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AN EFFORT TO CREATE NEW UNDERSTANDINGS

This month, from July 20–24, many of our pharmacy school educators will be gathering in Boston, Massachusetts, to attend and to participate in the annual meeting of the American Association of Colleges of Pharmacy.

What makes this meeting noteworthy, in our opinion, is the theme topic that will be featured at this year's conference. The AACP utilizes a three-year sequence in issues for policy consideration. This process entails, in turn, (a) introducing for review, (b) subjecting to study, and (c) adopting a position or making a decision regarding each particular issue.

The theme topic for intensive consideration at this 1980 session is entitled "Bridging the Gap Between the Basic Sciences and Clinical Practice: Teaching, Research, and Service." Because of the interest of our readership—as well as our own personal interest—in the basic sciences, we are gratified that the AACP has chosen this theme for current intensive review and study.

Over the years, the respective educational elements of teaching, research, and service have been accorded varying degrees of emphasis in pharmacy academic circles. Indeed, this has happened to the extent that one or the other of the three elements has been given short-shrift in the process, while one of the other two elements has been lavished with attention, funds, and other scarce resources.

Such imbalance has prompted the more observant and concerned pharmacy leaders to voice some alarm and to suggest that, as in the case of a tripod or a three-legged stool, it is critical that all three supporting legs are of relatively equivalent strength if the load is to be properly held in place.

But despite recognizing this need, and despite apparent attempts to provide the desired equilibrium of support, a decided gap has developed between the basic sciences educators and clinical practice educators. The gap seems to have begun to form many years ago when some pharmacy schools began offering advanced degrees; in the process, at least a number of them began to neglect their first mission of undergraduate education. An attitude of disdain even became evident on the part of some faculty members—they wished to have as little as possible to do with the teaching of undergraduate students. In turn, this attitude seemed to evolve into a somewhat comparable but broader disdain for pharmacy practitioners and pharmacy practice, because these were equated with undergraduate—rather than graduate—training and education.

However, about 15 years ago, the pendulum began to swing back as clinical pharmacy first made its appearance in our pharmacy schools and as it subsequently proceeded to spread nationally within just a few short years.

Depending upon the particular pharmacy school, and depending upon the views of the particular people involved, one now hears that in many cases the basic sciences have been drastically downgraded to the point that students at those schools are receiving very inferior training in the sciences. And conversely, others will describe the reverse situation, claiming that too much emphasis is still being accorded the basic sciences and not sufficient attention is devoted to the clinical aspects.

In the competition for resources and the jockeying for position that have ensued, a very unfortunate further development has occurred within many pharmacy school faculties. Basically, a virtual schism has been created between the respective groups of faculty personnel. This split goes beyond the traditional fierce but good-natured rivalry. It appears to be a growing and deeply felt resentment of each group for the other. Moreover, it shows signs of increasing rather than diminishing in its intensity.

Perhaps for this reason, the fact that the AACP meeting in Boston will focus on bridging the science–practice gap becomes all the more important. If open study, debate, and discussion can be successful in bridging this professional strife among our faculty people, such will be a most significant accomplishment. Otherwise, if this schism—with its associated jealousy, back-biting, and squabbling—continues and escalates, we are faced with the eventual prospect that our educational system will literally tear itself apart. Needless to say, that would be tragic for the future of pharmacy in America.

—EGF