Dr. Michael O'Connor¹, Dr. Fiona Kelly²

¹School of Pharmacy, Trinity College Dublin, Dublin, Ireland ²Department of Pharmaceutical Sciences, University College Cork, Cork, Ireland

Received: 10-04-2025; Revised: 14-05-2025; Accepted: 24-05-2025; Published: 06-06-2025

Abstract

Education in pharmacy is being greatly changed by the way academic, social, technological, economic and political forces come together. All over the world, these factors are changing what we teach, how it is delivered, what schools focus on and what professional staff are expected to do. Academics today are turning to competency-based learning and encourage students from different fields to work together, so educators need new ways to teach and test knowledge. The awareness of health inequalities, along with a new role for pharmacists in local communities, has resulted in a major focus on cultural competence and patient care in pharmacy schools. Following improvements in AI, training by simulation and digital tools, students in pharmacy are now taught with more real-world examples. Money-saving changes in healthcare are prompting universities and institutes to work more efficiently and clearly show their program results. Political changes to healthcare are shaping the standards, space for practice and licensing of medical professionals. Pharmacy education has a chance to respond to new challenges and open up fresh, unparalleled opportunities to strengthen and modernize itself. Working on each of these areas at once helps schools and educators get ready to pass down the skills needed by current healthcare systems.

Keywords: Pharmacy education transformation, competency-based learning, digital health, healthcare reform, interprofessional training, social determinants of health, educational policy, artificial intelligence in education, economic pressures in academia, political influence on curriculum.

1.Introduction

Pharmacy education is transforming in ways that we can relate to a key transition in its past. The global COVID-19 pandemic has pushed this transformation forward and now means that pharmacy learning must adapt to the new and ongoing needs of healthcare systems worldwide. Although in mathematics an inflection point indicates when a curve shifts directions, in pharmacy education we are now on the brink of needing fresh and considered new paths that move away from the established model.

In recent decades, how pharmacy was taught and how courses were organized followed standard practices that changed only a little over time. The pandemic showed that the old model was not as strong as hoped and stressed why new, flexible and technology-based ways need to be used more. Since the "new normal" exists in pharmacy education, educators and institutions must go over traditional beliefs and pick out which should stay the same and which should be substituted(1). It encourages us to shift towards real change, making flexibility, inclusivity and relevance our main guiding points.

Instead of treating crisis as a risk, businesses can use these moments to help them grow much further. Although the pandemic created many difficulties, it has revealed problems and unfairness in education. As a result, there is now greater consideration for what counts as successful learning, how competencies are measured and which healthcare skills programs should teach. Seeing this change as an opportunity for progress allows pharmacy education to lead in advancements in education.

Many forces academic, social, technological, economic and political are what drive this transformation by interacting in different ways. Also known as ASTEP, these forces affect the environment of pharmacy education and influence how and what changes are made. Understanding these motives helps companies develop effective and lasting plans that work.

Owing to the growing amount of knowledge in pharmaceutical science and clinical practice, educators must create courses that cover everything needed for success in various roles in the industry. Many people are beginning to question the standard of simply passing many fixed courses and are turning to CBE instead. With CBE, what matters

is how much someone has learned, not how much time they have spent in class which helps personalize learning for each person. Because pharmacy's scope is widening and more is expected from professionals every day, people working in this area need to update their skills continuously.

Encourage Adapt Curriculum Innovation Modify educational content Promote creative solutions and leadership skills to meet new needs. 5 Identify Challenges Foster Inclusivity 4 1 Recognize and Ensure equitable access understand current and support for all issues in pharmacy students. education 3 6 **Evaluate Outcomes** Implement Technology Assess the effectiveness of changes and gather Integrate technology to feedback enhance learning experiences.

