting are even more susceptible to burnout due to professional computerization, increased workload, the complexity of medication regimens, and demands for efficient, swift patient services.

Objective: This study investigates the factors influencing resilience and burnout management among Filipino Pharmacists, with emphasis on their lived experiences across various healthcare environments.

Methods: A qualitative research design was used, with purposive sampling, and in-depth virtual interviews conducted with eight Filipino pharmacists practicing in the Philippines and internationally to learn about their experiences.

Results: The thematic analysis of the transcribed interviews identified three main themes: the pharmacists' experiences with burnout, their coping mechanisms in response to challenges, and recommendations for improving the pharmacy practice environment. Participants noted that overwhelming workloads, insufficient staffing, and workplace culture greatly affect their mental well-being. They reported that they use various ways to cope, such as seeking support from others, engaging in self-care, and using effective stress management techniques.

Conclusion: Findings suggest that resilience is not just something you are born with, but can be developed through supportive workplaces, ongoing education or training, and mentorship. External support, such as mental health services and employee wellness programs, plays a crucial role in mitigating burnout and enhancing workplace productivity. The insights from this study highlight the need for organizational improvements and effective leadership to cultivate resilience among pharmacists and help them thrive in their personal and professional lives. Ultimately, embracing a holistic approach to pharmacy practice that prioritizes resilience and burnout management can enhance the overall health

and well-being of pharmacy professionals, thereby improving patient care and increasing job satisfaction.

Keywords: *Pharmacy practice, resilience, burnout management, Filipino pharmacists' experiences, coping strategies*

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INTRODUCTION

Pharmacists in today's setting are even more susceptible to burnout due to professional computerization, increased workload, the complexity of medication regimens, and demands for efficient, swift patient services. Studies show that emotional stress and dehumanization are standard amongst pharmacists, with 47% of healthcare pharmacists being presently burnt out and 65.3% presenting a medium to high probability of burnout (Jones et al., 2021). Furthermore, research has acknowledged these key stressors as contributing to the shortage of pharmacists at both the local and international levels (Loquias & Robles, 2012). Stress and burnout are significant among pharmacists; approximately 61.8% of them exhibit burnout symptoms, including emotional exhaustion and depersonalization (Golbach et al., 2022).

Burnout negatively affects both patient care and pharmacists. Burnout makes pharmacists feel emotionally tired and less involved, which lowers the quality of care they provide (Dee et al., 2023). This can lead to more medication errors, poor communication with patients, and difficulty managing long-term conditions, resulting in patients being less satisfied (Dee et al., 2023).

Furthermore, the effects of burnout extend deeply into the personal and professional lives of pharmacists. Burnout causes mental health issues like anxiety and depression, physical problems like constant tiredness and headaches, and makes people unhappy with their jobs, leading to more people quitting (Dee et al., 2023). Burnout also weakens their sense of effectiveness at work and disrupts their work-life balance, affecting their overall quality of life (Dee et al., 2023).

Burnout entails symptoms such as feelings of emotional exhaustion, depersonalization, and reduced personal accomplishment, and this has become very rampant in the healthcare field. Recent studies demonstrate that pharmacists and other healthcare workers are not protected against such unfavorable psychological outcomes either (Johnston et al., 2021). Moreover, in a previous study, clinical pharmacists reported higher rates of burnout, along with high workload, time pressure, and perceived lack of

support (Ivanova et al., 2023). Given this background, which has been tested and proven, it is important to identify the effects of burnout, as these results impact employees' satisfaction, turnover rates, and patient care perspectives.

In the rapidly advancing field of healthcare, the role of the pharmacist has become essential within the healthcare team, focusing on medication therapy, chronic disease management, and patient safety. However, these demands place significant pressure on pharmacists and ultimately lead to burnout. Such psychological pressure negatively affects pharmacists' mental state as well as jeopardizes patient safety, thereby increasing the risk of medication errors. These proactive strategies are known supportive measures; for example, integrated clinical pharmacy services have been shown to decrease emotional exhaustion and increase provider satisfaction (Haag et al., 2021).

