

Justice, equity, diversity, and inclusion (JEDI) workforce development needs in the aging care pharmacy landscape

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Purpose

The purpose of this landscape scan was to close the information gap on how justice, equity, diversity, and inclusion (JEDI) is being regarded through pharmacy-based providers in the care of vulnerable older adult populations to help inform training and resources for pharmacy workforce development.

Background

With nine in ten adults over the age of 65 years old taking medication, pharmacists as medication safety experts play an integral role in care optimization¹. Yet, a well-established baseline of JEDI training needs and JEDI topic interests from pharmacy stakeholders in the aging field did not exist.

Methods

The American Society of Consultant Pharmacists (ASCP) is a membership organization focused on serving the unique medication needs of older adults and complex patients. A JEDI-focused survey was administered from late March until early April 2023 to nearly 3,500 ASCP members located in the US. Survey questions focused on perceptions of familiarity with and the importance of JEDI, competency in JEDI-related skills, current JEDI advancement initiatives at their practice site, perceived occurrence of injustice, bias, isolation, exclusion, or another form of marginalization to self and patients, JEDI topic area priority for self, practice site, and ASCP, and respondent interest in JEDI training. Over 600 participants provided responses with representation from almost all 50 states, except for Wyoming and Delaware. Participants who were non-active ASCP members or were not located in the US were removed from the analysis for a final N=588. Quantitative and qualitative analyses were performed.

