According to the World Health Organization (WHO), there is a projected shortfall of 18 million health workers by 2030, mostly in low- and lower-middle income countries. In addition, countries at all levels of socioeconomic development will, to varying degrees, face difficulties in the education, employment, deployment, retention and performance of their workforce.1

Acknowledging that there can be no health without a healthcare workforce, access to healthcare services and achieving universal health coverage (UHC) depends on enabling equitable access to a well-educated, trained and properly distributed health workforce. Meeting the health and pharmaceutical needs of society can only be achieved if a flexible and adaptable pharmaceutical workforce is developed and deployed appropriately to apply its knowledge, skills, attitudes, behaviours and abilities to the maximum as part of a multidisciplinary healthcare team.2

Moving towards the deadline established by the United Nations (UN) to achieve its Sustainable Development Goals (SDGs) by 2030, the International Pharmaceutical Federation (FIP) has pledged to support the achievement of these goals through implementing the FIP Development Goals (FIP DGs).3 The FIP DGs align with FIP’s mission to support global health by enabling the advancement of pharmaceutical practice, sciences and education, and they are set to transform pharmacy in alignment with the wider global imperatives underpinning the UN SDGs. The FIP DGs bring science, practice, and workforce and education into one transformative framework for our members and the wider profession.

Building on years of experience and resources from FIP on pharmacy and pharmaceutical science education, and bearing in mind the narrative that there can be no pharmacy practice without a pharmaceutical workforce and no pharmaceutical workforce without educational and scientific foundations, in October 2021 FIP organised the FIP-UNITWIN4 regional workshops on pharmaceutical education in collaboration with FIP’s member academic institutions, professional organisations and key pharmacy stakeholders across the six WHO regions, namely, the American, African, European, Eastern Mediterranean, South-East Asian and Western Pacific regions. These workshops identified strengths, weaknesses, threats and opportunities in pharmacy and pharmaceutical sciences education, and identified priority FIP DGs for pharmaceutical education in each region. The workshops resulted in regional
roadmaps, co-created by the participants, to provide systematic and concerted frameworks to advance and transform pharmaceutical education globally, one region at a time.

Through the FIP-UNESCO UNITWIN Centre for Excellence programme on pharmaceutical education, FIP will bring academic institutions, professional organisations and key pharmacy stakeholders to collaborate, to share knowledge, innovations and expertise, and to learn from each other, within and across regions and with FIP. FIP aims to implement all these roadmaps and report progress on the implementation of the FIP DGs at a proposed Health Ministers Summit in 2023 and up until the 2030 to achieve UN SDGs through FIP DGs.

Building on the findings of the workshops and the roadmaps, FIP is issuing a “FIP global call to action for advancing pharmaceutical education” to advocate a needs-based, concerted, strong and effective approach to improving and advancing pharmaceutical practice and sciences through education, now and in the future.

FIP calls on academic institutions, professional organisations, policy makers and key pharmaceutical stakeholders around the world to:

1. Increase academic capacity to provide a competent pharmaceutical workforce through education and training programmes that are fit for purpose, according to regional and national health needs;
2. Support the creation of clear and purposeful education and training pathways and programmes to support postgraduation foundation training;
3. Create awareness and broaden information on the opportunities that exist in academia for early career pharmaceutical workforce and engage with practitioners for teaching;
4. Support the development of early career and advanced specialist frameworks to support a seamless transition into early career practice and towards advanced practice, building on existing, regional and global frameworks;
5. Ensure the quality of the pharmaceutical workforce by quality assuring pharmaceutical education and training, and meet minimum national standards for education and training infrastructure, educators and student support in order to ensure access to quality education for all;
6. Develop and support the implementation of fair, effective and transparent policies and procedures for quality assurance of pharmacy and pharmaceutical science education and training;
7. Identify emerging, needs-based competency development areas, such as access to medicines and services, antimicrobial stewardship, communicable diseases, digital health and patient safety, and support the development of national foundational
8. Support the development of people skills, such as leadership and entrepreneurship, for academics, students, pharmacists and pharmaceutical scientists;

9. Enhance interdisciplinary and interprofessional education and collaboration with key stakeholders, including governments, national and international health and pharmaceutical organisations, and patient advocacy groups;

10. Establish alliances between universities and professional organisations to develop policies, facilitate educational partnerships, and conduct regional and global faculty exchanges for building capacity and sharing knowledge;

11. Promote continuous professional development (CPD) strategies and self-directed learning from the undergraduate level to postgraduation, including building CPD portfolios for academic staff and students;

12. Support the development of CPD programmes, including programmes for return to practice after career breaks and sector changes, and engage with practice sectors to provide career development and learning pathways for the pharmaceutical workforce;

13. Provide enabling and equitable working conditions for the academic workforce, support gender equity and address inequities in education for students;

14. Ensure pharmaceutical education is grounded in human rights, based on principles of equity, equality and social justice, encompassing an ethic of care, reciprocity and solidarity;

15. Support students to gain greater awareness of social accountabilities and environmental responsibilities and empower them to take value systems forward to transform their environments;

16. Generate pharmaceutical education intelligence to measure educational impact and outcomes, and to inform investments in pharmaceutical education;

17. Support the amendment and implementation of existing health and pharmaceutical policies in favour of professional recognition of pharmacists and pharmaceutical scientists, advocate allocation of resources to increase academic capacity, and empower academic staff to provide advocacy and
policy development at national and regional levels; and

18. Develop and implement regional and national pharmaceutical education policies that respond to the emerging and expanding scope of pharmaceutical practice and sciences for the social, societal and economical sustainability of the profession.

The above actions urgently need to be taken in order to advance pharmaceutical science and practice through transforming pharmaceutical education at all levels.

FIP commits to:

1. Providing its intra- and inter-regional networks, platforms, expertise, capacity, resources, guidance and global standards, to advance pharmaceutical education, training and research;
2. Setting up FIP-UNITWIN centres for excellence to address the tailored needs and priorities of pharmaceutical education within and across all regions;
3. Advocating policies that will influence advancement of training and education of the pharmaceutical workforce; and
4. Transforming and scaling up pharmacy education by ensuring high-quality and fit-for-purpose education and training to provide the foundation for workforce development, and professional and scientific advancement.

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FIP GLOBAL CALL TO ACTION FOR ADVANCING PHARMACEUTICAL EDUCATION

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Bibliography

1. World Health Organization Health workforce. [Accessed 11 November 2021.] Available at: https://www.who.int/health-topics/health-workforce#tab=tab_1

