

IAPSM Declaration 2018: Definition, Role, Scope of Community Medicine and Functions of Community Medicine Specialists

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PREFACE

With changing global and health environment, discipline of Community Medicine (CM) needs to be made more relevant to India's need. This declaration is prepared to provide much-needed direction to the discipline and aims at strengthening the teaching of CM by creating better understanding of the discipline, its roles, scope, and functions of CM specialist; to the undergraduate and postgraduate students as well as the faculty of CM. It also aims to build the capacity of the CM department of medical colleges. This declaration is first in the series of activities planned by the Indian Association of Preventive and Social Medicine (IAPSM) core committee in this direction.

The declaration was drafted through a consultative process facilitated by the IAPSM secretariat through sharing available literature and holding multiple electronic consultations with members and experts. This draft declaration was further discussed in a special session, on March 10th, 2018, at the 45th National Conference of IAPSM held at Smt. Kashibai Navale Medical College, Pune. The final declaration took into account the inputs received from members during the aforementioned conference. A separate document with detailed explanation on each point is also being prepared for the greater understanding and clarity.

INDIAN ASSOCIATION OF PREVENTIVE AND SOCIAL MEDICINE DECLARATION 2018

1. IAPSM recognizes Community Medicine as a specialist branch of medical science and defines it as “a science and art of promoting health, preventing diseases and prolonging life by range of interventions (promotive,

preventive, curative, rehabilitative and palliative) in close partnership or association with health care delivery system and with active community participation and inter-sectoral coordination.” Community Medicine

- focuses on determinants of health, local health issues, community-oriented primary health care, and organization of health care services to attain optimal quality of health
2. The practice of Community Medicine requires a multidisciplinary approach. The core subjects in Community Medicine are epidemiology, basic clinical sciences, and health-care delivery system including primary health care. Biostatistics, public health nutrition, social, behavioral, environmental, and management sciences are other critical allied sciences. These sciences could be applied to any setting – be it a community, a workplace, an organization or a country
3. The primary role of a specialist in Community Medicine is to be a health consultant, health manager or leader of health care delivery system, voluntary agencies or developmental agencies at local, state, national, and international level
4. The key functions of a Community Medicine Specialist include:
 - a. Identify and prioritize health needs of the defined community

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- b. Identify the (direct and indirect) determinants influencing health and diseases
 - c. Prioritize and undertake interventions to address the health needs and health determinants of the defined community
 - d. Plan and organize health-care delivery services to address health needs through community mobilization to achieve community empowerment
 - e. Lead the health team and provide community-oriented primary health care
 - f. Advocate for equitable, quality, accessible, cost-effective and appropriate health care services, as the basis for achieving Universal Health Coverage (UHC)
 - g. Conduct health system research to evaluate health-care services and recommend measures to improve their effectiveness and efficiencies
 - h. Understand the role of other sectors which influence health and work with them to improve health status of community.
5. For effective training in Community Medicine, every department should have an Urban and a Rural Health Training Center; where the undergraduates and postgraduates get an opportunity to learn and practice the discipline. Wherever possible, departments should aim to establish model health care delivery system at primary care level
 6. Training in Community Medicine should be community-based and in close association with local health systems to enable understanding of community health issues and acquisition of skills to manage the same. Postgraduate training shall include working at different levels of health system from primary care to district level and above
 7. Specialists in Community Medicine shall play key role in Indian Public Health Cadre. IAPSM strongly supports the concept of UHC. It believes that to achieve UHC in India, a post of Community Medicine specialist should be created at every Community Health Center (CHC), alongside other specialists. At CHCs, Community Medicine specialist would be responsible for mentoring and monitoring the health-care services being delivered to the community and ensuring effective referral linkages between primary, secondary, and tertiary care centers.

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Conflicts of interest

There are no conflicts of interest.