Diversity, value and communications: these three terms may not, at first glance, appear to be very inter-related but they seem to be repeatedly rising to the surface of a wide range of recent discussions. While reading a TIAA-CREF article shortly before the deadline for this editorial arrived, I chuckled to think that the one obvious place the terms converge is with respect to our retirement portfolios. Certainly we care about how the diversity of our holdings contributes to their value. We care equally, especially in these times of dubious dealings by those in the financial sector, about the quality, clarity, and integrity of the messages we receive from those in whom we have entrusted responsibility for our future financial security.

Where else have these terms surfaced? Is there a parallel connection between these terms in different contexts relevant to pharmacy education? There are at least three: our student bodies, colleges and schools of pharmacy, and AACP itself.

Today’s Pharmacy Students

Throughout most of our profession’s history, the face of pharmacy, like virtually all health professions, was homogenous. It was only in the 1970s that women became integrated in a significant way into classes of pharmacy students that had been dominated for over a century by Caucasian males. The gender change became so significant, with female students comprising two thirds or more of most pharmacy classes since the 1980s, that we stand at the point in 2003-04 when female pharmacists will soon become the majority of licensees in the profession.

While striking, that is not the diversity of greatest significance today. To create a health profession poised to best serve an increasingly diverse US population, pharmacy must be a profession that men and women of all races and ethnic groups aspire to join. The Supreme Court decision this summer on affirmative action in admissions at the University of Michigan affirmed that race and ethnicity can be a factor used in selecting students as long as it is done in an appropriate way. The Court held that there is a compelling societal argument to be made for assuring that diversity is achieved. The argument is about both opportunity and the importance of a diverse student body to instilling cultural competence in our graduates. AACP will be sharing additional insights into the lessons learned from the Michigan case with members soon to assist with future admissions decisions that, as one priority, work to ensure that the face of pharmacy has diversity that mirrors the society we serve.

Here, too, pharmacy has made progress. Earlier this fall one of our newest schools held their first commencement ceremony. Thirty-five new pharmacists walked across the stage and their parents or another significant person assisted with their hooding as Doctor of Pharmacy graduates. What was truly striking was the class statistic that these 35 individuals were from 11 distinct ethnic groups!

Pharmacy has much to gain from continuing to diversify its student body and practitioner population. This is the “value” part of the story. We approach a day in the United States when there will be no single majority population. There are large cities that have already achieved this status. If our schools approach learning in a multicultural environment in a progressive manner, our students will come to understand differences in the health-seeking behaviors and health beliefs in varied cultures. In turn, our graduates’ abilities to understand and to serve a diverse population of patients will be enhanced.

As diverse as our classes may have become there is still work to be done. Pharmacy, medicine, dentistry, and other disciplines still fail to attract significant numbers of students from the truly underrepresented minority groups. Notably, African Americans, Hispanics, and Native American populations still are not entering our programs in numbers proportionate to the overall population.
There are numerous reasons that this continues to be the case and pharmacy alone cannot address all the root causes. However, our communications strategies can be designed to reach into these cohorts of prospective learners to ensure that young people from all racial and ethnic groups get excited about the tremendous opportunities pharmacy offers its graduates today. We must, through our individual and collective messages, articulate the promise of a fulfilling career in one of many avenues of service, all of which provide enviable salaries and career security. It is AACP’s sincere hope that the forthcoming PBS program on pharmacy will lend new energy, power, and reach to our communications efforts. The core of that public education program is a 1-hour broadcast on contemporary pharmacy education, practice, and science.

US Colleges and Schools of Pharmacy

Diversity, value, and communication are equally applicable to the institutions that comprise the pharmacy academy. In the past year I have made numerous school visits to participate in white coat ceremonies, retreats, and commencement exercises and to provide lectures. While cliché, it is true that “when you have seen one school of pharmacy you have seen one school of pharmacy”!