On the other hand, resilience has emerged as a salient construct in the agenda on mental health and well-being at work. This index describes coping mechanisms as the ability to cope with adversity, change, and pressure, or to relate to a set of circumstances in an optimistic way (Labrague, 2021). Importantly, in the context of clinical pharmacy, resilience can serve as a resource to help pharmacists manage the stressors inherent to their professional activity. Although the role of resilience is recognized, few researchers have examined general and individual factors related to resilience and burnout prevention among pharmacists (Alameddine et al., 2022).

In addition, research on burnout among healthcare workers has been conducted, but there is a dearth of studies specifically focused on pharmacists. Many current studies fail to be organized or to address the issues or conditions specific to pharmacists' practice environment and experience, leaving gaping holes in knowledge of the resilience assets relevant to this profession. This gap is important because, with the growing emphasis on pharmacists' patient-centered roles, other studies have neglected pharmacists' burnout and resilience. Therefore, it is crucial to fill this gap by designing strategies that align with pharmacists' needs and requirements, thereby supporting them and enhancing their quality of life in a stressful work context.

Patient-centered care is a core component of pharmacy practice, but it can pose challenges that lead to burnout. A previous study explored the dynamics between pharmacists and patients, finding that while patient-centered consultations improve health outcomes, they also increase pharmacists' emotional strain (Ng et al., 2020). Patient-centered care requires a balance between delivering excellent care and maintaining pharmacists' well-being. Institutions must implement strategies that address the emotional challenges pharmacists face when engaging with patients. By fostering a supportive work environment, pharmacies can ensure that both patient outcomes and pharmacist well-being are prioritized.

Valeras (2020) emphasized the importance of collaboration within healthcare teams to prevent burnout among pharmacists. When pharmacists work in supportive environments where their efforts are recognized, they are more likely to experience job satisfaction. Encouraging open communication among healthcare professionals creates a culture of trust, reducing emotional strain (Valeras, 2020).

Recognizing significant crosstalk between burnout and resilience management, this research aims to assess potential factors at the personal, professional, and organizational levels that may affect pharmacy practice. As such, this qualitative study delved into the personal experiences of Filipino pharmacists in dealing with burnout and stress, being resilient, and developing coping mechanisms to maintain a good work-life balance. This research centered on the viewpoints of a pharmacist working in different settings. This study aims to investigate the factors influencing the resilience of Filipino pharmacists and strategies to prevent burnout in their practice. Specifically, the study seeks to address the following questions: (1) What are the lived experiences of the pharmacists? (2) What are the coping strategies of the pharmacists to address the encountered issues and problems? (3) What is their advice or insight to other pharmacists?

MATERIALS AND METHODS

Research Design

This study employed a phenomenological qualitative research design to understand the lived experiences of Filipino pharmacists in building resilience and avoiding burnout. Phenomenology focuses on exploring individuals' subjective realities, seeking to capture their thoughts, feelings, and perceptions (Tenny et al., 2026). This design is appropriate, as the objective is to explore personal insights and nuanced experiences rather than to measure variables statistically. It emphasizes how participants make sense of their professional challenges and the strategies they adopt to sustain well-being.

Phenomenological research ensured that the findings remain participant-centered, reflecting authentic experiences rather than theoretical assumptions. This design aligned with the study's goal to provide meaningful insights into the complexities of pharmacists' mental well-being, thereby helping stakeholders develop practical interventions for improving workplace support.

Research Participants

The research participants for this study involve licensed Filipino pharmacists working in different healthcare settings. Participants were licensed pharmacists in the Philippines or in other countries. Participants are those working in community pharmacies, hospitals, academe, industry, or public health. These varied settings were selected to capture a broad spectrum of experiences that pharmacists encounter in their professional

roles. Each setting presents unique challenges and opportunities for pharmacists, influencing their experiences with burnout and resilience. A purposive non-probability sampling technique was used to gather potential participants.

