Global Pharmacy Workforce





SECTION #1

Pharmacy workforce in numbers

5.57 million pharmacists licensed or registered worldwide based on data from 83 countries covering 71% of the global population (5.7 billion people).

2.07 million actively practicing * pharmacists identified in submissions from 59 countries.

* A pharmacist who is currently active in the provision of pharmacy services in the country.

Mean pharmacist density: **9.55** pharmacists per **10,000** people. High-income countries have **3.2 X** more pharmacists than low-income countries.

High-income countries: 12.1 per 10k / Low-income countries: 3.8 per 10k. (Europe's pharmacist density is 7.8 times higher than Africa's).







Of 157 countries invited to contribute to a survey on global pharmacy workforce, and 147 having FIP member organisations in their country.

SECTION #2

Demographics of Pharmacists

Globally, **65%** of pharmacists are women — projected to reach **69%** of the profession by **2030**.



2030: **69**%

Gender balance among pharmacists shows significant regional variation for example: In the African and Eastern Mediterranean regions, male pharmacists predominate, with females comprising 48% and 45% of the pharmacist workforce in the respective regions.



48%

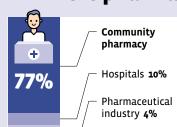
45%

45 countries reported **30.8%** of pharmacists under the age of **35 years old**.

30.8%

SECTION #3

Where pharmacists work





70%

6%

Zambia leads with 70% hospital pharmacists, while Europe averages just 6%.

SECTION #4

Schools of Pharmacy



1,011 schools of pharmacy reported across 73 countries. Of 62 countries that provided accreditation data, **89%** of pharmacy schools are accredited **.

50% Countries ≤ 0.52

50% of countries have **0.52** or fewer pharmacy schools per million population, with a global range from 0.05 to 6.39 (n=73).



6.39 per mln people

3.71 per mln people

Per million population, Cyprus (6.39) and Bosnia (3.71) have the highest number of pharmacy schools.



71% of countries surveyed have fewer than the global average of **0.80** pharmacy schools per million people.

Reference FIP Workforce Surveillance Survey Findings (2023).

^{**} Certified by an external organisation that has the authority to define and use agreed standards to evaluate and accredit the overall quality of schools providing education and training to pharmacists or pharmacy support workforce.

Why this matters and next steps for FIP







Pharmacists ensure safe, effective use of medicines — from community care to advanced clinical roles.

SECTION #5

Key messages



Without fair distribution, quality education & modern practice rights, millions lack access to essential healthcare services.



A sufficient and skilled pharmacy workforce is critical to achieving universal health coverage (United Nations Sustainable Development Goal 3).

SECTION #6

The risks

of replacing pharmacists with untrained health workers

- Increased medicine errors and adverse drug events
- Poor patient education and medicine adherence
- Reduced interprofessional communication and care coordination
- Higher healthcare costs and economic inefficiencies
- Adverse impact on chronic disease and public health
- Diminished valuebased care models

Reference:

International Pharmaceutical Federation (FIP). Global Situation Report on Pharmacy 2025: Workforce, Practice and Policy. Chapter 2: The 2025 global pharmacy workforce review: Capacity, competence and coverage. The Hague: International Pharmaceutical Federation; 2025. https://www.fip.org/file/6352



#1 Governments & health ministries

- Funding for retention packages to include competitive pay, career-path incentives, rural hardship allowances.
- Build real-time workforce information systems for effective deployment and migration management.

#2 Regulatory bodies & policymakers

- Modernise legislation to allow pharmacists to vaccinate, prescribe under protocol and accredit pharmacy specialisations pathways, in line with FIP recommendations.
- Establish national competency frameworks and CPD requirements, based on the evidence and existing FIP resources.

SECTION #7

#3 Educational institutions & educators

- Align pharmacy curricula with the FIP Nanjing Statements and future workforce
- Expand training capacity to meet national demand

#4 Professional associations & pharmacy leadership

- Support continuing professional development (CPD) and career advancement.
- Promote integration of pharmacy into interprofessional care models.

#5 International partners & funders

- Invest in pharmacy workforce development, especially in low- and middle-income countries.
- Contribute to global workforce surveillance and research initiatives.

"Think Health, Think Pharmacist' is more than a campaign — it's a call to action. Pharmacists are crucial to the safe use of medicines, chronic disease management, and public health delivery. Investing in them is investing in stronger health systems."

Paul Sinclair,

President International Pharmaceutical Federation (FIP)

