

Social Pharmacy: A Necessity in Pharmacy Practice

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In the past few decades, pharmacy practice has grown beyond traditional drug dispensing. In 1960, a movement started by pharmacists in hospitals contributed to offering different aspects of consultation in drug use, which ultimately, in its development, crystallized to be called clinical pharmacy. In the 1980s and 1990s, clinical pharmacy matured, and it continued to grow further in the decades to come. Pharmacists have done their role in the clinical field prestigiously in the past few decades. In doing so, other aspects of practice have come up which are very important in Rational use of drugs, drug safety and saving financial resources. These aspects are social, behavioral, and policy aspects. There is a growing awareness in the profession that social, cultural, economic, and political factors impact medication use and health outcomes. This shift in perspective has led to the development of social pharmacy, a multidisciplinary field that incorporates related social sciences into pharmaceutical education, research, and practice. Clinical pharmacy was established as a field of direct patient care within society and the healthcare system. The sister discipline, social pharmacy, addresses how drugs are utilized and understood by patients in society.

Over my 40 years' experience as a pharmacist, I have noticed increasing interest in patients and society about how medicines are prescribed, dispensed, and consumed. This editorial intends to (1) provide a clear definition of social pharmacy, (2) discuss its importance in addressing health challenges, and (3) emphasize its vital contribution to future pharmacy practice.

Defining Social Pharmacy

Social pharmacy is commonly understood as the study of social, psychological, and behavioral determinants of medicine use and health care practices. Social pharmacy is also described as including aspects of health policy, health promotion, sociology, economics, ethics, and communication but, from the perspective of where they influence and are influenced by pharmacy (1). This multifaceted perspective falls into a broader understanding of how pharmacists should be trained not only in pharmacotherapy and clinical interventions but also in recognizing patient behaviors, cultural contexts, and institutional barriers to

optimal healthcare.

Health care challenges differ greatly among communities, so social pharmacy research and interventions can be diverse. Topics can include medication adherence among underserved populations or health policy development that will support improved patient care. Social pharmacy aims to treat the causes that underlie poor health outcomes beyond just the pharmacotherapy parts of things.

As the health challenges confronting the world become more complex, new forms of collaboration across disciplines (i.e., medicine, nursing, public health, sociology, anthropology, etc.) will be taken on critical importance. Social pharmacy education prepares pharmacists to contribute effectively to multidisciplinary teams, working on complex issues like health literacy, availability of care, and patient engagement on multiple fronts.

Changing to the Practice of Social Pharmacy

Changing the Paradigms of Education

In the last twenty years, pharmacy schools across the globe have begun including tenets of social pharmacy in their curriculum. Courses that highlight cultural competence, health literacy, and community engagement prepare future pharmacists for addressing the social determinants of health (2). This shift signals an awareness, which is becoming mainstream, that the art of effective healthcare delivery involves a lot more than just clinical performance.

Disability and the Office of Public Health

Social pharmacy emphasizes the need for community-based programs, etc. Pharmacists are taking on a greater role in leading immunization programs, health awareness activities, and medication review services aimed at specific populations, such as the elderly or those with chronic diseases. The World Health Organization (WHO) emphasizes that pharmacists contribute significantly as the most accessible healthcare providers in many communities; therefore, they have many opportunities to leverage access to promote health equity and close care gaps (3).

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Policy Research and Health Systems Research

Another aspect of social pharmacy is investigating how laws, reimbursement policies, and the design of healthcare systems influence the use of medications and health outcomes. Social pharmacists are well-positioned to inform policies that reduce medicine-related harm, promote high-value medicine use, and save money. There is emerging research in the area that provides evidence-based understanding on the optimal way to design pharmaceutical service provision to support public health priorities (4).

Technology and Digital Health

The advent of digital health tools, more precisely, electronic health records, telepharmacy, and mobile health applications, has broadened the horizons of social pharmacy. Technology can enhance medication management, patient counseling, and monitoring. At the same time, they raise issues of digital equity, patient privacy, and the possibility of tech-driven disparities. Social pharmacy research helps ensure that these advances are made equitable across the spectrum of society (5).

Conclusion

This article discusses the need for social pharmacy as an urgent movement in current practice that is situated between clinical training and community factors. By addressing the social, cultural, and behavioral aspects of medication use, pharmacists can enhance health outcomes, address health disparities, and shape better policy and system building for equitable health care. Overall, the role of social pharmacy is crucial for preparing the next generation of pharmacy care providers and addressing the future of pharmacy practice in an era of technological advancement and changing demographics.

Continuing to embed social pharmacy perspectives is critical for pharmacy education, practice, and research to remain authentically patient-centric. I believe in the influential role pharmacists can play in bringing meaningful changes to medical care internationally, so long as we approach pharmacy curricula design with deep societal awareness as one of the primary focuses of clinical pharmacy education.

Conflicts of Interest

The author has no conflicts of interest to declare.

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