Data Sources

The main data source for this study were semi-structured in-depth interviews (IDIs) with participating pharmacists. These interviews helped us learn about the pharmacists lived experiences, how they cope with stress, and their approaches to building resilience and managing burnout. Moreover, field notes were taken during interviews to collect important contextual details that enhanced data analysis.

In line with the Data Privacy Act of 2012, all transcripts of the IDI were dealt with utmost care. Personal identifying information was removed, and data was safeguarded to ensure the confidentiality of the participants. Any information obtained during the interviews will remain confidential and be used solely for research purposes.

Data Gathering Procedure

Data gathering started by securing permission to conduct an In-Depth semi-structured Interview (IDI) from the office of the College of Pharmacy and Chemistry Dean. A copy of the manuscript, together with the interview script template and consent were submitted to UIC-REC for review and approval. After obtaining ethical clearance, participants were invited to an interview via email. Participants were given sufficient time to understand the Informed Consent Form (ICF) before signing. They were also briefed about the study's objectives and their rights as participants. The data collection maintained complete anonymity and confidentiality throughout the study.

Data was obtained through In-Depth one-on-one Interviews conducted on online platforms via Google Meet, depending on participants' schedules and convenience. The link was shared through their email addresses or messenger accounts. The IDI occurred between March and April 2025 and was conducted in English and the native language. Each interview lasted from 30 to 60 minutes, with follow-up interviews arranged as necessary to clarify or expand on specific themes. The sessions were audio-recorded and transcribed with participants' consent for accurate analysis.

In the interview, participants were challenged to rely fully on their inner resources to practically overcome various life situations, especially those related to chronic fatigue and work-related psychological load. The level of participation was uneven, as participants reported their experiences in their complaints. For the sake of participants' trust, they were reminded that they could withdraw from the study at any time without repercussions. They were also given the opportunity to ask any questions they had about the study and their involvement.

Potential risks or discomforts that might occur during the IDI among participants were noted, such as emotional stress when discussing demotivating factors related to work-life stress and burnout. To reduce such issues, the meeting was set up in a friendly manner, and they were allowed to stop or quit the interview if they wanted. Besides that, the

attendees would have been given help finding mental health resources if they had felt overwhelmed.

Thematic Analysis

In the data analysis, the researchers employed a qualitative method, thematic analysis, to identify associated issues and recurring themes regarding resilience and burnout using the methods elaborated by Barun & Clarke (2006). Initially, the researchers became familiar with the data, coded the important phrases, and subsequently grouped similar codes into themes (Castleberry & Nolen, 2018). The researcher meticulously studied interview transcripts to identify commonalities in participants' experiences, emotions, and coping strategies.

The analysis was primarily intended to capture both common and personal experiences of participants, thereby enabling a comprehensive and nuanced understanding of the mental health conditions pharmacists face. The ultimate themes were analyzed in the context of the existing literature, thereby introducing the determinants of burnout and the reasons for its avoidance, and thereby contributing to existing knowledge.

Trustworthiness of the Study

To ensure the study's trustworthiness, strategies such as credibility, transferability, dependability, and confirmability were employed (Ahmed, 2024). Credibility was enhanced through prolonged engagement with participants, ensuring that the data accurately reflects their lived experiences. Member checking was conducted by sharing interview summaries with participants to confirm the accuracy of interpretations. To ensure transferability, detailed descriptions of the research context and participants were provided, allowing readers to assess the applicability of the findings to other contexts. Dependability was ensured by maintaining thorough documentation of the research process, including interview protocols and coding schemes, to provide a clear audit trail. To achieve confirmability, the researchers engaged in reflexivity by documenting personal biases and assumptions throughout the study. This transparency ensured that the findings reflect participants' experiences rather than the researcher's interpretations.

