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October 2021

# Standing with Pharmacists in the Age of Self-Care

Report from a GSK Virtual Roundtable

# | About this report

The COVID-19 pandemic has triggered shifts in human behaviour and led to a much greater focus on every day health and self-care. At a time when the world was looking to healthcare professionals for additional guidance and support however, many were forced to close their doors and/or operate remote services.

In addition to access challenges, public caution prevailed. In April 2020, the first full month of lockdown in the UK, the number of accident and emergency visits more than halved when compared to the same month in 2019, with perceptions of the risks associated with visiting hospitals documented as a cause.<sup>1</sup>

In the US, emergency department visits also declined by 42% early on in the COVID-19 pandemic.<sup>2</sup>

Pharmacies were one of the few primary healthcare services to stay open during the global pandemic and provided a vital and expanded service that was accessible to all. As a result, almost half of Europeans recently surveyed\* said they were planning to consult their pharmacist more often on matters of health and self-care.<sup>3</sup>

\*4,400 participants surveyed were aged between 16 and 75 years in Germany, Italy, Spain and the UK

\*\*This study was published between May and September 2020

In many ways, the global pandemic has changed pharmacy practice and accelerated the role of self-care. This has opened the door to a future of better domestic health resource allocation which, allied with existing healthcare sector innovation, can help improve access to health for everyone.<sup>4</sup>

In September 2020, GSK Consumer Healthcare released a **Statement of Intent** on the vital role of pharmacists in the future success of healthcare systems worldwide and made a long-term commitment to support pharmacists and pharmacy teams.

In December of the same year, a report published by Vintura supported by GSK Consumer Healthcare,\*\* demonstrated both *The Health-Economic Benefits of Self-Care* in Europe and the vital role of pharmacists in promoting and encouraging self-care.<sup>4</sup>

In June 2021, working in collaboration with the International Pharmaceutical Federation (FIP), GSK Consumer Healthcare also convened a global roundtable with pharmacists, policy experts and health consumers to discuss the role of pharmacy in the age of self-care and uncover ways in which the company could support them.

This report provides a summary of the discussion that took place at that roundtable and the key insights that were shared. It also summarises GSK Consumer Healthcare's response.

## | Additional resources

- GSK's Statement of Intent to Pharmacists: [https://www.linkedin.com/posts/gsk-healthpartner-hcp\\_pharmacist-statement-of-intent-activity-6715185048770895872-AyRn](https://www.linkedin.com/posts/gsk-healthpartner-hcp_pharmacist-statement-of-intent-activity-6715185048770895872-AyRn).
- The Health Economic Benefits of Self-Care in Europe: [https://assets.gskstatic.com/corporate/Health-Economic-Study/GSK\\_report\\_summary-FINAL.pdf](https://assets.gskstatic.com/corporate/Health-Economic-Study/GSK_report_summary-FINAL.pdf).
- The Impact of Covid-19 on Self-Care: <https://www.gsk.com/en-gb/media/resource-centre/covid-19-prompts-increased-focus-on-self-care/>.

# | Roundtable attendees

With gratitude and thanks to the *Standing with Pharmacists in the Age of Self-Care* roundtable attendees:

## Co-Chair: Dr Catherine Duggan

Chief Executive Officer, International Pharmaceutical Federation (FIP)

## Co-Chair: Lars-Åke Söderlund

Vice President, International Pharmaceutical Federation (FIP)

## Benjamin Bluml

Senior Vice President for Research and Innovation, American Pharmacists Association Foundation

## Jacqueline Bowman-Busato

Co-Founder of the Belgian private foundation Pacte Adiposité – Adipositas Pacte, Brussels – “For the Rights of people living with Obesity”

## Professor Rosemary Calder

Professor of Health Policy, Mitchell Institute, Victoria University, Australia and Professor of Health Policy, Mitchell Institute’s Australian Health Policy Collaboration

## João Guedes

President, International Pharmaceutical Students’ Federation

## Dr Prosper Hiag

President, African Pharmaceutical Forum

## B. Douglas Hoey

Chief Executive Officer, National Community Pharmacists Association, USA

## John Jackson

President of the Victorian branch of the Pharmaceutical Society of Australia and President, Western Pacific Pharmaceutical Forum

## Dr Aska Patel

Practicing Pharmacist, Canada

## Dr Eduardo Savio

President, Pharmaceutical Forum of the Americas

## Judy Stenmark

Director-General, Global Self-Care Federation

## Nadezhda Yakovleva

Head of Pharmacy at Laboratory DD, Russia

## GSK Representatives

### Robert Chaponis

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# 1

## Section 1: Landscape Insights

## 1.1

# There's No Going Back in Community Pharmacy



**There's no going back in community pharmacy. Our focus should be on moving forward towards the new normal.**



**Lars-Åke Söderlund**

Vice President, International Pharmaceutical Federation (FIP)

The COVID-19 pandemic resulted in unprecedented challenges for healthcare systems worldwide. Challenges that also provided an opportunity for paradigm shifts in healthcare services, spearheaded by community pharmacy.

