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President's Message

Family doctors under siege

Throughout this year as President of our College, I have traveled across Canada and met a great many of you. I have spent time in airports and taxis and have decided there is a universal truth—taxi drivers have opinions, and they do not mind sharing them.

Taxi drivers tell me they love their family doctors. They sometimes have stories of life-saving events, but mostly they tell of kind, compassionate physicians who make a fundamental difference in their and their families' lives. Then they break into a barrage of complaints and frustrations about the system in general.

One said, "My doctor retired 4 years ago and I haven't been able to find another one since." Another complained: "Why do I have to wait weeks for an appointment and then wait over an hour to find out my tests are OK?"

Repeated public surveys confirm that Canadians hold their family doctors in high regard. In an October 2003 Decima poll, more than two thirds of Canadians identified their family doctors as the most important people in the health care system for them and their families, and more than 90% of these reported the quality of care as good to excellent. Patients want to have their own personal doctors—doctors who know their history and know them and their families. They prefer visiting their family doctors to going to emergency rooms. They value the close relationships they develop and the coordinated access to services.

So why do family doctors in Canada feel under siege? When support from our patients is at an all-time high, we feel beleaguered. A full 86% of us think our working conditions are worsening. According to a December 2003 Maclean's survey, 80% of Canadian family physicians say their job satisfaction has lessened over the past decade, and a third would not choose a career in medicine if they had it to do over again. Despite this, 75% of physicians insist it is not the work, but the workplace.

Unfortunately, our young people hear and see our dilemma. Over the past 10 years, family medicine as a

career choice has become less attractive to students. A profession is in trouble when its work force is shrinking while demand for services remains strong.

Among other things, medical students see the lack of value ascribed to family medicine by the system itself. We recognize that family medicine's image must be enhanced so that it once again becomes an attractive career choice. Sufficient funding and other supports for university departments and teachers involved in educating physicians must be found, and admission policies and the role of family medicine education in undergraduate curriculums need to be revised.

Healthy and supportive practice environments are crucial to sustaining our discipline. New models of care supported by integrated interdisciplinary teams and information technology are important. Addressing fee inequities is essential. We need opportunities for continuing professional development and enhanced skills training and for holidays and personal time.

But these solutions are merely the "means." Real solutions, the "ends" to which we aspire, are more likely to be realized through building on our greatest strengths, our relationships with our patients, and the personalized, comprehensive, continuous care we provide.

A strategic priority of the College of Family Physicians of Canada (CFPC) is to enhance the image of family medicine and to create an organized response to the need for improved access to care. Through summits, forums, and working groups, the CFPC and its provincial chapters have actively engaged practitioners, leaders, and key informants to explore the issues. Federal, provincial, and territorial governments are also actively participating in these discussions. The CFPC is synthesizing the outcome of these discussions into a position paper and several initiatives addressing many issues that will influence the future of family medicine in Canada. Soon to be released, this position paper will, we hope, serve to move many of these initiatives forward.