Role of the Researcher

The researchers served as the primary instruments in data collection and analysis, directly responsible for conducting the interviews and interpreting participants' lived experiences. In line with the phenomenological approach, the researchers engaged in reflexivity by acknowledging and critically examining their potential biases that could influence data interpretation. Continuous self-reflection was undertaken throughout the research process to minimize bias and maintain objectivity. Furthermore, by establishing rapport and fostering a trusting relationship with the participants, the researchers facilitated open communication, enabling participants to share their personal experiences more freely and authentically.

Ethics Statement

This study was submitted to the Research Ethics Committee of the University of the Immaculate Conception for ethics review under the protocol code UG-ER-01-24-0136. Ethical clearance was granted on 03 February 2025 after the committee determined that the research process was responsible and ethically accountable. All data collection also complied with the Data Privacy Act of 2012.

RESULTS

Profile of the Participants

The participants in this research were eight Filipino pharmacists, aged 34-40, comprising one male and seven females, with 3-15 years of pharmacy practice experience. Among them, one has 15 years of experience in a hospital setting, while the others work in community pharmacies. The participants are based in various countries, including the Philippines, the United Arab Emirates, Saudi Arabia, and the United States of America. This diverse selection aimed to provide a comprehensive comparison of Filipino pharmacists lived experiences across various pharmaceutical environments and cultural contexts, highlighting factors that influence their professional service and experiences.

Lived Experiences of Filipino Pharmacists

The analysis of participants' narratives revealed four major themes contributing to burnout: structural and cultural factors, psychological and physical impact, work-life imbalance, and reduced patient care quality, as presented in Table 1.

Table 1
Lived Experiences of Burnout Among Filipino Pharmacists

Core Ideas	Essential Themes
- Heavy workload and staffing shortages - Fast-paced and high-pressure work environment - Lack of effective leadership - Poor workplace dynamics - Differences in Work Culture - Education and Training Gaps	Institutional and Cultural Factors Burn-out
- Emotional Exhaustion and Mental Strain - Physical Health Consequences	Psychological and Physical Impact of Burnout
- Challenges with Professionalism and Emotional Attachment - Poor Time Management and personal life balance	Work-life Imbalance

• Difficulty in Establishing Boundaries	
• Less Meaningful Patient Interactions • Shifting Focus on Performance Metrics over Patient Needs • Ethical and Professional Dilemmas	Reduced Patient Care Quality

Structural and cultural factors were consistently identified as primary drivers of burnout. Participants described excessive workload, staffing shortages, and high-pressure environments as routine challenges in their practice. One participant shared,

"There's a shortage of staff and a lot of workload with high demand for patients; these things make me more stressed" (IDI2).

Furthermore, another noted,

"In Dubai, my current workplace is the fast paced environment and strict regulations that add to stress, handling multiple cases" (IDI1).

Issues related to workplace dynamics and leadership were also highlighted, with a participant expressing,

"The burnout I'm experiencing here is the lack of responsibility of my co-worker" (IDI3).

Differences in work culture, particularly among those practicing abroad, further intensified stress, as reflected in the statement:

"It is more stressful abroad... nationalities are diverse" (IDI7).

A pharmacist practicing in a fast-paced environment noted,

"In Dubai, my current workplace is the fast-paced environment and strict regulations that add to stress, handling multiple cases" (IDI1).

Similarly, a participant from the Philippines expressed that "There's a shortage of staff and a lot of workloads with high demand for patients. These things make me more stressed" (IDI2). Beyond workload, workplace culture and a lack of supportive leadership were cited as significant contributors to the sense of being overburdened. One participant highlighted the systemic issues in the Philippines, stating:

"It doesn't help kasi that the Philippine healthcare system, hindi masyadong binibigyan ng importance ang role ng pharmacist, and then most especially, walang standardization ng salary". (IDI4)

"It doesn't help that the Philippine healthcare system doesn't give much importance to the pharmacist's role, and, most especially, there is no salary standardization." (IDI4)

The consequences of this burnout often manifest in patient interactions and personal health. One participant admitted,

"The challenges of managing stress and overwork sometimes affect how I interact with patients." (IDI3)

while another described physical symptoms:

"I started to have mild panic attacks, shortness of breath, and nausea.