Changes in pharmacy have included an expanded role for pharmacists, increased recognition of their role through vaccine roll out programmes, closer collaboration between pharmacists and other healthcare providers and new medicine preparation and delivery services.

*"In the pandemic, the pharmacy was the place that you went to get all sorts of health advice, to really navigate the changing evidence-base and also to*

*get safe and sustained supplies of your medicines. We remained open, and as such, the impact (of pharmacy) was highlighted – and that's a truly global phenomenon,"* said Dr Catherine Duggan, Chief Executive Officer of the International Pharmacy Federation (FIP) and Virtual Roundtable Co-Chair.

Perceptions of pharmacy among health consumers, other healthcare providers and Governments have also changed. In a recent survey,\* almost half of Europeans surveyed said they were planning to consult their pharmacist more often on matters of health and self-care since the global pandemic and a number of open letters thanking pharmacists can be found from national government representatives online.<sup>2</sup>

\*4,400 participants surveyed were aged between 16 and 75 years in Germany, Italy, Spain and the UK

## 1.2

# An Increased Focus on Self-Care



**Self-care is the ability of individuals, families and communities to promote health, prevent disease, maintain health and cope with illness and disability with or without the support of a health worker.**



World Health Organization<sup>5</sup>

It has long been accepted that enabling individuals to participate in self-care, to manage their minor, acute and chronic conditions and to take preventative actions, empowers them to become better managers of their own health, thus driving improved health outcomes.<sup>6</sup>

Self-care can also ease the burden of overstretched healthcare systems, reduce costs, increase the effectiveness of healthcare and free up time and resources for healthcare professionals (HCPs) by reducing the need to see and treat patients for conditions suitable for self-treatment.<sup>7</sup>

In addition to these reasons, the stay-at-home mandates in place in many countries and the reduced contact arising from a reluctance to see a doctor due to concerns of contracting COVID-19, meant self-care became increasingly important during the global pandemic.

For many individuals, the jolt that the pandemic incited led to new everyday health habits that have persisted, both for the population at large and the healthcare community.

This has been borne out in a recent survey, in which **65%** of people across four European countries said they were **more likely to consider their health in day-to-day decision-making** than they were before the pandemic.<sup>8</sup>

Challenges to the continued improvement of self-care do however exist. Although **80%** of Europeans recently surveyed stated it was **their responsibility to manage their own health** and were willing to do so, only **2 in 10** said they **felt confident enough to do it**.<sup>4</sup> Nearly half of the American and European population also have low levels of health literacy.<sup>9</sup>

Investment in disease awareness and prevention education is low in all regions of the world. For example, in Europe, around **80% of the annual health budget is spent on non-communicable diseases, whilst only 3% is spent on primary prevention**.<sup>10</sup>

### 1.3

# The Vital Role of Pharmacy in Self-Care



During the pandemic, we were visited by very many patients who were frustrated, overwhelmed and upset. They came to us for qualified help and to be reassured.



**Nadezhda Yakovleva**

Head of Pharmacy at Laboratory DD, Russia

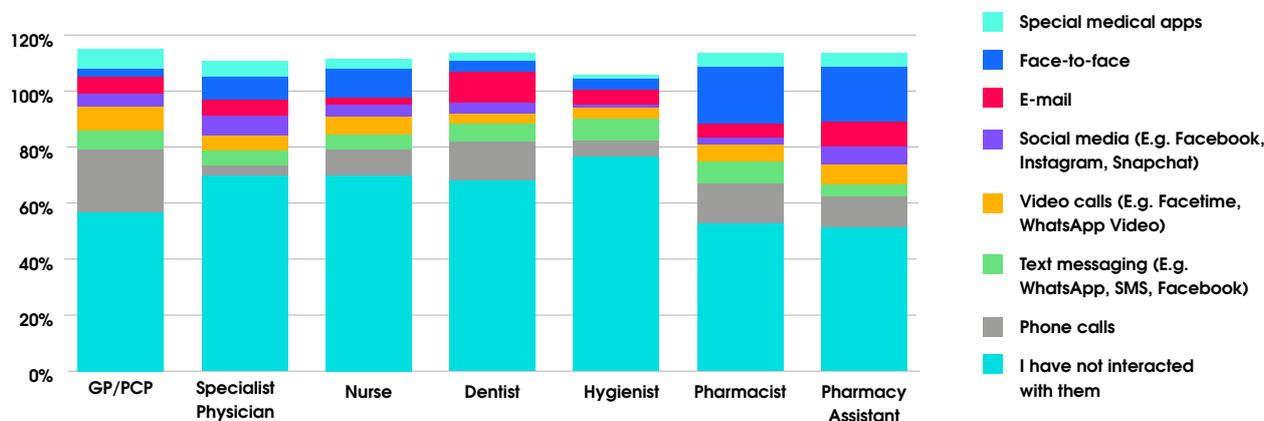
Pharmacy is regarded as the customary setting for self-care. Recent research shows that the largest proportion of face-to-face contact in healthcare is with pharmacists and pharmacist assistants.<sup>11</sup>