Figure 1. Years of Practice Experience

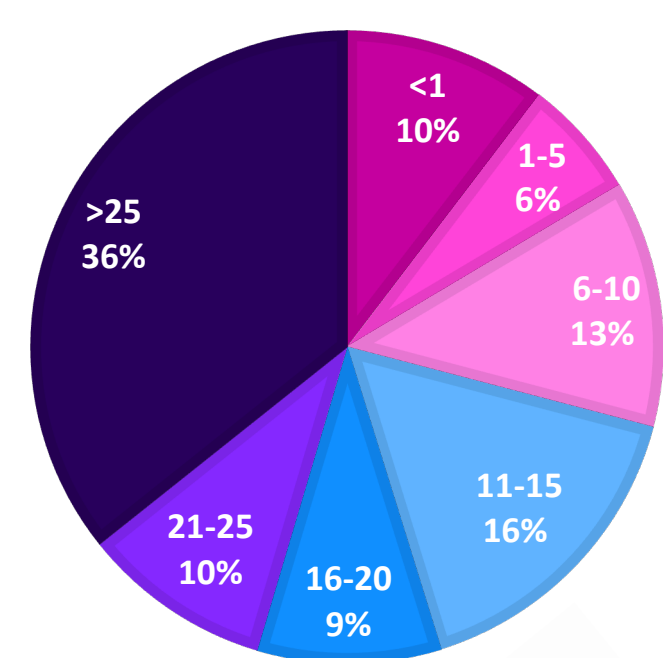


Figure 2. Practice Areas