There are a lot of things on my plate. I hated going to work." (IDI5)

Pharmacists' Coping Mechanisms

Table 2 presents themes related to coping mechanisms, including interdisciplinary collaboration and adaptation to dynamic work environments. These strategies reflect how participants develop resilience in response to workplace challenges.

Table 2
Pharmacists' Coping Mechanisms in the Face of Challenges

Core Ideas	Essential Themes
• Seeking social and emotional support • Cultivating team spirit and supporting team-based efforts • Mentorship and coaching to provide emotional support to pharmacists	Interdisciplinary Collaboration
• Effective scheduling and prioritization of tasks • Reflective self-analysis and evaluation • Proactive Stress Management • Utilizing Workplace Resources	Adaptation to Dynamic Work Environments

Interdisciplinary collaboration was identified as a key coping mechanism. Informal support systems, such as team-building activities and social interactions, were also reported to help relieve stress. Participants emphasized the importance of teamwork, social support, and mentorship in mitigating stress. One participant shared,

"Having a strong team where colleagues help each other... it's really a big thing for me" (IDI1).

Delegation of tasks based on team strengths was also practiced, as described:

"If I know this person is more efficient for this task, I delegate it to them" (IDI5).

Adaptation to dynamic work environments was another significant strategy. Participants described using time management, prioritization, and self-reflection to cope

with demanding workloads. One participant explained, "Being organized, managing time well... don't bring work at home" (IDI2), while another utilized structured approaches, "It is the Eisenhower matrix... classify tasks as urgent or not" (IDI6). These adaptive strategies enabled pharmacists to maintain efficiency and control over their responsibilities.

Two of the core ideas under the second theme were proactive stress management and the use of workplace resources. Proactive stress management and utilization of workplace resources further supported resilience. Participants reported engaging in mindfulness, self-care, and institutional programs aimed at mental well-being. One participant shared, "I have to be mindful, I have to relax, and be calm" (IDI1), while another highlighted organizational support, "We have modules... regarding mindfulness... and services if you're feeling overwhelmed" (IDI6).

Access to physical wellness programs, such as exercise facilities, also contributed to stress reduction. IDI2 noted that in the hospital they work, they are provided with a gym and have regular zumba every day and some can go and exercise there.

Insights and Recommendations

The third domain, summarized in Table 3, outlines participants' insights and recommendations, which are categorized into organizational and systemic improvements, strengthening coping mechanisms, and structural and educational reforms.

Table 3

Insights and Recommendations to the Fellow Pharmacists and Other Stakeholders

Core Ideas	Essential Themes
- Enhanced staffing and workload distribution - Flexible scheduling and shift management - Improved leadership and communication - Technology and workflow optimization - Balanced approach to patient care and realistic performance metrics	Organizational and Systemic Improvements
- Burnout prevention and intervention Programs - Clear boundaries between work and personal life - Encouraging Self-Care Practices	Strengthening Coping Mechanisms and Resilience
- Reforming pharmacy education - Policy advocacy for better working conditions	Structural and Educational Reforms

Organizational and systemic improvements focused on addressing root causes of burnout through better staffing, workload distribution, and leadership practices. Participants emphasized the need for supportive management and efficient systems. Participants highlighted the importance of leadership, the integration of wellness programs, and flexible scheduling. As they said:

- “Prioritizing adequate staffing... and delegate the task” (IDI2)
- “Leaders should encourage teamwork and provide assistance when needed” (IDI3).
- “They have a pilot study of having four days of work and three rest days” (IDI6).

