

Forever young

Cal Gutkin MD CCFP(EM) FCFP, EXECUTIVE DIRECTOR AND CHIEF EXECUTIVE OFFICER

We cannot always build the future for our youth, but we can build our youth for the future.

Franklin D. Roosevelt

othing is more beneficial to an individual or organization than staying young while growing old.

Twice a year the College's Sections of Medical Students and Residents meet to hold their board meetings and leadership development sessions. For those fortunate enough to be welcomed into their midst, these are inspirational times that keep us focused on the future of family medicine. More important, these are the people for whom and with whom we must build that future.

These gatherings usually leave me wondering why we are so concerned about the future of family medicine. Our family doctors of tomorrow are dedicated to serving Canadians with a combination of skill and compassion, which everyone hopes to find in a personal family physician and which will be essential for the leadership of our discipline and College. They love what they are doing today and are optimistic about what lies ahead. Their current priority is to complete medical school and family medicine residency. Some might do further training to enhance skills to address the needs of defined populations; others might explore temporary practice experiences to continue learning and to get a taste of what life might be like in one of these locations. Many are ready to settle into practices in places where they have long dreamt of establishing their medical careers and personal lives. Some will provide a broad range of services; others will focus parts of their practices on specific interests or needs-many tell us that the chance to do this throughout their careers is an important reason they have selected a future in family medicine.

Historically, many new graduates took time before making practice commitments. In days gone by, new physicians were celebrated and supported as they began their practice journeys, whether they immediately committed to ongoing practice or pursued other goals early on. Experienced physicians recognized that new graduates rarely had all the skills needed for a career in medicine and they welcomed the opportunity to bring these new physicians into their practices where they could help consolidate competencies and build confidence.

The world into which new graduates now venture is not as accommodating. Today, a desperate need for doctors puts pressure on new physicians to commit to permanent practices immediately. They are expected to be finished

products carrying the complete doctor's bag of clinical skills and to have a level of medical maturity that used to take years in practice to achieve. Often they are recruited to provide services currently unavailable from the depleted ranks of the physician population. They frequently encounter criticism for limiting the hours they will work.

Although every doctor has a responsibility to share in the challenges of meeting the medical needs of our country, some of what we expect of new graduates is unfair. They should not have to bear the responsibility of filling all the gaps in a system left dramatically in need thanks to shortsighted planning over several decades.

Age is foolish and forgetful when it underestimates youth.

J.K. Rowling, Harry Potter and the Half-Blood Prince

Yet, many of our youthful colleagues are less disillusioned than their older peers. Most have carefully observed the playing field, assessed the effect it has had on their predecessors, and decided on a course of action. They are overwhelmingly satisfied with the knowledge and skills gained from their training and are confident they will be excellent doctors. They are fiercely committed to respecting and protecting their personal and family health—an important generational difference. Unlike older "role models," men and women graduating today will not work 70 to 80 hours a week. They embrace the idea of multidisciplinary teams with an enthusiasm that is harder to find among those more experienced. They are excited about achieving Certification and look forward to meeting their commitments to lifelong learning and maintenance of certification programs. They applaud the recognition of family medicine as a specialty alongside the disciplines of the Royal College—a move they helped bring to fruition.

Many recent policies approved by our board, including those related to family medicine as a specialty, added-skills practices, team approaches, electronic medical records, and new payment strategies, have been generated by our young physicians. Their progressive strategic thinking, mixed with hopes and dreams unencumbered by the sometimes false security of tradition, has had an effect.

Each year, Family Medicine Forum welcomes hundreds of students and residents. "Veterans" tell us they enjoy the interaction—that it rekindles their own joy in being family doctors. We are their teachers, mentors, and role models but we gain as much from them as they do from us.

In youth we learn; in age we understand.

Marie Ebner von Eschenbach

Cet article se trouve aussi en français à la page 655.