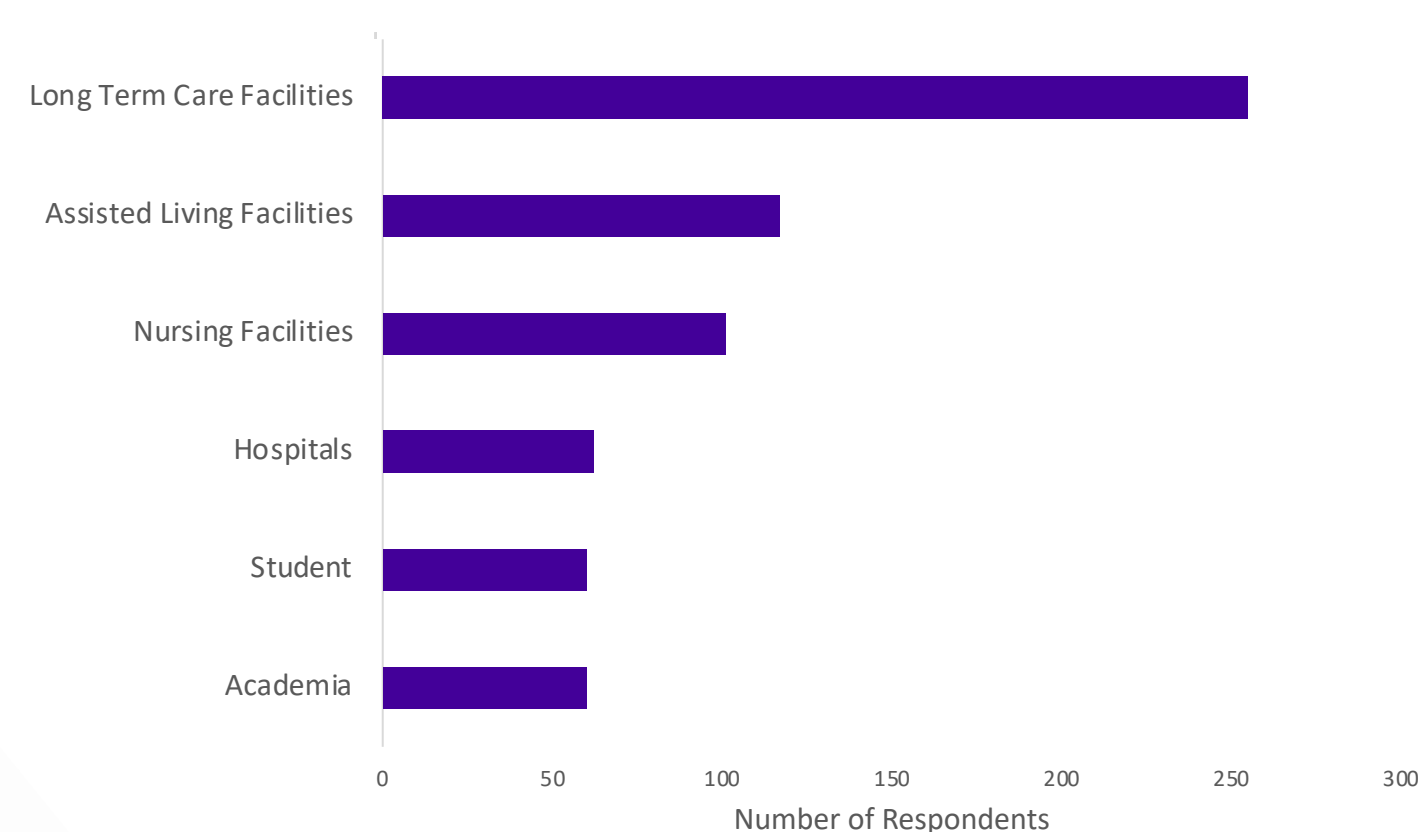


Figure 3. Interest in JEDI Training

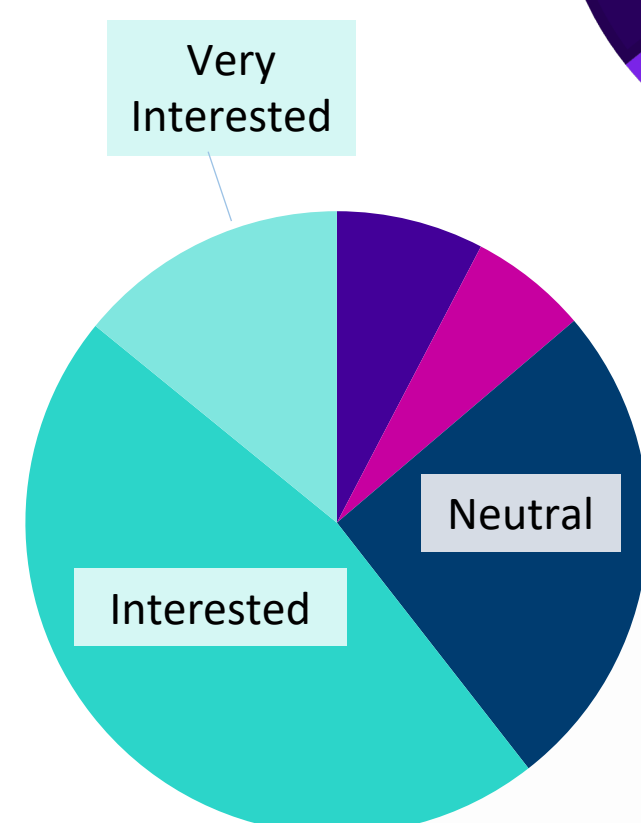