Cycle of Transformation in Pharmacy Education

Made with 3p Napkin

FIGURE 1 Cycle of Transformation in Pharmacy Education

Social factors have an important part in determining the future of pharmacy education. The population of students is becoming more varied and people are now paying more attention to making education inclusive and fair for all. On top of this, people inside the educational institutions—students, faculty and staff—are experiencing stress and have had mental health concerns for some time(2). To manage these problems, we should support learners in their environments, integrate good health into teaching and encourage them to be more adaptable.

advances bring up opportunities as well as new challenges in today's job market. During the pandemic, using remote learning, virtual simulations, artificial intelligence and adaptive learning platforms helped expose education's opportunities for greater access, personal choice and involvement. Yet, using technology in education brings new problems such as disparity in access, making sure everything is high quality and the training of faculty. Pharmacy education needs to make sure that technology supports and improves how humans interact in the profession, rather than swapping their roles.

There is growing strain in higher education due to increased tuition, lot of student debt and altered funding. As a result of the pandemic, both schools and students faced more serious financial pressures which led to a review of how valuable pharmacy education is. Students are now looking for educational routes that save them money, make their education useful and lead to jobs with fair pay. As a result, many seek out different ways like accelerated training, credentialing offered in modules and better integration with professional fields and future workforce roles.

The rate and character of changes in pharmacy education also depend on political and regulatory factors. To comply with accreditation standards, obey changes in government rules and fulfill what the public expects, higher education must keep evolving. As a result of the pandemic, it is clear that existing regulations do not meet all needs and require more flexibility, stronger base of competencies and better response to health challenges globally. Efforts that include both professional organizations, accrediting groups and schools will play a key role in handling these problems.

These groups together indicate the obstacles as well as the opportunities for changing education in pharmacy. Currently, businesses need leaders with imaginative, brave thinking and a readiness to challenge the norms. It encourages educators, administrators and anyone involved to design new educational approaches that are embracing, ready to adapt, supported by modern technology, financially stable and well-matched to current healthcare delivery. Now that the immediate crisis is over, the goal is not just to get back to how things were before, but to apply this

Now that the immediate crisis is over, the goal is not just to get back to how things were before, but to apply this time as a chance for real progress. Here, you review long-held beliefs, accept the fact that change can be unpredictable and keep improving all the time. Consequently, students learning to be pharmacists can be better trained to collaborate, innovate and lead by developing the skills needed to improve healthcare effectiveness in the face of increasing challenges(3).

In this work, we look at these major forces shaping pharmacy education and relate them to lessons learned during the pandemic. We present ways in which pharmacy councils can support innovation and set policies that help pharmacy education remain adaptable and ready. Working towards an environment that addresses the needs of the present and those that will arise in the future gives a new direction for pharmacy education today.

2. Catalysts of Transformation: Key Influences Reshaping Pharmacy Education

Over the years, pharmacy education has focused on standard lessons, but now it is facing a time of fast and varied changes. Academic needs, society's changes, technological advancements, pressures from the economy and policy demands all contribute to this process. To create new education models that fit the present and future, we need to first understand these driving forces.

2.1 Pressures and Chances in Academia: Reframing Education and Skill Principles

It is becoming harder for pharmacy education to add new scientific and clinical information to its courses due to the shortage of class hours. Because of this, schools often keep adding content while not removing the old, making it harder for students and professors to keep up. In addition, the usual system of fixed plans and cohorts can prevent some students from learning at their own best speed.

CBE has gained more interest over the years as a strategy to meet these challenges in education. Unlike a set curriculum, with CBE, students go through skills and learning lessons as soon as they have demonstrated they are ready, rather than at set times. It promises to increase how relevant education is while guaranteeing graduates are ready for the duties they may face in the workplace.

Rapid changes brought on by the pandemic required teachers to rethink the need for specific learning activities and the best times to complete them. As a result, teachers could focus on key subjects, try different ways to deliver lessons and use technology to guide personal learning for their students. The report pointed out that institutions could join forces to develop the same educational materials, so more people could benefit from high-quality content. Approaches to testing are being updated to measure more than what is found on old-fashioned assessments. Using tools such as simulations, entrustable professional activities and situational judgment tests makes students work on key skills instead of memorizing facts repeatedly. Professors now spend more time helping students guide their own learning and applying what they've learned in practice.

