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THE PROFESSIONALIZATION IN PHARMACY

Lokesh Kumar*¹, Navneet Kumar Verma¹, Asheesh Kumar Singh¹

¹*Buddha Institute of Pharmacy, Gida, Gorakhpur, Uttar Pradesh, India-273209.

ABSTRACT

The investigation of how professional identities are formed in health programs in higher education institutions. These programs might use attitudes, values and behaviors deemed representative of practitioners to approach teaching, learning and professional assessment. A professional identity can be developed in the course of this shift by giving students real-world exposure and opportunities to engage with knowledgeable experts. The shift in emphasis towards identity development as a crucial component of professional education is explored in this article along with its consequences for the creation of pharmacy curricula. Technological, social, labor, and financial advances have created a major threat to the traditional role of the pharmacist. As a result of these structural modifications, the field has made an effort to become more professional. Creating professional associations, enforcing tight standards for training and performance and taking on clinical accountability are a few of these measures. These responses are examined in this study. Many projections are developed based on theories of organizations, professions and social movements in order to predict the composition and future trajectory of pharmacy.

KEYWORDS

Professional identity, Pharmacy education, Health professionals and Professionalization.

Author for Correspondence:

Lokesh Kumar,
Buddha Institute of Pharmacy,
Gida, Gorakhpur, Uttar Pradesh, India-273209.

Email: lokeshprajapati313@gmail.com

INTRODUCTION

A 2010 study by the Global Independent Commission into the Education of Health Professionals for the 21st Century found that changes in education are necessary to better prepare graduates working in the health sector. One the panel discussed a number of challenges encountered by those working in the health care sector, such as unequal access to medical knowledge, threats to health security and increasing pressure on staff members. In the context of global health, the panel also noted how unprepared graduates were for these

challenges. The present request came after two others that also sought to revolutionize health education. The first, spurred by the 1910 Flexner report, proposed that science knowledge should be the cornerstone of health education during a period when death rates were sharply dropping¹. Many times, the history of pharmacy is presented in terms of the progression of the profession's social and medical system roles across time. In the industrial age of today, pharmacists have witnessed a shift in their major responsibilities from making pharmaceutical goods from raw ingredients to ensuring the safe, accurate, and efficient administration of pharmaceuticals. But within the past 20 years, the landscape of health care has changed significantly due to the development of new drug delivery and production technologies as well as a thorough restructuring of health care delivery, management, and finance. According to Zacker and Mucha, these environmental shifts have the potential to replace long-standing professional positions, which would diminish pharmacy's standing in the industry².

DECLINE IN SOCIAL VALUE

There are worries over society's overall decline in professionalism and common decency³⁻⁶. Fraud and other professional misconduct incidents from a range of industries highlight the issue of professionalism and the need to address these concerns during university education^{7,8}. Undergraduate students are also guilty of unprofessional behavior since educational institutions are under pressure to satisfy students who believe they should receive preferential treatment. The lowering of standards is what is causing this pressure⁹. It was observed more than a century ago that training in professional conduct was essential to health education. Abraham Flexner's all-encompassing vision for medical education in 1910 included essential professional traits like compassion, kindness, and altruism in addition to technical and cognitive skills¹⁰. The American Pharmacists Association-Academy of Students of Pharmacy and the American Council of

Deans of Colleges of Pharmacy (APhA-ASP/AACP-COD) collaborated to create the Task Professionalism Working Group as one of the first reactions to the evolving pharmacy landscape. Later on, the task committee released a white paper that looked at pharmacy students' professionalism. Ten qualities for professional pharmacists were outlined in the document¹¹. The five points that define pharmaceutical professionalism—passion, care and compassion, integrity and honesty, respect for others and commitment to excellence—were developed from this patient-centered viewpoint¹².