Figure 4. JEDI Initiative Practice

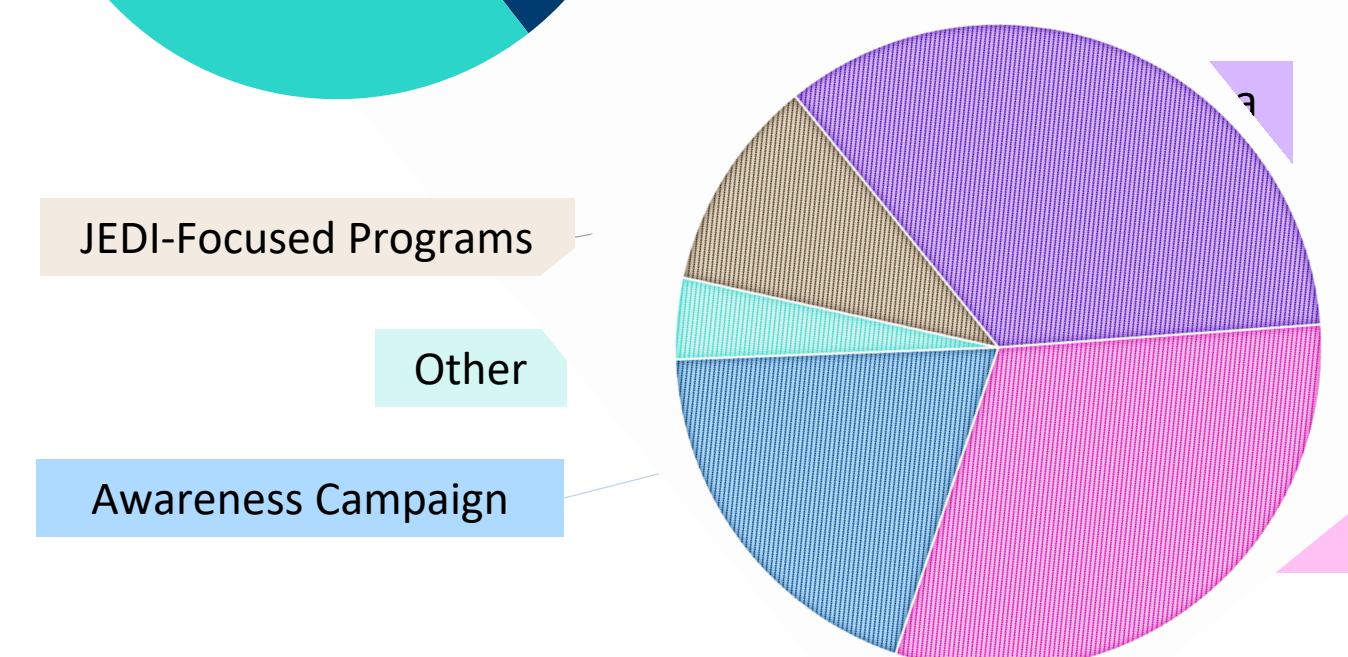
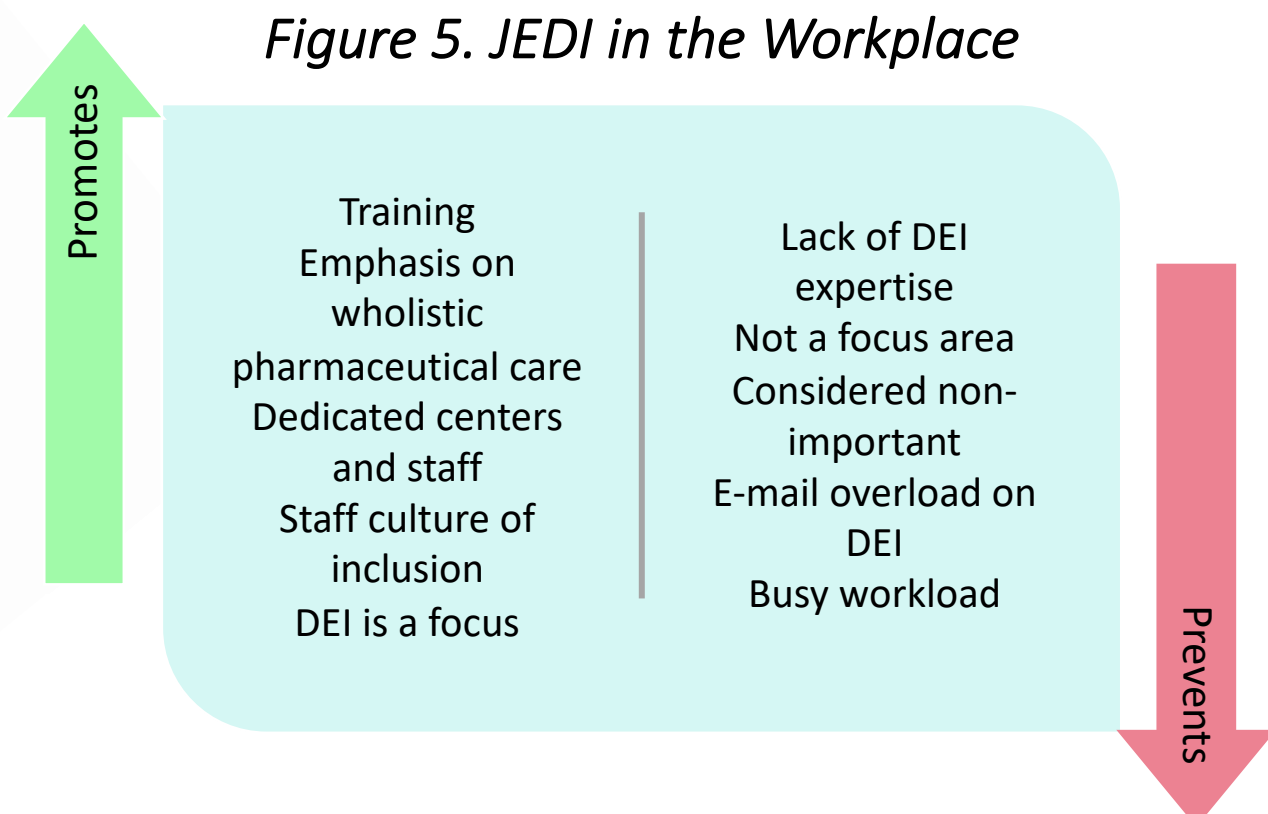