Strengthening coping mechanisms and resilience involved promoting self-care, mental health support, and clear work-life boundaries. Participants emphasized intentional detachment from work and engagement in personal activities. Access to psychological support services and stress management programs was also recommended. One participant stated,

“I don't bring work during my days off... I always reward myself after work” (IDI1),

while another emphasized the importance of rest,

“You need to be intentional to have boundaries between work and personal life” (IDI6).

Structural and educational reforms highlighted the need to prepare future pharmacists for real-world challenges. Participants suggested integrating resilience training, stress management, and practical coping strategies into pharmacy education. One participant reflected, “If only during our college years, we were made aware of how mentally draining it is... we will be more effective” (IDI7). Additionally, fostering open communication and support networks within institutions was emphasized.

DISCUSSION

The findings of this study underscore the pervasive nature of burnout among Filipino pharmacists and the critical role of resilience in sustaining their practice. The identification of structural and cultural drivers, specifically excessive workload, workforce shortages, and high-pressure environments, is consistent with a previous study, which noted that such causes of burnout are increasingly prevalent in the pharmacy profession (Cline & Mehta, 2022). Participants in this study highlighted how fast-paced environments and strict regulations in international settings, such as Dubai, exacerbate stress – a finding that aligns with a previous study regarding the challenges faced by those in direct patient consultation roles (McQuade et al., 2022).

The psychological and physical toll of these stressors is significant. The emotional exhaustion and mental strain reported by participants mirror the standard symptoms of burnout described by Jones et al. (2021), who found that a high percentage of pharmacists present a medium to high probability of burnout. Furthermore, the reported decrease in the quality of patient care and meaningful interactions due to burnout supports the findings of Dee et al. (2023), who argued that emotional fatigue lowers the quality of care and increases the risk of medication errors.

Despite these challenges, Filipino pharmacists demonstrate resilience through efficient adaptation. This aligns with Labrague's (2021) research, which suggests that individuals with higher psychological resilience exhibit more effective coping mechanisms when facing adversity. Participants utilized strategies such as team collaboration, social support, and time-management tools like the Eisenhower Matrix, which resonates with the cultivation of resilience through self-care and peer support previously proposed (Chisholm-Burns, 2019). Additionally, the association between these adaptive approaches and improved recovery capacity supports Weiss et al. (2024), who linked resilience with better job performance and problem-solving skills in difficult workplace scenarios (Weiss et al., 2024).

Finally, the study highlights the necessity of systemic reforms. The call to integrate stress management and resilience training into pharmacy curricula aligns with the recommendations of Pappa et al. (2021), who emphasized that resilience-building efforts must be institutionalized (Pappa et al., 2022). This is particularly crucial for younger pharmacists who may feel a lack of control at the start of their careers, as previously noted (Danganan et al., 2019). The findings ultimately support the Transactional Model of Stress and Coping by and Folkman (1984), suggesting that addressing burnout requires a collective effort involving supportive workplace cultures and proactive leadership to ensure both pharmacist well-being and patient safety (Folkman, 2013).

CONCLUSION

This study shows that Filipino pharmacists experience significant burnout driven by heavy workloads, limited institutional support, work-life imbalance, and workplace pressures, both locally and abroad. These challenges negatively affect their well-being and the quality of patient care, underscoring the urgent need to improve workplace conditions, leadership support, and policy implementation.

Despite these difficulties, Filipino pharmacists demonstrate resilience through teamwork, adaptability, and proactive coping strategies, such as self-care, boundary-setting, and the use of available support systems. These approaches help maintain their emotional stability and professional performance, emphasizing that resilience is continuously developed through both individual effort and supportive work environments.

The findings underscore the need for systemic changes, including better staffing, effective leadership, wellness programs, and improved workflow systems. Strengthening work-life balance, expanding access to mental health support, and integrating resilience training into pharmacy education are also essential. Collaborative efforts among institutions, policymakers, and practitioners are crucial to create supportive environments that protect pharmacists' well-being and sustain high-quality pharmaceutical care.

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