OPPORTUNITIES FOR REFUGEE PHARMACISTS

By Linda Rabben
INTRODUCTION
Tens of thousands of refugees, asylees, Cuban/Haitian entrants and victims of human trafficking resettle in the United States every year. In FY 2008 alone, 60,279 refugees were resettled by 10 national voluntary agencies. All make lives for themselves in cities, towns and suburbs across the country, and all strive for the same things: freedom and opportunity. Many of these newcomers bring a few reminders of home, their families if they are lucky, and their past experience. This experience is vast and varied. Now more than ever, most resettlement agencies are greeting individuals at the airport who are pharmacists, lawyers, teachers, professional interpreters, engineers and so on.

In a recent survey conducted by RefugeeWorks, at least 74 percent of resettlement agencies around the country had one or more healthcare professionals in their caseload. About 25 clients per agency are seeking recertification in their previous occupation. These people represent an enormous amount of human capital. However, the issue for many of these new Americans is that they do not know how to navigate the employment and advancement systems in place in their particular profession. How does a teacher from Nepal obtain a job in education? How does a pharmacist from Iraq get into the healthcare field?

To answer these questions and many more, RefugeeWorks has created a series of in-depth guides that can be used to help newcomers regain their professional career. The first of the series focused on engineering, the second on teaching, the third on physicians and nurses. This guide is about the pharmacy profession: its structure and future, the skills, credentials and training needed to enter this line of work—and most important, how to find employment as a pharmacist.

If you are someone who is working in the field of refugee resettlement, we urge you to use this research to help your clients navigate what can sometimes be a perplexing road to regaining entry into a particular profession. If you are a new American seeking to use your skills in your chosen occupation, we hope this guide will make your journey a little easier.

Jonathan Lucus
National Coordinator, RefugeeWorks

1. A REFUGEE PHARMACIST IN THE UNITED STATES

Like his wife and his mother, Saif Alnasseri, 31, is a pharmacist from Iraq. In addition to working in a hospital and a community pharmacy, he had moonlighted as a translator for the Los Angeles Times in Baghdad—a job that put him in danger. He and his family, including a toddler daughter, arrived in Plainfield, New Jersey, in December 2008. With assistance from relatives, Catholic Charities and the List Project (a grassroots group that helps Iraqi refugees in the United States), Saif found housing, transportation and a job as a pharmacy technician at a local drugstore. His wife also works as a pharmacy technician at a different drugstore, and his mother is a full-time grandparent. The couple’s salaries are low and New Jersey is expensive, but they are grateful to feel safe.

“This job is not easy,” Saif says, but he is glad to have it. He plans to keep working at the drugstore until he can obtain a license after years of study, credential evaluations, examinations and an internship. Impressed by Saif’s seriousness and dedication, his employer has assured him of moral support along the way. “Maybe it’s going to be a bit of a long process,” he says, “but I’m heading in the right direction.”

2. THE PHARMACY PROFESSION

Pharmacists distribute prescription drugs to individuals and advise them and others about medications. Most work in stores or healthcare facilities. Some compound medications or make solutions. According to a Colorado study, “Today’s pharmacists collaborate with physicians on drug therapy counseling, educate patients about safe drug use, serve on clinical care teams and participate in clinical trials research.” Specialist pharmacists work on intravenous nutrition support and oncological, nuclear, geriatric and psychiatric pharmacy. They may work in marketing or sales, for health insurance companies, the government, HMOs, public health agencies or the armed services, or as teachers and researchers at schools of pharmacy.
Pharmacy technicians “help licensed pharmacists prepare prescription medications, provide customer service and perform administrative duties,” according to the Bureau of Labor Statistics (BLS). They receive prescription requests, count pills and label bottles under the supervision of pharmacists, who are responsible for the accuracy of prescriptions whether they dispense them or not.

Pharmacy is the third largest healthcare profession in the United States. In 2008, 269,000 pharmacists were working—65 percent in retail settings, 22 percent in hospitals and the rest in other venues. Their salaries are highest at HMOs, chains and mass merchandisers. Most pharmacists work fulltime, and some work overtime at nights or on weekends and holidays.

Like many other professions, pharmacy is experiencing shortages as aging practitioners retire. For example, a quarter of Colorado pharmacists are over age 55. In the state’s rural areas, where independent pharmacies are closing down as a result of competition from chain stores and mail-order operations, 38 percent of pharmacists are over 55. Western states have the greatest shortage of pharmacists. In 2009, for example, seven Colorado counties had no pharmacies, and 10 counties had only one each.

3. WORKFORCE COMPOSITION

Traditionally, pharmacists were predominantly white males, but in recent years, the percentage of female pharmacists has increased markedly. According to the U.S. Health Resources and Service Administration (HRSA), in 2008, half of all active pharmacists were women. At the University of Colorado Pharmacy School, for example, 62 percent of students were female in 2008. Women pharmacists are more likely to work part-time. They are more satisfied with their jobs and expect to work longer than men.

