

# PART 1

## KEY MESSAGES

- Access to quality medicines and competent, capable health care professionals are fundamental aspects of any health care system. Pharmaceutical human resources should ensure the uninterrupted supply of quality medicines to the population, their management, and responsible use, as vital components in improving the health of nations.
- Multi-stakeholder collaboration incorporating best available evidence is required to inform needs-based pharmaceutical human resources planning. When relevant, well-informed stakeholders partner to address workforce issues, there are greater possibilities for coordinated workforce planning and implementation.
- Pharmacy workforce per capita varies considerably between countries and regions and generally correlates with country level economic development indicators. Countries and territories with lower economic indicators, such as those Africa, tend to have relatively fewer pharmacists and pharmacy support workers. This has implications for observed inequalities in access to medicines and medicines expertise. In addition, some countries and territories have many times more pharmacies than pharmacists, which may imply a renewed need for supervision of medicines and medicines use.
- Strategic frameworks and policies related to the pharmacy workforce are being successfully developed and implemented at the country level through multi-stakeholder processes involving ministries of health, health professional associations, regulators, and educators to drive and achieve both competence and practitioner excellence for care quality.
- Improving workforce performance productivity, capability and the ability to adapt to new roles is an on going challenge in the increasingly dynamic environment of rising health care costs, increased demand for health services, and increased burden of chronic diseases. Fuelled in part by an increased focus on patient care and inter-professional collaboration, these elements provide the opportunity for pharmacists to use their professional skills to provide safe, high quality, and cost-effective pharmaceutical services for the benefit of populations. Leadership is a key aspect in empowering pharmacy professionals to maximize these opportunities and to innovate and shape their practice.
- Investment in transforming and scaling up professional education is crucial, as education provides the foundation for building a capable health care workforce. The capacity to provide pharmaceutical services in each country is dependent upon having an assured, competent workforce and an integrated academic workforce to train sufficient numbers of new pharmacists and other support staff at both foundation and advanced levels. Ongoing effort is needed to ensure capacity building of skilled medicines expertise meets the pharmaceutical health needs of populations.
- A needs-based education strategy allows local systems to best assess the needs of its community and then develop (or adapt) the supporting educational system to produce a workforce relevant to these needs. National health care demands are diverse and complex, often varying widely within and between regions. Although broad and general frameworks may be beneficial at the macro level, a “one-size fits-all” system does not offer the authenticity needed for full engagement and sustainability at the local level.
- Pharmaceutical Human Resources continue to be a priority issue for FIP Education initiatives (FIPeD) to engage collaboratively with all stakeholders; we need to work together towards developing a profession that can meet present and future societal and pharmaceutical health needs around the world.

[www.fip.org/education](http://www.fip.org/education)

# PART 7

## SUMMARY

As governments, health care systems, and communities strive to provide quality, effective and safe health care to their populations, resource constraints will continue to raise the question of how to best use available resources; equally important is how to better use future health resources. In a global context of repeated “calls to action” from international bodies, it is clear that a strong focus will remain on the provision of adequate and capable human resources for health. For the global pharmacy workforce, this is a time when opportunities are opening up for the profession to innovate, add value to health care systems, and improve health through ensuring the responsible use of medicines.

The 2012 FIP Global Pharmacy Workforce Report presents the current pharmacy workforce situation in 90 countries and territories around the world, representing nearly four million pharmaceutical human resources for health. Analyses in this report reveal a pharmacy workforce distribution and composition with wide variance across (and within) countries and territories. Meanwhile, Africa remains the region with the most intense pharmacy workforce crisis, having the least capacity to provide appropriately supervised pharmaceutical services for their populations. Pharmaceutical human resources capacity building is a priority in several African countries and strategies from three of these countries (Ghana, South Africa and Tanzania) are presented in depth in this report. Collaboration at every level ensures that well-coordinated pharmaceutical human resource planning takes place and that strategic plans are successfully resourced and implemented.

The nine case studies in this report provide examples of the challenges, strategies, and outcomes achieved in the area of pharmacy workforce planning, management, and development in varying settings from low to high-income and small to large populations. Overall, these case studies identify similar challenges, including: significant workforce shortages and distribution imbalances, lack of integrated workforce planning, the need for transforming pre-service education and continuing professional education, ensuring appropriate skills mix and clear role definition as well as the challenge of assessing professional and clinical roles/performance. However, the approaches taken to tackle these challenges differ and important lessons can be learned from each separate case study. In reviewing each separate country’s needs and strategies, the importance of having a needs-based approach to the provision of quality pharmaceutical services and pharmacy education is reinforced.

Needs-based professional pharmacy education is the foundation for the development of a competent and capable pharmaceutical workforce. This report highlights the status of pharmacy education with data from 90 countries, including over 3800 educational institutions that educate and train pharmacists and the pharmacy support workforce. These institutions must be socially accountable to and play a key role in delivering a pharmacy workforce that is capable and adaptable to local needs.

The key themes identified throughout the case reports are concerned with leadership, partnership and collaboration. There is a strong sense of the importance of empowering pharmacists to be leaders in health care and their communities, and to be innovators in order to best face the challenges ahead in improving health. Multi-stakeholder collaboration is identified as an additional important factor for progressing and improving the pharmaceutical human resources in every country FIP strongly endorses workforce solutions that are based on collaborative best practice and the formation of strong national (and regional) partnerships; FIP Education Initiatives is committed to the principles of sharing best practice.

FIP has collaborated closely with WHO in pharmacy education and the pharmacy workforce, and as such, it is important for FIP to be actively involved in the development and dissemination of the newly adopted WHO Guidelines on Transforming and Scaling up Health Professions Education (see Part 6). These guidelines present evidence-based information and guidance that is relevant to consider, adapt, and apply in every country context. It is equally important to realise that we are at the initial stages of mapping the international workforce and associated influences. From this perspective, we are only just beginning to recognise the enormity of the task facing workforce developers and professional leadership bodies; this will be a sustained global effort.

FIP is committed to fostering a greater understanding of the global pharmacy workforce and invites all actors not just to read this report but to actively participate and share experiences and strategies in addressing pharmacy workforce challenges through the global FIPeD platform and communities of practice.

Reports such as this, and the previous 2009 Global Pharmacy Workforce Report, have set out to recognise the major challenges facing both the profession and global healthcare systems. The quality, scope and capability of the workforce are dependent on the nature of initial and life long professional development curricula, and the quality of available practitioner support and recognition structures. It is crucial that professional leadership bodies, and their stakeholder partners, consider and act to ensure that the talents developed at the educational level impact the access to, and quality of, medication use. The 2020 Vision and mission adopted by FIP, recognises this important linkage between lifelong professional education and innovation, and driving health care improvement.