Figure 5. JEDI in the Workplace



Results

Respondents indicated advancement in JEDI is important from both a personal and professional standpoint (Figure 7). Equity is a broad concept and respondents indicated that in addition to age, the top five focus areas of intersectional interest are: mental health, culture, caregiving, disability, and race (Figure 6). Cultural knowledge was perceived to be the greatest knowledge gap compared to clinical knowledge, emotional intelligence and empathy (Figure 8). Respondents believed injustice, bias, isolation, exclusion or another form of marginalization occurred more frequently towards their patients compared to themselves (Figure 9).

Figure 6. Preferred JEDI Focus Areas

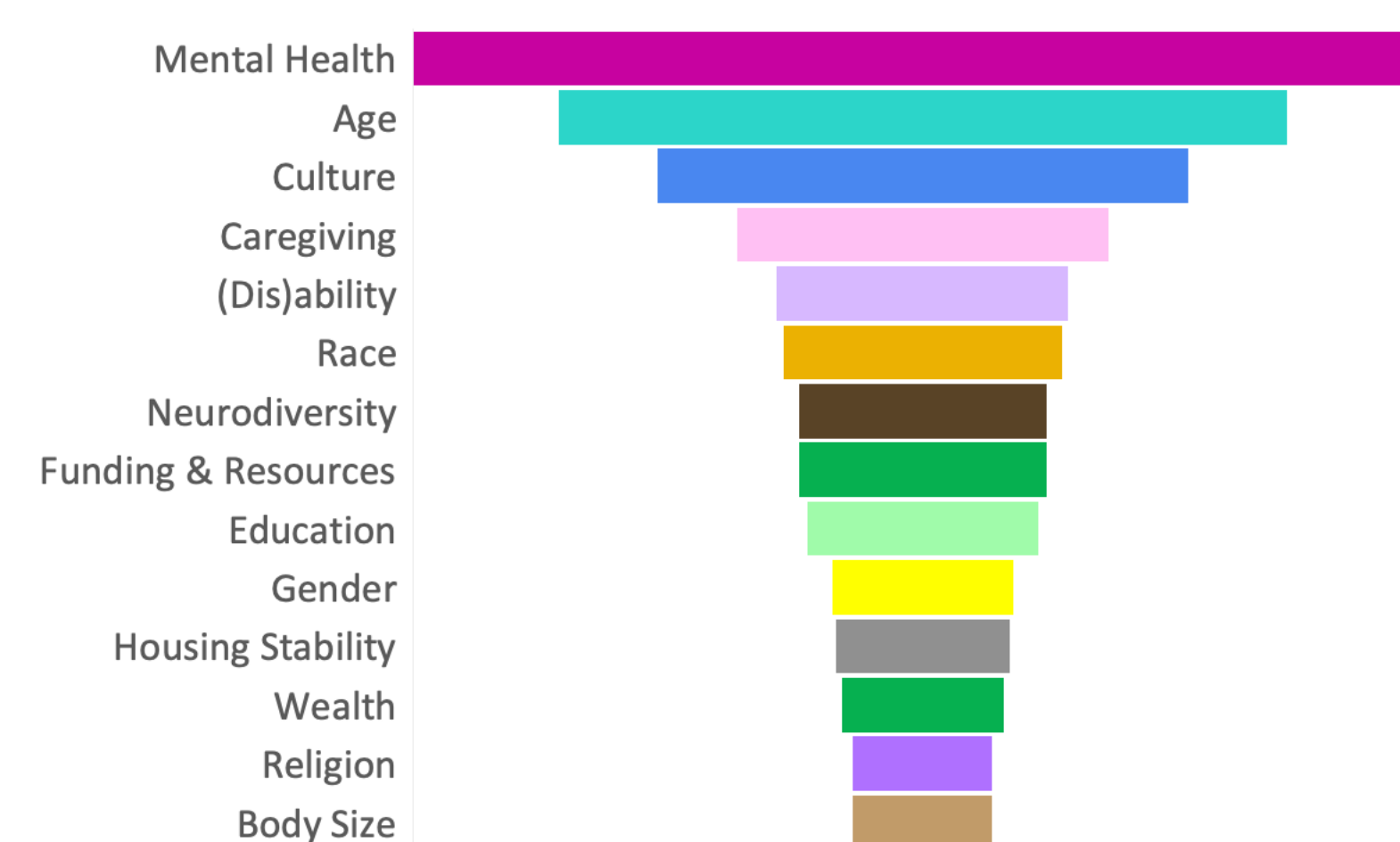


Figure 7. How important is advancing JEDI?

