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## *INTRODUCTION*

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### **Multicultural Pharmaceutical Education: An Introduction**

Barry Bleidt

The interest in increasing the number of minorities practicing pharmacy has waxed and waned over the years. Sometimes the expanded focus is due to a genuine concern for the underrepresented groups, especially when it comes to providing health care for them (historically, minorities practice more often in settings near neighborhoods or localities largely populated by their own kind). Other times this interest is temporary and NO real commitment is actually made toward alleviating the shortage of practicing minorities.

#### *INTRODUCTION*

The spotlight is once again shining upon the minority representation in pharmacy issue. At the 138th Annual Meeting of the American Pharmaceutical Association, the House of Delegates passed a resolution supporting "a vigorous, long-term program for the recruitment of minority students into the pharmacy profession" (1). Their action was a reenact-

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Barry Bleidt, Ph.D., is Associate Professor of Pharmacy Administration at the Xavier University of Louisiana College of Pharmacy, New Orleans, LA 70125.

ment of a similar move over twenty years ago (2). Maybe this time, something substantial will come of this renewed commitment.

The recent activity concerning this new-found regard for increasing minority enrollments in pharmacy schools was one impetus behind this special edition dedicated to "Multicultural Pharmaceutical Education." Another stimulus was the desire of the authors and the editor to make public their knowledge, feelings and concerns within this area.

Over forty people were solicited for input into this volume, representing interests in the following groups: African-Americans; Asian-Americans; Hispanic-Americans and Native Americans. Authors were selected because of prior scholarly activity or other unique experience in this area. The contributions that arrived are predominately geared toward African Americans. This is partly due to the fact that the editor is based at a historically black university and partly due to a much higher response rate from this group.

The purpose of this special volume is to spotlight an important topic—increasing the representation of underserved or disenfranchised groups in pharmacy schools and practice settings, thereby increasing and improving the provision of pharmaceutical services offered to them. The authors offer suggestions or commentary on multicultural pharmaceutical education. Each was invited to contribute and was reviewed accordingly. The wide array of offerings is a testimony to the importance that is placed on this issue by many. It is hoped that readers will glean ideas in order to incorporate them into their institutional commitments and thereby augment their chances of succeeding. This publication was also brought forth so excuses that are traditionally made for failures in these types of endeavors cannot be used ("we did not know how," "nothing seems to work," "what can we do," etc.).

A most interesting issue was raised during the initial, manuscript-solicitation phase of this project. One of my colleagues questioned the "authenticity of concern" that a special volume devoted to "Multicultural Pharmaceutical Education," edited by a Caucasian male, raised. Lengthy and interesting discussions ensued over the propriety of such an occurrence. Great care was taken to explain how this activity was not an attempt to exploit and that the greatest benefit would be derived by those needing it (the disenfranchised groups).

If for some reason, the reader does not understand the reasons behind or if the reader would have been defensive or insulted by such questioning, then a reevaluation of your understanding of minorities may be in order (further discussion of this point appears in the last article). However, if your cultural-sensitivity radar anticipated this concern, you will

probably gain a great deal from what we have presented. Obviously, the appropriateness issue was resolved and my colleague made a valuable contribution to this collection. His concern was most appreciated.

Some ideas presented here are unique and can provide an opportunity for majority institutions to improve greatly their recruitment and retention efforts geared towards minorities. Other articles give historical accounts or examples of successes that could be emulated. However, the most important aspect of this gathering of ideas is that all of these articles are together in one publication at the same time. The Haworth Press, Inc. should be lauded for its vision in presenting the concept. I speak for most authors when I say that questions can be directed to them or to myself for assistance in implementing any ideas or programs suggested herein and we welcome them.

Contributors to this special volume range from deans to undergraduates, from vice provost to executive director and from national "Teacher of the Year" to faculty member. All have had experience in some aspect of minority pharmaceutical education. Read on, enjoy and learn.