Our professional degree programs may be accredited to a single standard, but the manner in which each institution approaches it differs greatly. Each institution has a distinctive strength and in some cases the complexity of the program is such that there are numerous centers of excellence or defining programs. Clearly research strength defines some programs, while others focus on preparing graduates for a particular need within the profession (eg, primary care, rural practice). While scholarship must be an essential component of the role of all faculties, there is great diversity across the realms of discovery, translation, and pedagogy.

This fall I had a school visit on the campus of an established school of pharmacy located in an academic health center and then just 3 weeks later delivered an address to the inaugural class of a brand new, freestanding college of pharmacy. At the older school, its 50-plus strong faculty engaged in Nobel-competing research supported by millions of dollars of public and private grants. The program was housed in multiple buildings on campus to accommodate the size and complexity of the program that was organized in distinct departments for disciplinary collaboration. Programmatically, the college managed the full range of student affairs and faculty affairs committees and organizations. The curriculum was delivered in traditional semester courses enhanced by both early and advanced experiential learning.

The early and advanced experiences were just about the only common denominator found in comparing the established school to the newest program to graduate professional degree candidates. The newer school’s faculty was small in number but diverse in talent. A decision had been made not to departmentalize to maximize integration of content throughout the curriculum. Material was taught in blocks such that a course master would teach in lecture and active learning exercises for 6-hour days for a period of up to 5 weeks. Student mastery of material on that particular block must be demonstrated at or above 90% or remediation activities were required. Early experiences consumed 1 full day every other week from the first week of learning until the class entered advanced practice rotations. While the program was still young and, in fact, not yet settled in a brand new 100,000 square foot teaching and learning facility, the block system leaves faculty with months at a time to develop their practice and research programs without the responsibility for teaching.

In a few short weeks I had seen first hand the diversity in pharmacy education programs. I returned to the office thinking, “We must have better measures of quality than we currently use to allow such distinct programs to affirm that, no matter what approaches they may use, we are producing graduates with similar competencies.” Ironically, the same weekend that the commencement was taking place, the AACP standing committees were meeting to address the charges set forth by President Kerr. This was exactly what he had asked the Academic Affairs Committee to do, and soon their report will offer colleges and schools a framework for assessment that will enable all to evaluate value in the face of diversity. The Professional Affairs Committee examined issues associated with the quality of the experiential component of our curriculum. The Research and Graduate Affairs Committee examined issues of quality in our scholarship and research programs.

Today, schools communicate their “value” by claiming 100% passage rates on our national licensure examination and/or the magnitude of NIH research dollars. While certainly meaningful metrics, AACP hopes that more mature models of evaluation will lend additional measures for schools and programs to use to assess and communicate excellence in all aspects of our complex educational programs.

AACP

This brings us to AACP and its diversity, value, and communication. We are an organization of diverse or-
ganizations, but we are more than that. Most of AACP’s sister organizations representing schools and colleges of the other health professions are just that – organizations of organizations. In those cases, the CEO deans are the only individuals with active roles to play. AACP is a hybrid organization of both institutional and individual members. Through sections and special interest groups, we find members whose interests range from basic biomedical to applied psychosocial areas. There are pharmacists and nonpharmacists and individuals whose assignments and contributions range from virtually 100% teaching to 100% research.

How do we deliver value in the face of such diversity? You told us that what you look for, regardless of section affiliation, is professional development in your role as an educator, information to remain up to date with respect to changes in pharmacy education, and networking opportunities. You like to learn and to learn from each other. Our meetings and our publications, and increasingly our electronic linkages, are designed to deliver that value to members.

Our priority for 2004 is to strengthen our communications effectiveness. We hope to ensure that our messages express that even with our diversity one thing is central to the work of AACP and its members – excellence in education. Our programs and services are designed to support your efforts to deliver excellence in all the diverse ways it is undertaken. We plan to expand our communications with external stakeholders by getting academic pharmacists to a variety of forums hosted by other disciplines to discuss the contributions our faculty and graduates can make to quality healthcare. We also plan to convene an external advisory council to bring stakeholders from outside pharmacy education to our table to review the progress we have made in our programs and to seek their counsel on how to strengthen them further.

Diversity, value and communications – these are our watchwords, which, when blended in the right measure, yield excellence in education.