Pharmacists are at the very heart of the local communities they serve. They are the most easily accessed health experts and extremely well placed to provide essential health advice without the need to book and wait for healthcare appointments.<sup>4</sup> (Figure 1).

The accessibility of pharmacy means that the knowledge and skills of community pharmacists are extensively sought by everyone from teenagers to new parents, to older adults and everyone in-between.

With **1.6 million people in England alone visiting a pharmacy every single day**,<sup>12</sup> pharmacists have the potential to empower huge numbers of people to understand how to better look after their health, prevent disease and manage health conditions at home.

**Figure 1: The largest proportion of face-to-face contact with patients is now with pharmacists and pharmacy assistants<sup>11</sup>**



Have you seen or interacted with any of the following healthcare professionals for treatment or advice since you started social distancing? If you have interacted with them how did it happen? \*\*Total is over 100% since you could have had multiple interactions with the same HCP. Pollfish Survey. n=100 respondents. UK. April 10<sup>th</sup> 2020.

## 1.4

# The Health Consumer Perspective



**It's about developing allies and understanding that everybody is an expert in something. So, working together, we can solve problems.**



**Jacqueline Bowman-Busato**

Co-Founder of the Belgian Foundation for the Rights of People Living with Obesity Pacte Adiposité – Adipositas Pacte, Brussels and a global patient representative

Understanding the perspective and needs of health consumers is essential for community pharmacists when supporting self-care.

*“Never just assume you know what we want,”* said Jacqueline Bowman-Busato, Co-Founder of the Pacte Adiposité – Adipositas Pacte, a Belgian private foundation for the rights of people living with obesity.

