Exploration of Pharmacist Opinions and Knowledge of Recreational Drug Checking

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Introduction:
Drug checking services (DCS) were legalised in Aotearoa New Zealand in 2020, marking a world first. Existing delivery models operate predominantly in festival and pop-up settings which, while effective, are less accessible to smaller communities, limiting the harm reduction (HR) potential of DCS. Pharmacists have a well-established role in harm reduction, including needle exchange and opioid substitution therapy (OST), yet little is known of their knowledge of drug checking and DCS, their attitudes toward it, and their potential willingness to offer drug checking as a service.

Methods: *A cross-sectional mixed-methods survey was distributed to New Zealand pharmacists via the NZ Pharmacy Council research mailing list, professional networks, and social media platforms.*

Results: *A total of 213 pharmacists participated, with the majority working in community pharmacy full or part time (n=169, 79.3%). Just over half of community pharmacists (54.7%) reported willingness to offer DCS. Respondents almost universally perceived benefits of drug checking (99.4%), primarily through reducing substance-related harm in the community. Key motivating factors for offering DCS were remuneration (92.9%) and access to adequate training (83.4%). Despite this, nearly all respondents (98.2%) identified barriers to pharmacist involvement in drug checking, with staff time and availability cited as the primary barrier (81.1%).*

Discussions and Conclusions: *Community pharmacists in New Zealand recognise the value of DCS as a HR intervention and acknowledge their potential role in improving its accessibility. While the degree of willingness was promising, systemic barriers remain. Successful service implementation would require education, extensive training, professional support and public funding.*

Implications for practice and communities: *The integration of DCS as a pharmacist-led service may present a promising approach to improving accessibility and health outcomes in the community.*

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