Lack of racial and ethnic diversity has become an issue in the pharmacy profession. For example, only 14 percent of students at the Colorado pharmacy school were minority members in 2008, and even fewer minority pharmacists—8 percent—were practicing in Colorado in 2005. HRSA pointed out in 2008: “In the 2000 Census, 25 percent of the population indicated they are in a racial minority group, while only 18 percent of self-identified pharmacists indicated they are in a racial minority group.” As a result, many pharmacy schools have established diversity programs to attract minority applicants, and the federal government provides financial aid to disadvantaged and minority students in pharmacy and other healthcare education programs. Refugees may be eligible for such aid if they are legal permanent residents.

Salaries of pharmacists are very good, ranging from $77,000 to $131,000 per year. Pharmacy technicians earn from $9 to $19 per hour, with
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opportunities for refugee pharmacists

certified and union-affiliated technicians likely to earn higher wages. Pharmacists who work at HMOs report the highest level of job satisfaction in the Colorado study.

4. THE FUTURE OF THE PHARMACY PROFESSION

In the coming years, “expenditures for prescription drugs and the annual number of prescriptions filled will continue to rise exponentially, adding to the need for increased pharmaceutical access and care,” a 2007 Maryland study found. Also in Maryland, 4,000 to 4,500 pharmacists are expected to retire yearly by 2020.

According to HRSA, other determinants of future demand for pharmacists include “population growth, especially growth of the elderly population; increased need for pharmacists to counsel and educate patients as drugs become more complex and a growing portion of the population receives care for chronic conditions; increased use of pharmacy technicians and technology that can improve productivity, dampening the growth in demand for pharmacists.”

Even so, employment prospects are very good for pharmacists. The BLS expects the profession to grow by 17 percent between 2008 and 2018. In Colorado, demand for pharmacists is expected to increase by 27 percent, and 1,173 pharmacists will be needed to replace retiring practitioners in that state.

Employment of pharmacy technicians will grow even more: 31 percent by 2018. As increasing numbers of older people and expanding prescription-drug coverage spur demand for prescription services, technicians’ duties are likely to expand, to include administrative and sales tasks currently carried out by aides. As a result, the number of pharmacy aide positions is expected to decline.

![Distribution of Fulltime Pharmacists by Dispensing Setting: 2004](image)

Source: US HRSA 2008
5. SKILLS, TRAINING, CREDENTIALS

According to the BLS, pharmacists “should have scientific aptitude, good interpersonal skills and a desire to help others. They also must be conscientious and pay close attention to detail, because the decisions they make affect human lives.” For pharmacy technicians, “strong customer service skills also are important.”

Pharmacists now must have a PharmD or equivalent degree from an accredited school or college. For admission to a PharmD program, applicants must have at least two years of college, including courses in mathematics and natural sciences as well as humanities and social sciences. The PharmD curriculum includes pharmaceutical chemistry, pharmacognosy, pharmacology, business management, pharmacy practice and clinical rotation. After graduation, some PharmDs serve a one- or two-year residency to prepare for work in transplant units, hospital emergency departments, oncological services and other specialties. Others take up research fellowships.

All states require pharmacists to be licensed. Their PharmD degree must come from a college approved by the Accreditation Council for Pharmacy Education. They must take the North American Pharmacist Licensure Examination (NAPLEX). Forty-four states and the District of Columbia also require them to take the Multistate Pharmacy Jurisprudence Examination (MPJE). The National Association of Boards of Pharmacy (NABP) administers both of these exams. Some states give their own licensing exams.

Foreign pharmacy graduates (FPGs) must fulfill extra requirements to practice in the United States. They must obtain certification of their credentials from the Foreign Pharmacy Graduate Examination Committee (FPGEC) and pass the Foreign Pharmacy Graduate Equivalency Examination, TOEFL and the Test of Spoken English (TSE) or the TOEFL Internet-based Test (i.BT), as well as NAPLEX and MPJE. In addition, they must meet practical experience requirements. FPGEC warns applicants, “Because the licensure requirements vary from state to state, you are advised to directly contact the board(s) of pharmacy of the state(s) in which you desire licensing.” Application to the FPGEC for certification costs $800 and includes the examination fee. FPGs must also submit their credentials to the Educational Credential Evaluators (ECE), a private evaluation service. FPGs who cannot furnish their original credentials may present notarized photocopies. See the FPGEC’s pages on the National Association of Boards of Pharmacy Web site, www.nabp.org, for more information.