2.2: Building Inclusivity, Health and a Professional Identity

In pharmacy education, the social aspect involves how learners' backgrounds are changing, a greater awareness of fairness and equality and increased attention on mental health. Today's students are from a wider range of backgrounds and cultures, each needing different levels of support for their learning. Making sure all learning spaces value and address this diversity strongly supports student achievement and career growth.

The COVID-19 pandemic made it clear that worries about student and faculty stress, fatigue and equal access to internet and areas for studying were bigger problems. This has resulted in more voices calling for complete approaches to help keep students, faculty and staff well, strong and united on campus. Bringing growth mindset into the curriculum enables learners to accept challenges and discover new chances for personal development after setbacks(4).

At the same time, pharmacy as a profession is changing its outlook. Pharmacists must be more visible in explaining their roles in healthcare and society now that they are participating in vaccination, testing samples and providing

telehealth care. Making sure students learn their area of practice and improving the school's reputation helps them become ready for the workforce and recognized by the public.

2.3 New Technologies: Making New Areas of Education Available

Technology has been driving new ideas in education for years, but it's impact greatly increased when we had to learn remotely because of the pandemic. Pharmacy instruction is using digital solutions such as virtual simulations, case studies and AI-powered learning apps more and more. With these technologies, students have a more personalized and involved way to learn and assess their abilities which may broadly transform learning.

With the help of augmented and virtual reality, people can train in clinical settings safely and without risk. At the same time, analytics and machine learning let teachers check on students' progress in real time and provide the right assistance and support. Even so, the fast spread of technology causes questions about fair access, keeping privacy secure, educating teachers and preserving the main human factors in healthcare education.

When teachers start using EdTech, people notice the need to change instructional design to create planned, digital lessons rather than rely on quick remote solutions. This involves arranging lessons for immediate and non-immediate participation, adopting a variety of digital resources and including team projects in online environments. In addition, we should think about costs, the value of what we produce and how to maintain sustainability.

Economic challenges for higher education and students are increasing, so pharmacy education is being forced to examine its economic plans. More people are talking about what they get for their money when tuition is high and students leave with large debts. With tighter budgets and rising challenges in enrollment, the pandemic is leading institutions to rethink their spending and how effective education is.

Since resources are limited, innovations are needed to cut spending on training while sustaining or raising educational quality. Examples of options are having modular or step-up degree structures, matching what is taught in early years with what follows in practice and increasing the availability of online and hybrid programs to help more join the field. Finding ways to link residency and postgraduate training with undergraduate teaching might help new graduates join the workforce with fewer challenges(5).

Because more students now prefer part-time degrees, more time off or nearer campuses, institutions must change their approaches to attracting and keeping students. To attract successful and robust future students, pharmacy programs will need to demonstrate they are affordable and important.

2.4 Being Accountable and Innovative in the Political and Regulatory Context

Pharmacy education is guided by both the changes in political policies and the existing set of regulations. Institutions must follow the guidelines from accreditation standards and local government policies which help determine their courses, testing methods and assure quality. Of late, the public is expecting more transparency, accountability and evidence of schools' impact on both employment and society.

Because of the pandemic, it became clear that rules for experiential learning and checking skills are too limited which led to more people arguing for changes that focus on end goals, not time spent in school. Partnership among accrediting groups, schools and professional groups is key to creating standards that promote creativity and make learning trustworthy.

Pharmacy education is now responding to global changes such as requiring an international framework and cooperative work, to ensure learning standards are the same and students can cope in different workplaces. Advocating for pharmacists in public health, telemedicine and patient care helps influence what should be taught and how much should be invested in education.

