

# The Family Medicine Specialty, Learning from Experience

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### ABSTRACT

Family medicine has been accepted as a model for Iranian health-care reform, but many debates have been raised since its establishment. Despite many successes achieved, this area of medicine is very challengeable. Family practice as a specialty is an innovation that has been introduced by the ministry of health and medical education in Iran. Although this approach seems sophisticated, learning from experience is the first step to avoid difficulties that may occur from this selection. Our goal is to declare strengths, weaknesses, opportunities, and threats of family medicine specialty.

**Keywords:** Education, family medicine, family practice, Iranian health-care system

### Introduction

A family practitioner is ‘mainly responsible for providing comprehensive and continuing care to every individual seeking medical care irrespective of age, sex, and illness’.<sup>[1]</sup> As a whole, patient-centered teamwork, elimination of barriers for receiving health care, developing health information system, and focus on improving the quality of health care and its financing are the main principles of family practice.<sup>[2]</sup> These features have made family practice a respectable choice for health reform.<sup>[3]</sup> Improving the efficiency of the health system and social justice in countries that have accepted family practice<sup>[4]</sup> makes this selection a notable choice. Therefore, the country has settled family physicians and referral system in urban areas three decades after the Islamic revolution.<sup>[5]</sup> Although the experience of the family practice in the cities is new, this project has been launched in rural areas many years ago. Despite the shortages and problems experienced by rural family physicians,<sup>[6]</sup> this plan achieved great success.<sup>[7,8]</sup> The increasing number of family physicians, in Iran, has caused debate over specialized family practice. However, the first steps in the developing residency program have been taken since 2005.<sup>[9]</sup> However, carrying out educational programs for empowerment of family physicians has recently brought about new discussions on developing curriculum for family physicians residency, and the positions will be occupied by these new specialists. Despite the remarkable recommendation from LeBaron and Schultz,<sup>[9]</sup> situation analysis based on the experience of other countries will

be necessary and helpful. Because, ignoring the lessons by others waste human and financial resources.

### Strengths of family practice

Diversity in practice, having deep and mutual interactions between patients and physicians inspired by the biopsychosocial model of medicine, balancing life and work, and being their own boss are strengths of family medicine.<sup>[10]</sup>

### Weaknesses of family practice

Lack of curriculum for the undergraduate, and poor residency programs for the postgraduate are two major weaknesses in family medicine discipline in many countries.<sup>[2]</sup> However, the curriculums developed for family medicine residency are unsuitable. For example, they emphasize on hospital-based education that estranges learners from their actual workplace and community where they will practice later.<sup>[11]</sup> It must be considered that there is no defined position for family physicians as a specialist,<sup>[10]</sup> and the absence of powerful academic wards in comparison with other specialties in educational hospitals<sup>[12]</sup> worsens this situation. Meanwhile, family physicians do not have the competencies like other specialists; they can exactly apply few procedures in their practices and this gives them less money and fewer opportunities that affect their job satisfaction.<sup>[10]</sup> Compared with other medicine territories, family practice researches are few not only in health systems, but also in clinical practices. Hence, decision making and planning are difficult for individuals working in this field.<sup>[13,14]</sup> Besides, the nature of family practice causes limited choices for workplaces.

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This matter can disturb acceptable lifestyle for many family physicians.<sup>[10]</sup>

### Opportunities for family practice

The need to reform the demand for cost-effective approach to the continuum of the care, necessity to spend more time for counseling and preventive care are considered as opportunities for family medicine.<sup>[15]</sup> The countries which have systematically established programs of primary health care educations for medical students have better prospective for accepting and developing family medicine.<sup>[12]</sup> Finally, enthusiasm of policy makers is a great opportunity for the development of family medicine and establishment of positions for family physicians.<sup>[12]</sup>

### Threats for family practice

Other specialists do not believe in family medicine as the independent field of practice, and in the worst case, they consider it as an unreal thing.<sup>[16]</sup> Some of authors determine the professional field of family medicine is ambiguous.<sup>[17]</sup> Loosely managed care system that allows clients to be unrestricted in getting health services causes individuals not to see any necessity for family medicine as a gatekeeper. This is a major threat for family medicine especially in financial aspects.<sup>[10,16]</sup> One of the most important parts of family medicine is teamwork. Lack of health-care workers in many countries is a key problem for family practice.<sup>[12]</sup> Meanwhile, the absence of health information systems, that is critical in family practice, is an important barrier for family medicine.<sup>[2]</sup> Because of the limited number of family physicians employed in academic positions, other practitioners have been responsible for family medicine education. And this mismatch makes curriculum development unsuitable for family practice.<sup>[2]</sup> However, we must remember that developing curriculum for family medicine is difficult and any violation of the core content of this field can cause debilitating and dependency for family physicians and their clients, respectively.<sup>[11]</sup> Finally the absence of a powerful stewardship is a serious threat for family medicine in many countries.<sup>[18]</sup>

### Conclusion

Every country experiences special condition in health policy because of its economic, social, and cultural conditions. But it seems that challenges such as other specialists' opinions, lack of defined positions in academic wards, and inability in health market competitions are distinguished issues for family medicine specialists. Nevertheless, the efficient approach of the family practice shows remarkable role of family medicine specialists for the health system.

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