

## Do FPs agree on what professionalism is?

YES

Michael Yeo PhD

The concept of professionalism has certainly come into vogue in medicine in recent years. Discussion has mushroomed in the academic literature. Much of this burgeoning literature considers medical professionalism to be threatened; it interprets the threats and proposes remedies to address them.<sup>1-6</sup> Scholarly articles and studies about how to teach and evaluate professionalism—and how to articulate reasonable expectations of physicians in terms of measurable competencies and behaviour associated with professionalism—proliferate.<sup>2,3,7</sup>

The topic is not just academic. Professional medical organizations, responding to the perception that professionalism is under threat and that public confidence in the profession is at risk, have hurried to address the topic. Thus, various medical associations have given professionalism prominence in policy statements and discussion papers, and accreditation bodies and medical schools have initiated measures to ensure that it is adequately incorporated into curricula.<sup>8-10</sup>

Notwithstanding all of this activity surrounding the topic, it is reasonable to ask whether there is general agreement about what professionalism is, particularly in view of the diverse range of statements about it that can be found in the literature and among various policy statements. I shall answer this question with a qualified yes.

### A strong foundation

Certainly, there is a remarkable consistency among the explanations of medical professionalism in the literature. A *medical professional* is someone with esoteric competencies in and knowledge of medicine who commits to putting these to work primarily for the benefit of patients and communities, in keeping with the moral norms of the medical profession.<sup>1,6</sup> At least, this is what medical professionals more or less explicitly “profess” and what regulatory bodies at least implicitly assure the public in granting physicians licence to practise. However, as it is understood, *professionalism* is an ideal, and physicians

vary as to how well they approximate or fall short of this ideal. A good physician is exemplary in relation to this ideal.

This professional ideal is essentially bound to moral norms, whether they be expressed in terms of values, virtues, or principles.<sup>1,2,5,6</sup> These are professed with quite remarkable consistency by the profession in its codes of ethics and in various policy and regulatory pronouncements, and include respect for the patient’s dignity, privacy, and autonomy; concern for the promotion of the good of the patient (in some cases even to the point of willingness to subordinate one’s own interests to the service of the patient and the community); trustworthiness in holding information confidential; nondiscrimination; honesty; and compassion.

### Variations on a common theme

To be sure, these moral norms are quite general and open to interpretation and debate. And norms sometimes conflict in particular circumstances. Therefore, there is bound to be disagreement about specific questions. What course of action is most conducive to the patient’s wishes in a given circumstance? How should respect for the patient’s wishes be reconciled with the physician’s duty to promote the patient’s well-being in circumstances when these are in conflict? To what extent should physicians be prepared to subordinate their own interests in the service of their patients or their communities? Answers to such specific questions require professional judgment. Physicians sometimes disagree even about the technical or scientific components of medical practice; it is only to be expected that they would sometimes disagree about the moral aspect of being a professional or a good physician, a dimension that transcends the boundaries of scientific or technical rationale.

A measure of independence and autonomy in clinical judgment is generally thought to be an essential and defining feature of professional life in medicine. Concerning the moral dimension of professional life especially, reasonable people can sometimes arrive at

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different moral conclusions. The medical profession must leave norms ambiguous enough to allow for both reasonable differences of opinion and individual judgment in clinical circumstances, while being clear and decisive about what is unacceptable under virtually any circumstance—there is a fine line that a physician must walk.

In addition to being subject to interpretation and debate among contemporaries, the moral norms of which the professional ideal is composed will change from time to time. This is only fitting, as a profession is a living tradition. The professional ideal allows, and even requires, that each generation assume the freedom and responsibility to reinvent itself in light of changing circumstances and to modify its heritage accordingly, even while respecting and keeping faith with its heritage. Although it is possible that the so-called generation gap discussed in the literature is currently so wide that this heritage of professionalism is threatened in some core way, a generational gap of some measure is always to be expected of a living tradition.

## Bottom line

I submit that this account of professionalism gives expression to what FPs already know at some level, and that they would agree to it as explained. I also submit there would be considerable agreement among FPs about how to recognize a physician who exemplifies the professional ideal, just as there would be agreement about how to recognize a good physician. Of course, this is not to say that FPs would agree on what the professional ideal would comprise in the particular circumstances of a hard case. And it is certainly not to say that FPs would agree on detailed lists breaking professionalism down into very specific and measurable skills and competencies. Professionalism has more to do with the art than the science of medicine—it might be that there is something wrong-headed and even antithetical to the professional ideal in carving it up in this way.<sup>2</sup>

In the absence of a formal study that could validate or invalidate any of the claims I have made, I invite readers to decide for themselves whether they are true according to their own self-understanding and their experiences in the profession. 

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### Competing interests

None declared

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## CLOSING ARGUMENTS

- Professionalism is in vogue today, as evidenced by the proliferation of discussion in the academic literature and in policy and guidance issued by various medical organizations.
- There is general agreement in the literature that, essentially, to be a medical professional is to profess competence in medicine and to use it primarily for the benefit of patients and communities.
- Although there has been no formal study of whether FPs agree on what professionalism is, there is reason to suppose that they agree on the general concept as it is generally elaborated in the literature and on the moral norms associated with the professional ideal.
- Family physicians might disagree about particular applications of the moral norms that make up the professional ideal, but such disagreement is perfectly compatible with the idea of professional judgment and is indeed a part of it.