3. Seizing the Moment: Unlocking Transformational Potential in Pharmacy Education

As the field of pharmacy moves toward change, the combination of academic, social, technological, economic and political factors presents a rare and powerful possibility to alter the profession's future. The unexpected challenges of the health crisis revealed that the old methods of education which seemed enough up to now, are not as effective for future pharmacists. There is now a unique time to adjust and even invent new practices in education, creating learning approaches that are flexible, fair and suited to the growing needs of patients and healthcare leaders.

The progress made over past decades allowed the pandemic to speed up pressure points and bring new paths for innovation to light. It is necessary to resist the urge to go back to how we taught pharmacy before the pandemic and

instead let innovative thinking shake up our teaching system. To do this, it's necessary to move away from rigid courses and fixed chapters and incorporate personalized development, infinite learning and working with other professionals(6).

The vision for this transformation aims to blend different ideas from education with the best new technologies. The use of adaptive technology, virtual models and assessment tools that use data allows pharmacy programs to design flexible systems for different learners. Also, by supporting each person, healthcare institutions can build workplaces that help employees become more resilient, creative and committed key traits for success in any dynamic healthcare role.

Strengthening the economy is a vital part of what's happening now. Always an issue, expensive education and student debt reached new levels during the pandemic due to its effect on families' finances. Making sure pharmacy learning is flexible, providing multiple chances to start and end, means it will be easier for many to afford and access the education they need. Option to earn modules or degrees in stages helps students reach their careers and meets market expectations(7).

The process to reach these objectives depends heavily on working with regulators and advocating for changes. Accrediting bodies and professional organizations ought to join forces to adjust standards flexible enough to include innovation, yet still safe for everyone. Officials should help launch measures that make education more accessible and aid workforce development to match social needs. In addition, working together globally supports making pharmacy skills the same across the globe, allowing practitioners to address health problems in many locations and settings.

Theme	Key Points
Need for Change	Pandemic exposed limits of traditional pharmacy education.
Innovation & Technology	Use adaptive tech and personalized, flexible learning.
Economic Factors	Flexible, modular education improves access and affordability.
Regulation & Collaboration	Align standards globally; support innovation and safety.
Interdisciplinary Approach	Team-based, cross-professional, and international learning.
Competency-Based Education	Focus on skills mastery via practical assessments.
Continuous Improvement	Foster innovation, collaboration, and rapid adaptation.
Examples from Other Fields	Success in health professions shows change is possible.
Call to Action	Act now for flexible, meaningful pharmacy education.

TABLE 1 Transformation of Pharmacy Education

Breaking up traditional groupings between professions and countries offers an exciting new opportunity. Split-up approaches to health issues like pandemics and chronic disease management simply cannot be effective(8). When curricula are designed with several disciplines together and teamwork at the center, it prepares pharmacists for their roles. Involving institutions and countries from all over in partnerships can add value to learning and help shape a team ready to meet various global health challenges.

The bigger transformation is largely based on the move to competency-based education. By using measurable results and genuine talents in its program, CBE helps students become knowledgeable and used to working in their field. Combining solid assessment approaches and modern instructional techniques allows students to prove their knowledge by doing real-world projects, rather than just through traditional exam tests. Because of the shift, students are better able to control their learning and focus on mastery rather than deadlines.

At the same time, this moment should focus on supporting a culture where improvements and new ideas come continually. Education in pharmacy should use technology that allows students to create and change ideas quickly, exchange views and address issues together. Having this belief will help programs respond quickly to new trends, changes in technology and transformations in healthcare. Working together with students, faculty, practitioners and other stakeholders in education leads to better innovation and makes sure the process fits current needs.

Even though the ideas are ambitious, other health professions and learning sectors have shown they are possible. Online programs for competencies, the introduction of immersive technology and whole-wellness initiatives by

institutions offer good examples and practical methods. These events point out that leaders, schools and faculty must be intentional, support faculty development and stay committed to change(9).