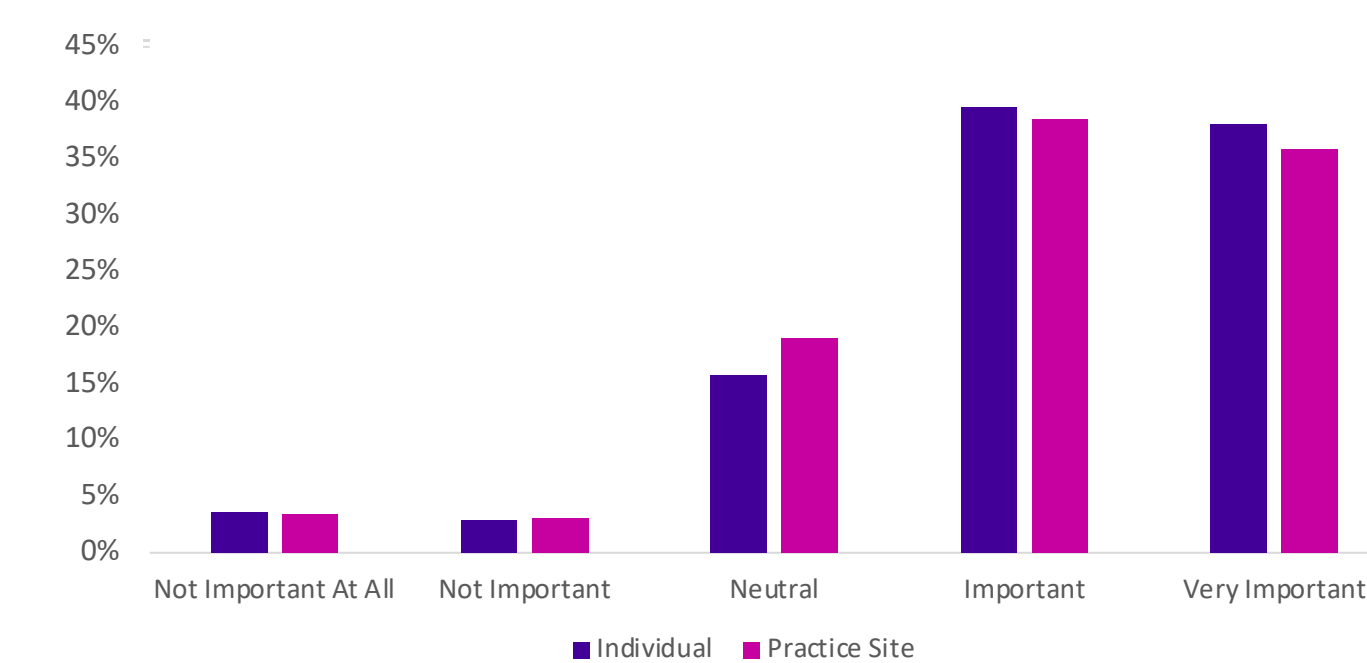


Figure 8. Pharmacists have the “___” to care for patients with the context of JEDI...

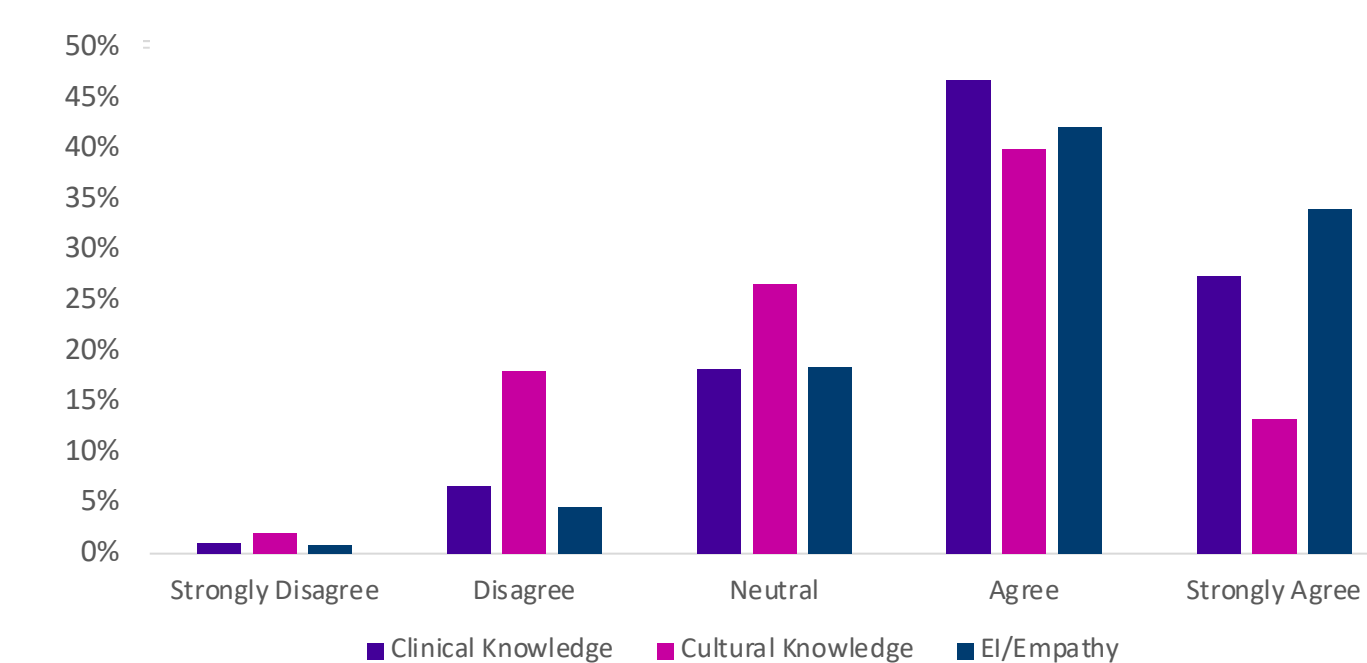
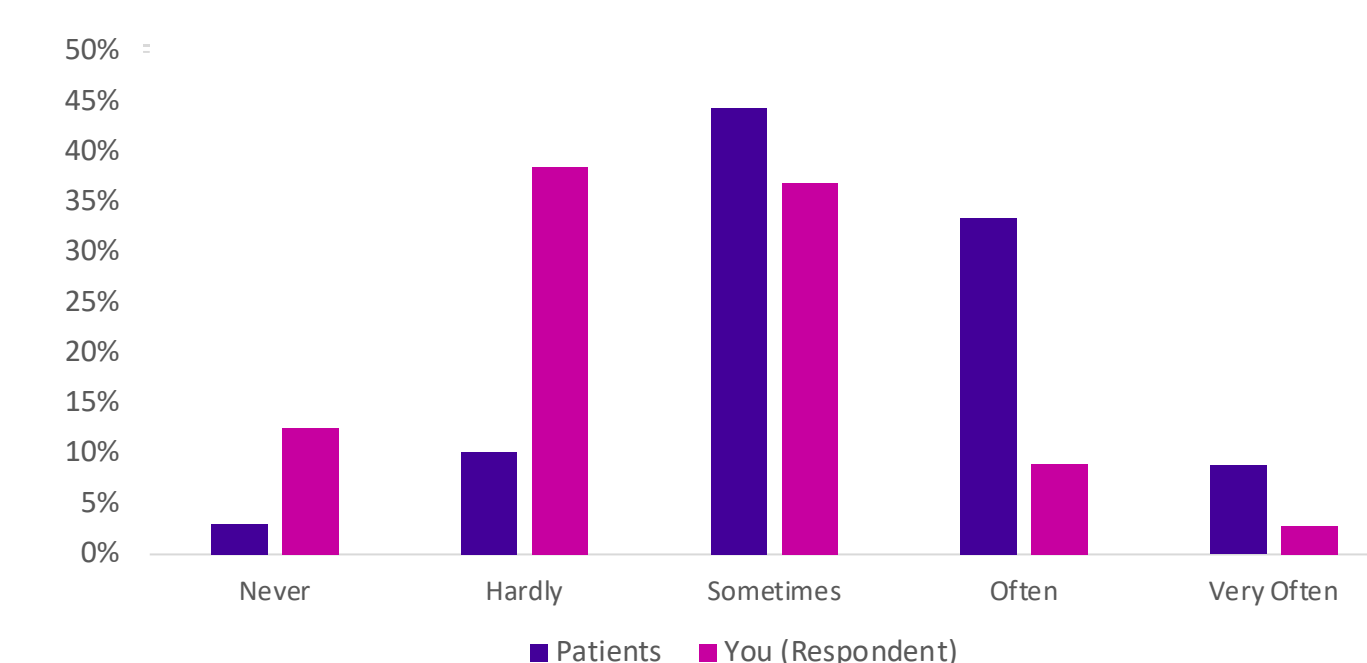


