ENSURING ACCESS TO EDUCATION IN PHARMACY FOR ALL STUDENTS
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BACKGROUND. If we are serious about diversifying the pharmacy and healthcare workforce, we must be serious about providing access to quality education programs for diverse groups of students. More work must be done to level the playing field, an objective aligned with FIP’s WDG1 for academic capacity, which emphasizes standards to ensure access to quality education for all students.

AIMS. 1) To explore research concerning access to quality pharmacy education for underserved populations.

METHODS

Inclusion criteria
- Published between 1990 and 2016
- Research or systematic review articles
- Focused exclusively within the field of pharmacy
- Explore diversity and access for underserved populations

Search formulas used
- [(pharmacy AND (diversity) and (education OR educational OR educating)]
- [pharmacy AND diversity]

Potentially relevant references identified and screened for retrieval (n= 604)
- ERIC: 11
- PubMed: 113
- IPA: 97
- ProQuest AJPE: 372

RESULTS. Our search yielded seven research studies concerning access to quality education for all students (see below). Two of the studies focused on the barriers of standardized tests for underrepresented students. The remaining studies focused on pre-college experiences, motivation to attend pharmacy school, and student demographics such as family background.

- Anderson, D.C et al. (2008). Influences on pharmacy students’ decision to pursue a doctor of pharmacy degree.
- Awe, C. et al. (2010). Theoretical and conceptual framework for a high school pathways to pharmacy program.
- Vongvanith, V. V. et al. (2012). Diversity characteristics of the 2008-2009 pharmacy college application service applicant pool.
- White, C. et al. (2013). Institutional strategies to achieve diversity and inclusion in pharmacy education.

CONCLUSIONS. While the lack of research is alarming, it provides an opportunity address a critical need in pharmacy education. We provide five questions for future research based on three key areas (i.e., accountability, pipeline, and finance) that were consistent with the underlying theory and literature concerning access to quality education for students in pharmacy, health professions, and higher education internationally.5

1. How is access to underserved populations defined in pharmacy education?
2. What are key stakeholders’ perceptions and expectations of access to underserved populations in pharmacy education?
3. How are schools of pharmacy purposeful in ensuring access for underserved populations?
4. To what extent are schools of pharmacy accountable to their stakeholders concerning access for underserved populations?
5. How might increasing access to pharmacy education for underserved populations impact the reputation, ranking, credibility, and prestige of quality schools of pharmacy?

References