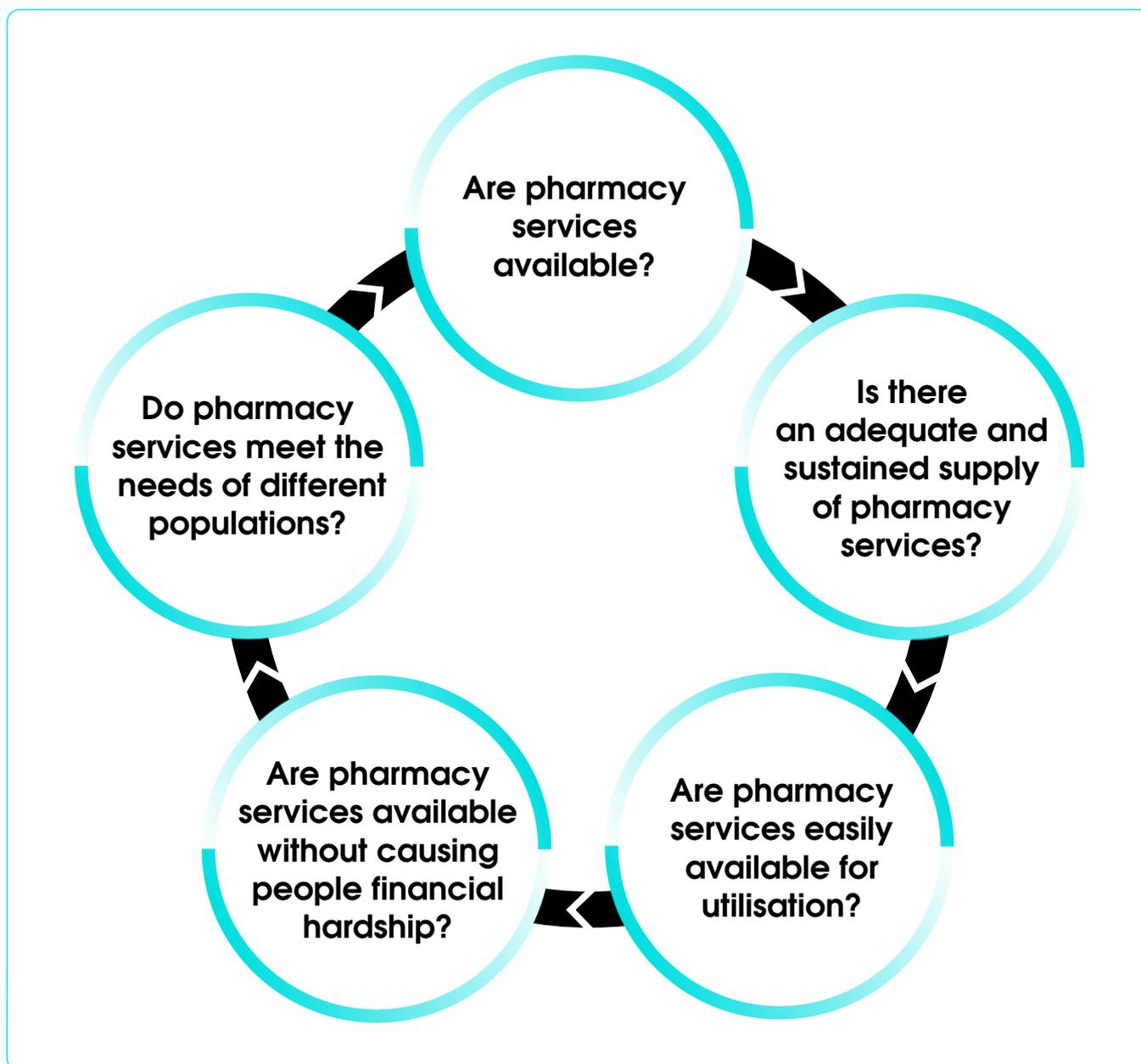
*“With only 4.3% of the global population free from any health problems whatsoever, you can't make the assumption that the person standing in front of you is otherwise healthy.”*

Ms Bowman-Busato called for a partnership approach from pharmacists and pharmacy teams with health consumers. *“We don't want to passively consume information,”* she said. *“It's about being an equal partner at the table of managing our own health.”*

*“Every touchpoint, from dispensing a prescription product, selling an over-the-counter product to providing an additional service, such as blood pressure measurement or a COVID vaccination, offers an opportunity to have a conversation that builds a relationship,”* she added.

She also called for pharmacists to adopt a “5As” principles framework focused on the accessibility, availability, adequacy, appropriateness and affordability of pharmacy support and services.<sup>13</sup> (Figure 2).

Figure 2: The 5As of accessibility (adapted from the Patient Access Partnership)<sup>13</sup>



# 2

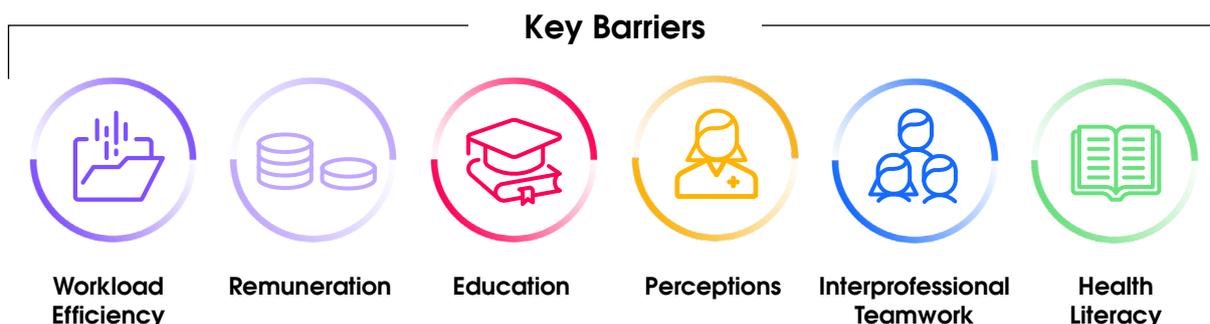
## **Section 2:** Overcoming Key Barriers to Pharmacy Supported Self-Care

During the roundtable, attendees participated in a workshop session to consider the barriers that exist to pharmacists playing a more active role in self-care and disease prevention.

In total, six key barriers were identified and a range of potential solutions identified. (Figure 3).