Figure 9. How often do you believe “___” experience injustice, bias, isolation, exclusion, or another form of marginalization?



Discussion

Data is being analyzed by US region for presentation to and discussion with each respective ASCP member region for priority topic area refinement, description of regional nuances, explanation of influence on the greater US landscape, and determination of feasible next steps. Provider perception of JEDI needs, abilities, and patient experience may indicate increased willingness towards receiving training in these equity topic areas. Collecting insights from local patient populations, caregivers, and stakeholders could help improve the robustness of the target focus areas and subsequently the possible developed trainings, interventions, and outcomes.

Limitations

Most survey respondents were individuals with over 25 years of experience primarily in long term care, assisted living, and nursing facilities (Figures 1 & 2). The pharmacy workforce for older adults include many other demographic types. Partnerships with community-based organizations and associations focused on pharmacy, public health, aging, and patient-centered team members can help with further targeting of workforce needs and resource development.

Conclusions

There is substantial opportunity for reducing disparities in aging care by developing the pharmacy workforce to participate in regular data collection, to teach inclusive systems design, and to improve culturally sensitive advocacy for and communications with patients, caregivers, healthcare peers, decision-makers, and the workforce themselves. Pharmacists practicing in settings where older adults reside and receive care offer a key touchpoint to enhance patient care inclusive of JEDI. The findings from this landscape scan reveal further training is desired and should be developed.

References: 1. Data Note: Prescription Drugs and Older Adults. KFF. Published August 9, 2019. [https://www.kff.org/health-reform/issue-brief/data-note-prescription-drugs-and-older-adults/#:~:text=Nearly%20nine%20in%20ten%20\(89,%25\)%2018%2D29%20year%20olds](https://www.kff.org/health-reform/issue-brief/data-note-prescription-drugs-and-older-adults/#:~:text=Nearly%20nine%20in%20ten%20(89,%25)%2018%2D29%20year%20olds). Acknowledgements: Thank you to the ASCP Staff and Members for their help!