### ***WHAT'S INSIDE***

The articles that were contributed have been divided into four areas—foundation, commitment, actuation and conclusion.

#### ***Foundation***

The foundation portion of this special volume is provided by two articles, one on the entry-level degree and one on the right to an education. They provide the infrastructure for the rest of the collection by describing fundamental points and setting the tone for what is to follow.

In the first article, Dean Marcellus Grace, from Xavier University of Louisiana, discusses many issues relevant to multicultural pharmaceutical education, most notably the degree one. He calls Xavier's progress toward an entry-level Pharm.D. "a moral obligation." During the many forums and debates addressing this all-consuming question and in a recent presentation of "so-called research" by a professional society, an overwhelming majority of the voices have ignored what he considers as important. It is not that what Dean Grace says is so profound or will solve the crisis that is so noteworthy, it is the fact that his concerns are rarely raised or even considered. It is not possible to have commitment to minority pharmaceutical education without consideration of what issues impact upon these groups. This article speaks to that end.

The second article, by Dr. Michael Montagne of Northeastern University, presents the concept of "The Right to Learn: Advantaging the Disadvantaged Student in Pharmaceutical Education." He espouses the idea that pharmacy schools should educate people rather than the traditional train-of-thought that we should prepare students for practice. The ideological difference between the two convictions is vast.

Discrimination is a human attribute; we differentiate between things regularly. However, when biases are used as the foundation for decisions (such as race, gender, age, etc.) and they have negative impacts on others, improper discrimination has occurred. Therefore, trying to have students fit the "standard pharmacist mold" or conform to one's image of who should practice lends itself to improper biases. Hence the great concern by many about the changing demographics of pharmacy students. Not all students have the same needs and abilities, but yet many more could make an excellent contribution to pharmacy if only given the chance in an environment more responsive to their needs, rather than to those of the traditional pharmacy student. Dr. Montagne's article suggests changes in the way we view pharmaceutical education in order to become more responsive to the needs of others.

### ***Commitment***

The second segment, commitment, is represented by four articles. As one ages, wisdom evolves and it becomes easier to assess the level of genuineness whenever concern is voiced on minority-centered issues. One of the major points that need to be gleaned from this segment is that minorities (and others) can differentiate between true commitment and lip service.

In the first manuscript, Dr. Robert Gibson, Associate Vice Chancellor University of California San Francisco, defines the contradictory nature of commitment and gives an historical account of its elusiveness. He also points out examples of commitment and nonexamples of such dedication to principle. And finally, he says,

I trust health care practitioners and educators concur that the opportunity and the responsibility to improve the delivery of health care rests with each of us and also recognize that *commitment* to providing access to an education in pharmacy is part of the equation in solving the problem of the double standard of health care. (3)

This statement accents why this volume was brought forth.

The next article is by a young, clinical faculty member at Xavier University, Dr. Adrian Goram. He chronicles the commitment of historically black colleges and universities and the vital role they play in producing minority pharmacists within an ethnocentric society. He also addresses the importance of clinical rotations in preparing students for practice through integration of didactic knowledge in an applied setting and through role modeling.

The third article is about dedication to principle. It is coauthored by Michael Gerald and John Cassady from Ohio State University. It discusses "Cooperative Approaches to Stimulating Minority Participation in Graduate Pharmaceutical Education."

Several other universities are attempting to implement or have established similar affiliation agreements with minority institutions. However, this program stands out as one to be emulated. It represents commitment.

The final article of this section is about preparing minority pharmacy students for international health service. It is coauthored by Dr. Rosalyn King and Jewel Bellegarde, Director and Training Coordinator, respectively, of the International Health Institute of the Charles R. Drew University of Medicine and Science. They describe the International Health Internship Program and how it has helped to expand the "pool of minority leaders who serve the underserved wherever they are encountered."

It is ironic to note that in both the University of California San Francisco and Drew University cases, commitment was unable to continue due to budgetary constraints. This just goes to show that even when dedication is present and working, decisions from higher authorities with differing agendas and priorities can alter or destroy actuation and follow-through.