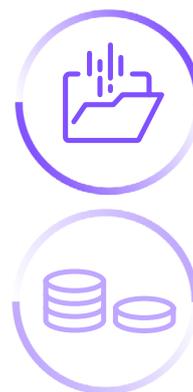
Broadly speaking, these barriers and proposed solutions also reflect findings from research recently conducted in Australia, which clearly demonstrates that factors both within and beyond pharmacists' immediate practice can impact the uptake of patient-focused professional programmes.<sup>25</sup>

**Figure 3: The key pharmacy self-care barriers**



## 2.1

# Workload and Remuneration



“ I think that financial incentives are really important to help prioritise pharmacist behaviours. ”

**Douglas Hoey**

Chief Executive Officer, National Community Pharmacists Association, USA

The pressure of being a pharmacy professional in some countries has long been known. Even before the COVID-19 pandemic, many were at risk of burnout.

Pre-pandemic data reveal that as many as **87% of pharmacists in China had burnout indicators**<sup>14</sup> and **58% of UK pharmacists found their job stressful**, with up to **1 in 6 expected to quit within the next five years**.<sup>15</sup>

Research has also confirmed the negative impact of COVID-19 on the workload and wellbeing of pharmacy staff.<sup>16-19</sup>

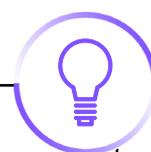
The pandemic caused an increase in core dispensing services as patients stockpiled medicines, a worsening of existing drug shortages, staff shortages, front of store practice changes and many additional cleaning and safety measures.<sup>16-22</sup>

Underpinning these stressors is the issue of pharmacy reimbursement. Often, pharmacy reimbursement is directly proportional to prescription volume, thus regulating how pharmacy teams prioritise their time and resources.

Workload and reimbursement models are therefore likely to stand in the way of pharmacy taking a more active role in self-care. **“Remember that pharmacists have to jump between dispensing and then stepping in front of the counter to be coach and counsellor,”** said Dr Aska Patel, a practicing Canadian pharmacist.

Community pharmacists are now being called upon to provide a growing range of primary care services, many of which are not remunerated.

**“There just isn’t enough fat in the dispensing revenue to cross-subsidise some of the things we are talking about here,”** added John Jackson, President of the Victorian branch of the Pharmaceutical Society of Australia and President, Western Pacific Pharmaceutical Forum.



## Workload Efficiency and Remuneration Proposed Solutions

*Standing with Pharmacists in the Age of Self-Care* roundtable attendees agreed that the following is necessary to overcome existing workload and remuneration barriers for pharmacists in self-care:

**1**

Policy support to help free up resources that can be dedicated to self-care and patient counselling

**2**

Financial incentives for pharmacy in health education, disease prevention and health literacy

**3**

Simple tools to enable efficient and effective dialogue with health consumers about disease prevention and self-care

**4**

Change to Support the mental health and wellbeing of pharmacists and pharmacy teams



## Case Study: Sweden

Lars-Åke Söderlund, Vice President, International Pharmaceutical Federation (FIP) and Virtual Roundtable Co-Chair, has been involved for the past 12 years in a national programme called “Check My Medicines,” in Sweden.

Within the programme, community pharmacists work with older patients to empower their understanding and management of the medicines they are taking and to reduce inappropriate prescribing. A key aim of the programme is to make every patient an ambassador of their own health.

It has successfully improved medication usage and compliance for 300,000 Swedish people and as a result, new laws have been implemented that include medicine utilisation reviews as a reimbursed service within pharmacy, among other new remunerated pharmacy services.

Being able to demonstrate the benefits of pharmacy intervention in self-care could similarly drive policy change.

For more information, visit the “Swedish Check My Medicines” website:  
<https://www.kollpalakemedel.se>.

2.2

# Education



**If a pharmacist is not continuously training himself or herself, in the old and new things that are happening, pharmacists will not be prepared for the challenges that are always changing.**



Attendee

The curricula for pharmacists, pharmacy assistants and technicians does not currently include self-care topics, including disease prevention and health literacy. *“It’s not just about the content either,”* said Judy Stenmark, Director-General, Global Self-Care Federation. *“It’s about communication skills, an understanding of psychology and behaviour change.”*



## Education Proposed Solutions

*Standing with Pharmacists in the Age of Self-Care* roundtable attendees agreed that the following are required to overcome education barriers for pharmacists in self-care:

**1**

An expansion of the pharmacy undergraduate curriculum to include self-care

**2**

Continuing Professional Development (CPD) opportunities in self-care, endorsed by national and regional pharmacy organisations

**3**

Tools and training on rapport, emotional connection, communication skills, psychology and behavioural science for pharmacy teams

## 2.3

# Perceptions of Pharmacists



“ I don’t think there’s enough individuals and groups who really get the added value of the community pharmacist. ”

**Judy Stenmark**

Director-General, Global Self-Care Federation

Perceptions of pharmacists among other healthcare professionals and health consumers remains a concern.