Overall, pharmacy education is at a critical stage, when internal wishes and external needs can work together to shape real improvement. If educators act on this change now, they can create a future in which pharmacy training is more flexible, accessible, meaningful and important. Converting to this training benefits students and also results in improved care for patients and a healthier public. To go forward, we need courage, fresh ideas and shared effort, but this will ensure healthcare is more adaptable and ready for any challenges in recent and future times.

5. Strategic Innovations and Overcoming Implementation Challenges in Pharmacy Education

The big changes in pharmacy education now require us to think carefully about how to improve and stay ahead. Because things are changing so fast, schools need to reexamine their old ways and choose new methods that fit the dynamic field of healthcare and the diverse learners set to impact it. Still, turning our visions into practice is very difficult and needs careful coordination between experts in academic, technological, social, economic and political areas.

Innovation should be part of any responsive curriculum

Innovation in pharmacy education centers on making curriculums that are adaptable and prepared for the future. Future pharmacy programs need to change as quickly as there are advances in pharmaceutical sciences, healthcare innovations and healthcare practices. In other words, we need to replace time limits with skill and knowledge requirements in line with what students are likely to experience in practical life.

The CBE approach brings out a better path, where what matters is learning the goals rather than staying in the classroom for a certain time. Complete mapping of the curriculum, agreed-upon important skills that match the needs of employers and reliable assessment methods that accurately assess student progress are important elements of CBE. In addition, teaching models should include IPE, so students gain skills required for working as teams in health care(10).

To stay updated, the curriculum must cover newly evolving fields, for example, digital health, pharmacogenomics, health equity and managing population health. Connecting these different subjects prepares students for what is happening now as well as helps them shape the future of healthcare. In addition, including cultural competency and social determinants of health in the curriculum helps prepare pharmacists to handle diverse groups of patients.

Using Technology to Make Learning Better for Everyone

Innovation in pharmacy education depends greatly on technology which helps students personalize their training, increases their access to learning resources and makes courses more interesting. Because of COVID-19, many classes were taught online or in a hybrid fashion and it became apparent that while technology makes learning accessible, it can also result in different issues with regard to standards, fairness and interaction.

Adaptive learning platforms which make use of data and AI, help to match the content and how fast it is presented to each student. Mastery learning is easier thanks to these tools which spot missed points, give targeted hints and allow students to learn when they are ready. Using these digital tools, trainees can improve their knowledge and skills safely. Working on these tasks with others greatly helps students grow both in confidence and in what they do.

Still, making technology work well in education involves helping teachers gain digital and teaching skills. Faculty should be ready to use technology and also to create meaningful lessons that mix online and face-to-face components. Schools, libraries or community centers need to make sure their systems are robust and updated, everyone has equal chances to access computers and fast internet and adequate tech support helps all learners.

Also, learning analytics can help with ongoing improvement by observing how students interact, do in courses and feel. Data privacy and transparency should be managed from the start to protect learners and make sure they trust the system.

Focus on wellness and develop abilities to resist life's challenges

The surrounding environment of pharmacy education has a big impact on a student's ability to do well. Experiencing stress, burnout and mental health issues among faculty and students is gaining greater attention due to

the speed of change and impacts from the pandemic. Improving well-being needs an overall method that brings together help services, learning topics and school culture.

Supporting wellness inside schools helps students learn how to cope, stay mindful and control their stress levels. Thinking in a way where challenges are used for education keeps a person motivated and able to cope with changes(11). Making peer groups, mentorships and helpful mental health services accessible helps people find belonging and stay connected.

Diversity and making sure everyone feels included are important for wellness. Environmental design for education should support learning for people with various needs, backgrounds and identities. Using UDL makes it possible for students to take part, digest information and express what they learn in different ways. It is crucial to work for equal access to resources in technology-based learning, to avoid making the inequities wider.

Meeting Economic Limitations by Thriving with New Solutions

Securing enough funds for pharmacy education is very difficult. The cost of going to college is rising, money from the government is falling and unsteady economic times are putting both student access and college survival in jeopardy. Therefore, programs should create new ways to deliver value and manage costs.