### *Actuation*

After commitment has been established, a plan needs to be formulated and actuated. This next segment presents three examples of special programs that have succeeded in their mission.

The first article in this phase is authored by Dr. J.W. Carmichael et al. from Xavier University. It is especially important to point out that Dr. Carmichael recently was honored as the "National Professor of the Year" by the Council for the Advancement and Support of Education (CASE) in recognition for all that he has done in advancing science

education among minorities. The innovative efforts tried by these colleagues provide good examples of how to accomplish the objective of more minorities in pharmacy education—send more through the prepharmacy pipeline better prepared through alternative teaching techniques sensitive to their needs.

The second article comes from Florida A&M University. It chronicles the growth of this historically black university in the research and graduate-education arena. Dean Johnnie Early, II et al. describe how both federal and private funding provided the foundation for their rise as a major research institution (#11 among pharmacy schools in NIH funding) and as the largest producer of African-American graduate students.

The third article in this segment is "Barriers to a Career in Pharmacy: An Hispanic Perspective" by Director Carmen Aceves-Blumenthal of Southeastern University of the Health Sciences. This is one of only two manuscripts that discusses issues of relevance specific to Hispanics. While the majority of pharmacists relish in the fact that we are the most trusted professional, some groups (such as the Hispanics) are still vying for respect from their compadres. This impacts on the decision of many whether or not to pursue a pharmacy career. In this manuscript, this barrier and others to greater Hispanic participation within the profession are described.

The final article is by a minority graduate student attending a majority institution. Carolyn Brown, from the University of Florida, is currently enrolled in the Pharmacy Health Care Administration program. She writes about her experiences and expectations. For those institutions interested in attracting such students, this article describes what it takes to do it—commitment and follow-through. Her University's devotion to these endeavors has paid dividends, both to the school in terms of attracting a more diverse student population and to the minority community by producing more role models and examples of success. Read this one carefully for useful suggestions from a person who is currently experiencing it.

### CONCLUSION

The last segment wraps up the collection. It contains four articles, two from pharmacy students and two from faculty.

First, two articles detail how professionalism and leadership affect student growth. In one, Dr. Edward Clouse of Southeastern University of the Health Sciences, discusses leadership training programs and preparing minority populations for leadership roles. He also details the importance

of recognizing and rewarding it. As Executive Director of Phi Lambda Sigma, the National Pharmacy Leadership Society, he espouses the values of developing and acknowledging pharmacy leadership in the same manner as we have traditionally recognized and rewarded pharmacy scholarship.

In the second article, the President of the Mexican American Association of Pharmacy Students (MAAPS) at the University of Texas at Austin, Leticia de la Rosa, describes how MAAPS' activities present members with multiple opportunities to work together and support each other. This network attempts not only to help themselves, but also the underserved community around them.

In the next article, Marilyn Saulsbury of Xavier University of Louisiana, highlights the advantages of being a minority student attending a minority university. The information she provides is important for majority institutions to understand before they will become successful in attracting and retaining minority students.

The concluding article, "Understanding Minority Education in Pharmacy," presents both a summary of the entire issue and several novel concepts. The author attempts to put into words what has been working at minority institutions for many decades in advancing the educational and professional needs of disenfranchised peoples and in producing the majority of African-American pharmacists.

I wish to extend my gratitude to all authors who, through their participation, exhibited commitment by adhering to extremely short deadlines and assisting in bringing forth this collaborative effort. It is our collective wish that the information contained herein will benefit those we are trying to serve. Read on and contemplate, much can be done with the tools presented. Please try to use them for all society to benefit.

## REFERENCES

1. Anon. New policies adopted by the 1991 APhA House of Delegates. *Am Pharm* 1991;NS31:416-7.
2. American Pharmaceutical Association House of Delegates Notebook. 138th Annual Meeting, March 1991.