In many countries, pharmacists are only regarded as experts in treating acute or self-limiting conditions.

*“Our capabilities relating to self-care include disease prevention, immunisation, detection of diseases via point of care testing and the management of chronic diseases, or non-communicable diseases, but there are misconceptions about that. Pharmacy and pharmacists can do a lot more,”* said Lars-Åke Söderlund, Vice President, International Pharmaceutical Federation (FIP) and virtual roundtable Co-Chair.

Benjamin Bluml, Senior Vice President for Research and Innovation, American Pharmacists Association Foundation, suggested that anchoring self-care discussions and interventions on the fact that pharmacists are medication use experts could be the fastest way of changing perceptions. *“Explaining how*

*we add value to team-based care as medication use experts would be extraordinarily helpful in turning the tide,”* he said.

*“I wonder if self-care should be defined as being something that is achieved in collaboration with your pharmacist?”* suggested Douglas Hoey, Chief Executive Officer, National Community Pharmacists Association, USA, when talking about existing health consumer perceptions of pharmacists.

*“If we, as a profession just made that connection every time self-care is talked about, it would begin to build perceptions in health consumers minds that self-care is something that is achieved in collaboration with your pharmacist.”*

The creation of a dedicated Community Consultant Pharmacist role was also considered to be a viable option, in which pharmacists offer advice to health consumers, without also having to dispense.



## Perception of Pharmacists Proposed Solutions

*Standing with Pharmacists in the Age of Self-Care* roundtable attendees agreed that the following is needed to overcome perception barriers for pharmacists in self-care:

**1** \_\_\_\_\_

Public awareness campaigns that elevate the role of pharmacists in self-care

**2** \_\_\_\_\_

Self-care best practice sharing across countries

**3** \_\_\_\_\_

Aligning on language that can be used with policy, healthcare professional and health consumer / patient stakeholders that recognises the full spectrum of pharmacy capabilities and the added value of pharmacists within self-care as medication use experts

**4** \_\_\_\_\_

Greater promotion of World Pharmacy Day / Week to health consumers

## Case Study: UK



In the UK, GP surgeries are integrating pharmacists into their care team to take appointments with patients to help manage their medicines and care plans.

Known as Clinical Pharmacists, these professionals carry out structured medication reviews, consult with and treat patients directly, provide extra help to manage long-term conditions and conduct health checks.<sup>23</sup> This approach can result in better care for patients, fewer hospital admissions, reduced overprescribing, better integration with interdisciplinary healthcare teams and reduction in health inequalities.<sup>23</sup>

It also creates opportunities for pharmacists to discuss self-care approaches for chronic conditions with patients, such as lifestyle changes and practical support.<sup>23</sup>

An exploratory qualitative study completed amongst patients who had an appointment with a pharmacist reflected their positive experience in terms of accessibility and the quality of interaction, care, and empathy.<sup>24</sup> It also highlighted a need to raise awareness of the role of pharmacists within general practice.<sup>24</sup>

For more information visit the NHS England website: <https://www.england.nhs.uk/gp/case-studies/structured-medication-reviews-and-the-primary-care-network-multidisciplinary-approach/>

## 2.4

# Interprofessional Teamwork



“ Better integration of pharmacists within healthcare systems has to be the priority. ”

**Dr Prosper Hiag**

President, African Pharmaceutical Forum

There is an urgent need for improved pharmacy representation in national primary care policy making and in particular, self-care and disease prevention frameworks.

Asserting, demonstrating and measuring the value of pharmacy in supporting individual health and self-care is fundamental to achieving regulatory and reimbursement support. *“Engaging with policy makers about the demonstrable health and economic benefits of the role of pharmacists and pharmacy teams in disease prevention is essential,”* said Professor Rosemary Calder, Professor of Health Policy, Mitchell Institute, Victoria University, Australia and Professor of Health Policy, Mitchell Institute’s Australian Health Policy Collaboration.