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There is no standard training for pharmacy technicians. Usually, they must have a high-school diploma, and many learn their duties on the job. With competition increasing for these jobs, employers may prefer to hire those who have gone through a training program offered by a community college, vocational school, hospital or the military. These programs usually last from six months to two years and include classroom and laboratory instruction. Some programs arrange internships for students. Graduates receive a diploma, certificate or associate degree. The National Pharmacy Technician Association offers an online certificate program that cost $1,895 in 2009. According to the BLS, pharmacy technicians must register with the state board of pharmacy in most states. Voluntary certification is obtainable from the Pharmacy Technician Certification Board and the Institute for Certification of Pharmacy Technicians, which administer national examinations. Some states and employers require employees to obtain such certification, which is transferrable from state to state. Technicians must be recertified every two years and take 20 hours of continuing education within that period.
6. HOW TO FIND A PHARMACY POSITION

- **Networking.** Potential healthcare employers may be inaccessible or constrained by strict qualification criteria. As a result, networking is essential for successful job hunting in the healthcare professions, including pharmacy. Job seekers must “sell” their qualifications, experience and talents, not only to human resource personnel but also to intermediaries and mentors who can advise and inform them about job opportunities. Initiative, persistence and skillful self-presentation are important qualities for job seekers in all professions.

- **Self-Presentation.** American cultural norms for self-presentation may be very different from those in the refugee’s home country. Mock interviews and exercises in meeting and greeting should be helpful to the refugee job seeker. Mentors can also give good counsel and feedback.

- **Résumés/CVs.** Résumés should be tailored to demonstrate specific accomplishments in the field as well as certificates and degrees. The job seeker should be prepared to present a résumé at job fairs and networking events and to consult it during telephone screening interviews.

- **Training.** No matter what experience a pharmacist may already have, professional education is a good long-term investment and provides an opportunity to update knowledge and improve vocational language skills.

- **Postsecondary Employment.** An administrative or support position at a university or teaching hospital may include free courses, since many offer tuition benefits to employees. University employment also provides opportunities to interact with potential colleagues, mentors and employers. Pharmacists who come to the United States with an interest in research may want to investigate pre- or post-doctoral fellowships at universities and research institutes. These positions are temporary and may pay less than work for a private employer, but they do provide a living wage, opportunities to do advanced research and relevant professional experience.

- **Growth Areas.** Job opportunities for pharmacists and pharmacy technicians are likely to be greatest in the western states and rural areas, where shortages are most serious and the elderly population is growing.

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Career laddering is a feasible way for refugee pharmacists to progress toward professional recertification. A position as a pharmacy technician, pharmacy aide, medical interpreter or volunteer at a medical facility can provide the opportunity to work in a professional environment, interact with potential employers, colleagues and mentors and learn American healthcare culture. Many of these positions are part-time, free lance or on-call.

Although some refugee pharmacists may be willing to work as pharmacy aides to gain entry and experience in the U.S. healthcare field, it is important for job developers to help them advance beyond these jobs, so that their valuable skills and advanced training will not be wasted.

Many educational institutions welcome foreign-trained pharmacists to retrain as pharmacy technicians. For example, Northern Virginia Community College’s Medical Education Campus offers a 10-week pharmacy technician course that includes laboratory and clinical work. Students prepare for the National Pharmacy Technician Examination and a state examination. Graduates who find employment at a nearby hospital may become eligible for financial aid to continue their education.

Veterans Administration hospitals usually hire only U.S. citizens, but “noncitizens may be hired on a
They must be proficient in English, have graduated from a pharmacy program recognized by the Accreditation Council for Pharmacy Education and have a license from any U.S. state or territory. VA hiring decisions are made locally.

Initiatives in other countries to help refugee pharmacists could serve as models for refugees and service providers in the United States. For example, the Islington Refugee Integration Service in London, England, provides career guidance to refugee pharmacists, physicians, nurses, dentists and other healthcare professionals through the Refugee Assessment and Guidance Unit (RAGU) of London Metropolitan University. RAGU offers career advice; skills assessment; job search training; referrals to professional training, ESL courses, employers and advisers; and work placements for career changers.  

7. NOTES

1 Colorado Health Institute 2009: 3.
3 Statistics in this paragraph come from Colorado Health Institute 2009.
5 Ibid.
6 U.S. Health Resources and Service Administration 2008.
7 Data in this paragraph come from Colorado Health Institute 2009.
9 U.S. Health Resources and Service Administration 2008.
10 Colorado Health Institute 2009.
8. SOURCES


U.S. Department of Veterans Affairs. N.d. “Pharmacists” [brochure].


9. LINKS

American Association of Colleges of Pharmacy. www.aacp.org
American Pharmacists Association. www.pharmacist.com
Foreign Pharmacy Graduate Examination Committee. www.nabp.net
Institute for Certification of Pharmacy Technicians. www.nationaltechexam.org
National Association of Boards of Pharmacy. www.nabp.net
National Pharmacy Technician Association. www.pharmacytechnician.org
Pharmacy Technician Certification Board. www.ptcb.org

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