Learners can use modular courses and micro-credentials to earn the competencies they desire for their jobs. When skills are broken into parts, individuals may advance and continue learning new skills, especially in professions that evolve rapidly. Using these models, students can finish their degrees in less time and pay less.

If academia cooperates with industry, students gain practical experiences and support finding jobs afterward. By relying on hybrid and online learning, you save money on buildings and can connect with students worldwide.

By clearly demonstrating what students gain and how much funding was used, schools can show what they have to offer to students and those who support them. Other ways to pay for education such as income-share agreements or learning provided by the workplace, could take the place of paying tuition.

Involving Political and Regulatory Stakeholders

Innovation can only succeed if those who dictate pharmacy education support and align with its objectives. Accrediting bodies ought to update their standards so they fit with flexible and competency-based approaches yet guarantee high quality. To update the curriculum, hospital pharmacists rely on associations with pharmacy organizations.

Supporters of access, equity and innovation can encourage schools to test fresh ideas for schooling. Resources directed to technology use, teacher education and joint projects among professionals will speed progress in teaching. Advocacy is needed to boost the role of pharmacists in healthcare policy and public health, thereby making it important for education to train a group ready for these new responsibilities. It is helpful to encourage both students and faculty to participate in policy discussions so they develop leadership and advocacy abilities.

Building a Work Culture of Frequent Innovation

It is essential to help your employees embrace new ideas, explore and work towards getting better all the time. Faculty and students should be invited by institutions to join forces and create meaningful learning experiences with their own ideas and skills. Agile methodologies which use repetitive phases, rapid examples and react to suggestions, offer a path for curriculum and teaching evolution.

Money put into educational scholarship leads to evidence-supported practice and the spread of useful strategies. Liking and respecting changes inspires colleagues to be involved for a long time.

Sharing of ideas, resources and support is encouraged when institutions create internal and inter-institutional networks and practice communities. It prevents the same approach being done multiple times and lets organizations adopt the best ideas more quickly.

6.Conclusion and Future work

At present, the impact of multiple forces on pharmacy education means that a new way of preparing the profession's workforce is needed. During the COVID-19 pandemic which acted as a trial and an incentive, it was easy to notice that old techniques in education had important weaknesses and helped bring about new collaborative ideas. Given

this inflection point, pharmacy educators, institutions and stakeholders are encouraged to design and build a flexible system that puts students in focus and also survives the turbulence and fast-changing environment.

Using fixed, rigid curricula and lectures for instruction Treatment Has struggled to meet the demands of new healthcare needs and the preferences of modern students. More and more people believe that CBE models are no longer just a sensible choice but must be pursued. CBE's goal of mastering outcomes and applying knowledge well fits the varied tasks that pharmacists have today. Reaching the best results from CBE relies on changes throughout the system such as new learning materials, appropriate tests, modern tools and a learning culture for life.

One important point from recent events is that pharmacy education should center on flexibility and personalization. Today's students rightfully want learning environments that meet their differences and varied learning requirements. You can achieve this by offering learning experiences students can access at any time and in the classroom, relying on online tools to help students one on one and designing flexible educational courses for changing employment trends. Being flexible allows more students to enter, remember and use their studies in the workplace.

Tomorrow's professionals in pharmacy will need a wider range of abilities in addition to their technical and medical abilities. During the pandemic, it became clear that resilience, adaptability, leadership, good communication and professionalism are vital. For practitioners to succeed in uncertain surroundings, it's important to include these "soft skills" in the training process at any educational level. It is now essential to support wellness and mental health, as it is essential for students and teachers to continue doing well at their work.

The main problem in economics occurs when trying to balance how much money a product costs, how it is made and its usefulness. Increasing fees and student loans have led many to suggest new ways to save money and improve ways of learning without sacrificing the quality of education. Using tech-based learning such as massive open online courses and competency-based ways, is a positive move. They could set up partnerships or consortia to use their resources and knowledge wisely, so they don't waste time and energy on similar things. Being able to re-skill and leave or enter programs at many different points during their careers will be central to pharmacists' ability to stay relevant.

