



Perceptions of Pharmacist-Led Hypertension Management in a Black Barbershop

Sarah Chong, PharmD; Crystal Zhou, PharmD, APH, AHSCP, BCACP • Walgreens at University of California, San Francisco (UCSF)



University of California
San Francisco

BACKGROUND

- The attributable risk for hypertension and 30-year all-cause mortality is nearly double for non-Hispanic blacks as compared to non-Hispanic whites.¹
- Black men have lower rates of physician interaction as compared with black women² and blood pressure is higher than recommended in 70% of black men living with hypertension in the United States.³
- There is evidence that black-owned barbershops can be transformed into effective hypertension referral and management centers.⁴
- However, there are no current studies that identify the perspectives and preferences of black male patients regarding where they would like to receive care since their interaction with physicians in an office setting is lower.
- Furthermore, the previous barbershop model included barbers and patrons that were highly incentivized, which resulted in high costs. Thus the sustainability of this model is unknown.

OBJECTIVES

- The primary objective of this project is to determine patient satisfaction and perceptions of pharmacist-led hypertension management in a black-owned barbershop setting.
- The secondary objective of this study is to identify aspect of a sustainable and inclusive care model.

METHODS

- **Study Design:** Prospective cross-sectional study conducted via survey and interview.
- **Study Location:** Chicago's Barbershop, located in San Francisco, California.
- **Enrollment:** In the process of obtaining their haircut, individuals will be asked by their barber or the pharmacy team to take part in a survey study that we are conducting. Upon acceptance, the individual will be ushered over to the Pharmacy staff who will conduct the survey. The pharmacy staff will also offer an optional blood pressure screening as an additional service.
- **Survey:** Participants will be asked to complete a survey that evaluates (1) patient's perceptions of pharmacist-led interventions, (2) patient preferences for different practice settings, and (3) social barriers to receiving care.

RESULTS

- Study in progress

CONCLUSIONS

- Study in progress

REFERENCES

1. Lackland, Daniel T. "Racial differences in hypertension: implications for high blood pressure management." *The American journal of the medical sciences* vol. 348,2 (2014): 135-8. doi:10.1097/MAJ.0000000000000308
2. Victor, Ronald G et al. "Factors associated with hypertension awareness, treatment, and control in Dallas County, Texas." *Archives of internal medicine* vol. 168,12 (2008): 1285-93. doi:10.1001/archinte.168.12.1285
3. Cutler, Jeffrey A et al. "Trends in hypertension prevalence, awareness, treatment, and control rates in United States adults between 1988-1994 and 1999-2004." *Hypertension (Dallas, Tex. : 1979)* vol. 52,5 (2008): 818-27. doi:10.1161/HYPERTENSIONAHA.108.113357
4. Victor, Ronald G et al. "A Cluster-Randomized Trial of Blood-Pressure Reduction in Black Barbershops." *The New England journal of medicine* vol. 378,14 (2018): 1291-1301. doi:10.1056/NEJMoa1717250

DATA ANALYSIS

- Qualitative and quantitative data were assessed via in-depth interviews and a post-intervention survey.
- Descriptive statistics were used to analyze basic demographic information and patrons' responses to the survey.
- Frequencies of each category and answer choice were analyzed.
- All other survey questions were assessed through a Likert scale and further analyzed using chi-square and logistic regression.

Barbers and pharmacists: Mighty allies in the war on hypertension