PROFESSIONALIZATION AND IDENTITY

The process of becoming a professional is known as "professional socialization" or "professionalization" and is an essential component of health education¹³. It means gradually becoming someone else. Merton defined professional socialization as "the process by which people go from being students to professionals who have a deep-seated understanding of the values, attitudes, and behaviors of their line of work." As the professional or student develops, this active process has to be supported¹⁴. The term "professional formation" recalls to the past of clerical training and refers to the professionalization of medical education. One example given is the 475-year-old Jesuit formation tradition, in which experience, education, introspection, and service are all considered to be part of core training. The primary goal of these endeavors is to serve others. The Carnegie Foundation for the Advancement of Teaching defines professional formation in terms of three apprenticeships: cognitive, practical, and professional formation^{15,10}. The last one is further defined as "introduces students to the purposes and attitudes that are guided by the values for which the professional community is responsible"¹⁶. The process of professionalization occurs during both practice and education, and is referred to as professional identity formation (PIF). This phrase emphasizes how important identity is to the procedure¹⁷. The process of developing a professional identity as a part of professionalization

was specifically mentioned in the AACCP White Paper on Pharmacy Student Professionalism. Many students have already begun creating their professional identities on the first day of the course^{18,19}

This would be especially true for students who choose to start their formal education at the university before applying to jobs in pharmacies²⁰. However, once enrolled in classes, the student may postpone creating their professional identities until they have a solid understanding of the scientific foundations of pharmacy practice²¹. Professional identity creation is becoming more and more recognized as an essential part of professional socialization in medical education^{12,22-24}.

PROFESSIONAL IDENTITY AND HIGHER EDUCATION

A large amount of study has been done on teaching professionalism as opposed to professional identity, and it offers important guidelines. In his book *Teaching Professionalism: Theory, Principles, and Practices*, Cruess offered crucial guidance to institutions launching professional development programs in the field of medical education²⁴. Schafheutle *et al.* promoted the importance of practice-based experiences in pharmacy education for the advancement of professionalism²⁵. Universities "need to claim their role in professional identity development to prepare graduates for global citizenship, for leadership Qualities and for future practice," according to Trede *et al.*, who also noted on the need for a more united and consistent approach²⁶. Sylvia analyzed how US colleges and pharmacy schools responded to these suggestions. To find out how much the recommendations were implemented in areas like practice, admissions, recruitment, and instructional programs, schools were surveyed. Although professional organizations and white-coat ceremonies were prevalent, fewer than half of the schools that responded had mentorship programs in place, used professional portfolios, or carried out studies specifically for professional development. The study found that in order to improve professional education, a

consensus definition of professionalism and standardized assessment tools are required²⁷. The "Standards 2016," which are the 2016 ACPE Accreditation Standards for PharmD schools, mention professional growth as one of the four primary educational goals of the PharmD. In recognized PharmD programs, advanced and introductory professional practice experiences (APPE/IPPE) are essential to professional development. Students can engage with both practitioners and patients through these practice-based activities, gradually expanding their professional knowledge and skill set. In accordance with Standards 2016, students must also have experience practicing pharmacy in a range of healthcare environments and alongside other professionals who assist with patient care. It is hoped that these programs will prepare students for the real world and enable them to collaborate with people from different fields²⁷. Researchers in pharmacy education from Australia looked into how curriculum affects students' formation of professional identities. Identity formation was found to be a crucial component of pharmacist education by Noble *et al.* Over the course of four weeks, the authors conducted a qualitative ethnographic research of every year of an undergraduate pharmacy course. They discovered that there were little opportunities for students to interact and experiment with their pharmacist selves. The writers talked about methods for developing one's identity, such as having opportunities to contact with practicing pharmacists, having experiences in the field, and emphasizing patient-centeredness in the curriculum. The writers also noted the importance of consistent feedback in promoting identity development. According to their research, pupils had little opportunity to assess their own identities and minimal exposure to role models who were pharmacists²⁸.

CONCLUSION

Concerns regarding student conduct, graduates who are ready for the workforce and the escalating costs of a health care career have led to an increasing emphasis on the professionalization of health education students. Because pharmacy is moving toward advanced practices and the job is becoming more complex, there needs to be a corresponding development in educational approaches to professionalization. The formation of a more complete professional identity must be a part of the professionalization process, which must also take into consideration the complexity of professionalism and go beyond the simple demonstration of desired attitudes, actions, and values. The significance of real-world experiences—such as working with patients as role models or incorporating the workplace into the curriculum—is highlighted by research on identity development. Since these instructional tactics for identity construction can have a significant impact on students' identity development, it is imperative to include them while developing curriculum. Instructors should introduce the idea of a professional identity to first-year students as a guide for their future rise to the position of practicing professional and higher. Further research in the topic of professional identity development is needed to better inform both effective teaching approaches and evaluation procedures.

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CONFLICT OF INTEREST

We declare that we have no conflict of interest.

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