The rate and direction of the industry's changes will depend heavily on political and regulatory factors. All stakeholders should team up to introduce flexible guidelines focused on results, knowledge and safety. Because people look for transparency and accountability, education programs must highlight their worth and reflex them to what the workforce wants. Learning to work with people from different countries and disciplines can improve standardization and assist pharmacists in practicing and teamwork all over the world.

Cooperation comes out as a key message and important approach for future results. The pandemic proved institutions and educators are capable of fast innovation and sharing knowledge with others worldwide. These partnerships, expanded across the nation and around the globe, can help speed up improvements and develop standard learning tools, curricula and objectives. With everyone supporting the same network, school systems can respond more effectively and smoothly.

We need to see pharmacy education lead the way with a continuous focus on innovation and improvement. To do this, leaders must value new approaches, accept when things go wrong as an opportunity to learn and work closely with students, teachers, practitioners and employers to develop education. By using strategic forecasting and scenario planning, managers can see which challenges and opportunities might appear and act ahead.

The best model for pharmacy education in the future will most likely include several aspects: individual learning plans, skill-based education, programs using technology and lots of hands-on training. It will help develop knowledge, skills, who you are as a professional, what you believe in and the ability to adapt. Its purpose is to ensure that pharmacists can make meaningful improvements to patient healthcare, lead teams and work together in developing healthcare systems.

All things considered, the combination of academic, social, technological, economic and political trends has opened up unique opportunities for pharmacy education. Now is the moment to take advantage of this opportunity and develop an innovative, accessible and sustainable way for education. As a result, pharmacy education can confront today's problems and also help guide the healthcare system in the years ahead.

Acknowledgement: Nil

Volume 1, Issue 1 | June-2025

The authors have no conflicts of interest to declare

References

Conflicts of interest

- 1. Frenzel JE, Eukel HN, Brynjulson MA. Transformation of pharmacy education in response to COVID-19: Perspectives from academia. Am J Pharm Educ. 2020;84(6):ajpe8142.
- 2. Cain J, Romanelli F. E-professionalism: A new paradigm for a digital age. Curr Pharm Teach Learn. 2009;1(2):66–70.
- 3. DiPiro JT. Preparing for the next generation of pharmacists: Challenges and opportunities. Am J Pharm Educ. 2019;83(3):6929.
- 4. Frenzel JE, Skoy ET, Eukel HN. Addressing social determinants of health in pharmacy education: A national snapshot. Am J Pharm Educ. 2021;85(2):ajpe8485.
- 5. Mathews JL, Parkhill AL, Schlehofer DA. Role-reversal exercise with deaf strong hospital to teach communication competency and cultural awareness. Am J Pharm Educ. 2011;75(3):53.
- 6. Medina MS, Plaza CM, Stowe CD. Center for the Advancement of Pharmacy Education 2013 educational outcomes. Am J Pharm Educ. 2013;77(8):162.
- 7. Mesquita AR, Lyra DP, Brito GC. Developing communication skills in pharmacy: A systematic review of the use of simulated patient methods. Patient Educ Couns. 2010;78(2):143–148.
- 8. Aslani P, Finlay K. Influences of economic and political environments on pharmacy education and practice in Australia. Int J Pharm Pract. 2015;23(1):85–88.
- 9. Droege M. The role of reflective learning in pharmacy education. Am J Pharm Educ. 2003;67(3):1–8.
- 10. Alrakaf S, Saini B, Moles R. Pharmacy education in Saudi Arabia: A vision of the future. Saudi Pharm J. 2019;27(9):1312–1316.
- 11. Zlotos L, Power A, Hill D. A scoping review of international policy on the role of pharmacists in healthcare settings. Int J Clin Pharm. 2021;43(3):618–627.