Dr Prosper Hiag, President, African Pharmaceutical Forum, highlighted the potential for greater pharmacy integration in national campaigns. *“In Africa, the priority disease prevention programmes, such as malaria, AIDs and tuberculosis are handled by the WHO and managed at a ground level by doctors. Even simple changes, such as the distribution via pharmacies of long-lasting bed nets to prevent malaria would make so much sense, be a huge step forward and a massive help for everyone.”*

Challenges remain at fundamental levels. *“I have looked into many different national health policies. And actually the role of community pharmacy in self-care is*

*never included in the strategy,”* said Lars-Åke Söderlund, Vice President, International Pharmaceutical Federation (FIP).

In addition to policy making, the exclusion of pharmacy in patient data/record networks across healthcare systems prevents optimal connectivity with other healthcare providers and hinders the quality of support that pharmacists provide in self-care.

A prime example is when patients transition between secondary and primary care with resultant medication changes.

A solution could be the creation of a single, individualised, automatically updated medications list held by every individual. Not only could this help focus and empower a person around their medication, but the list can also then be shared with the pharmacist, and other healthcare providers, as they move between primary and secondary care.

The call for better pharmacy representation and inclusion also extends beyond pharmacists to the wider pharmacy team. *“Looking at the role of our support staff and our certified pharmacy technicians and engaging them in meaningful roles related to disease prevention and health literacy makes so much sense,”* said Benjamin Bluml, Senior Vice President for Research and Innovation, American Pharmacists Association Foundation.



## Interprofessional Teamwork Proposed Solutions

*Standing with Pharmacists in the Age of Self-Care* roundtable attendees agreed that the following is required to overcome pharmacy representation and inclusion barriers in self-care:

**1** \_\_\_\_\_

Adoption of a new primary care model in which pharmacy is recognised as the gateway to everyday health and care

**2** \_\_\_\_\_

The inclusion of pharmacy in patient data/record networks across healthcare systems

**3** \_\_\_\_\_

The inclusion of pharmacists in primary care, in particular self-care and disease prevention frameworks in national policy making

**4** \_\_\_\_\_

Tools and training in self-care for pharmacy technicians and support staff

**5** \_\_\_\_\_

Creation of a single, individualised, up-to-date medications list for individuals to share with their pharmacist, as well as other healthcare providers



2.5

## Health Literacy



**In the case of low health literacy, people don't even know they have a problem.**



**Dr Eduardo Savio**

President, Pharmaceutical Forum of the Americas

The COVID-19 'infodemic' highlighted the fact that poor health literacy is an underestimated public health problem.<sup>26</sup>

*"It is important not to only talk about uninformed patients,"* said Professor Rosemary Calder Professor of Health Policy, Mitchell Institute, Victoria University, Australia and Professor of Health Policy, Mitchell Institute's Australian Health Policy Collaboration.

*"Thanks to Dr Google and self-research, many health consumers are self-informed and that needs to be respected in building a relationship to support self-care."*

*"As pharmacists, we have a social responsibility to ensure patients and health consumers have the correct information, that we are really precise and they are really clear, there's often lots of confusion and misinformation,"* said Nadezhda Yakovleva, Practicing Pharmacist, Russia.

Having the skills required to identify poor health literacy levels quickly within pharmacy practice is a concern among pharmacists. *"It's about ensuring the pharmacy workforce is trained to both identify health literacy levels and be responsive to differing levels of health literacy within their community,"* said Lars-Åke Söderlund, Vice President, International Pharmaceutical Federation (FIP).



## Health Literacy Proposed Solutions

*Standing with Pharmacists in the Age of Self-Care* roundtable attendees agreed that the following is required to overcome health literacy barriers in self-care:

**1** \_\_\_\_\_

Creation of a pharmacist-staffed helpline for health consumers

**2** \_\_\_\_\_

Platforms that pull through community health trends to empower pharmacists and health consumers

**3** \_\_\_\_\_

Simple health literacy assessment tools for pharmacists to use with health consumers

**4** \_\_\_\_\_

Self-care conversation frameworks and frequently asked questions (FAQs) in key conditions

**5** \_\_\_\_\_

Pharmacy-approved quality assurance mark for online information

## Case Study: Canada

A new initiative has been introduced by a third-party insurer in Canada to incentivise pharmacists to provide cardiovascular prevention, education and counselling to its policy holders.

Although outcomes data is not yet publicly available, Dr Aska Patel, a practicing Canadian pharmacist, believes this type of research is the way forward: *“If we have more research focused on the outcomes of good health literacy, it will really help make our case.”*

Existing research from the Conference Board of Canada has examined the potential health and economic impact of expanded community pharmacy services in cardiovascular disease, smoking cessation and pneumococcal vaccination.<sup>27</sup> The cumulative cost savings from

2016 to 2035 across all three pharmacy services were predicted to be up to **\$25.7bn** Canadian dollars, including direct healthcare costs and indirect costs in productivity gains.<sup>27</sup>

The direct cost returns of an advanced medicine review and cardiovascular disease management were estimated at **\$2.30** by 2035 for every dollar invested in this pharmacy service.<sup>26</sup> A pharmacy smoking cessation service was predicted to return **\$9.10** for each dollar invested and **\$72.00** for pneumococcal vaccination.<sup>27</sup>

For more details of this report visit: [https://pans.ns.ca/system/files/files/page/8721\\_expanded\\_pharmacy\\_rpt\\_embargoed.pdf](https://pans.ns.ca/system/files/files/page/8721_expanded_pharmacy_rpt_embargoed.pdf).



# 3

## **Section 3:** GSK Consumer Healthcare's Commitment to Pharmacists

### 3

# GSK Consumer Healthcare's Commitment to Pharmacists

At GSK Consumer Healthcare, our purpose is to deliver better everyday health, putting humanity at the heart of everything we do.

Our mission is to close the gap between what the consumer healthcare industry currently offers and what the world needs.

That means implementing a new approach, one that recognises health consumers as whole people and prioritises the experts that care for them.

On World Pharmacist Day 2020, GSK Consumer Healthcare made a long-term commitment to support pharmacists in delivering everyday health and wellbeing for everyone.

The *Standing with Pharmacists in the Age of Self-Care* roundtable was the first step on our journey of fulfilling

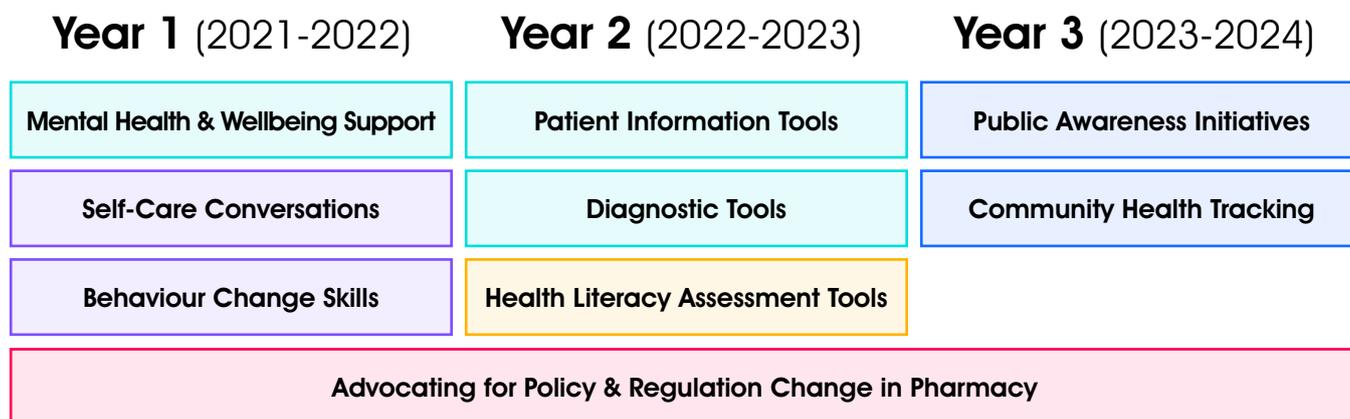
that commitment and a vital opportunity to hear about unmet needs in pharmacy, directly from pharmacists, policy makers and patient representatives.

Now it is time for us to act.

As a result of the roundtable, we will launch a three-year programme to support the global pharmacy community with practical tools that help overcome the key barriers it is facing.

Those barriers include workload efficiency; remuneration; limited education on disease prevention; public misperceptions of pharmacists' expertise; integration challenges within the wider healthcare system; and support for identifying and addressing low health literacy among health consumers.

The GSK Consumer Healthcare programme will include, but is not limited to:



Follow our progress: @GSKHealthPartner\_HCP and [gskhealthpartner.com](https://gskhealthpartner.com).

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**Now, more than ever, we have the opportunity to deliver and define the role that we want to play, and the role that is needed of us to play. Fundamentally, the task is a mindset shift, from managing illnesses to promoting wellness.**

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**Dr Catherine Duggan**

Chief Executive Officer, International  
Pharmaceutical Federation (FIP)

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**I think we now need a new approach to healthcare that empowers people to look after their own health. And community pharmacy is where self-care happens, to a huge extent.**

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**Lars Åke Söderlund**

Vice President, Community Pharmacy Section,  
International Pharmaceutical Federation (FIP)