



Light in dark times

Rob Boulay MD CCFP

It's easy to make a buck. It's a lot harder to make a difference.

Tom Brokaw

Recent world events have once again reinforced my belief that we are indeed very fortunate. In March, we watched helplessly as friends, family, and colleagues in Japan were devastated by earthquakes and tsunamis, and continue to watch the saga of a nuclear disaster unfold. Not so long ago, we witnessed the devastation in Haiti, in Australia, and again in New Zealand, as thousands of lives were lost to natural disasters. And we continue to see the horrible images of war emerging from Libya and Afghanistan. I must admit that these global events make me wonder what I can do.

In harm's way

I am buoyed, however, when I hear stories of Canadian physicians who put themselves in harm's way to try and provide at least some small measure of comfort and relief to victims of these occurrences. Many members of our College, through their involvement in the Canadian Forces and through volunteer work with various aid organizations, are working at this very moment under less-than-ideal circumstances to care for the sick and injured in all corners of the world. How proud I am to be President of the College to which these family physicians belong. The College of Family Physicians of Canada (CFPC) must strive to support its members as they use their training and compassion to ease suffering, save lives, and provide hope in dark corners of our planet where hope is often in short supply. The Global Health Committee of our College is attempting to do this very thing—look at ways that we can help Canadian family doctors reach out and touch the lives of patients all over the world.

At the coal face

We must also remember the vital work that family

physicians undertake right here, on our own native soil, to care for members of our own society who are in need. From the busiest of our large cities to the most far-flung reaches of Canada's northern climes, special populations exist, each with their own specific health care needs and cultural sensitivities. One of my most honoured privileges this year is having the opportunity to speak to and interact with physicians who work "at the coal face," with Canadians from all walks of life—from our small, rural, and isolated communities to our massive suburbs and inner cities. The powerful stories these doctors can tell about life and death in Canada have also given me much pause for reflection. The CFPC, through its various committees, has also been able to support these individuals as they try to make a difference in their communities. Recent efforts have been made by several CFPC committees to increase the involvement of family physicians in Nunavut, the Northwest Territories, and Yukon; it had always seemed unfortunate to me that the very physicians who were working under some of the most challenging Canadian conditions were not formally recognized in our College structure. Facilitating their participation is a good step forward in making sure that the health care needs of our northern populations remain constantly on our radar; furthermore, the enhanced funding of residency positions in remote areas should serve to enhance the recruitment and retention efforts that have for so long been a challenge in these areas.

I'm not so sure that I agree with Tom Brokaw—sometimes it can be darned hard to make a buck. But with the right kinds of funding and support, it might not be so difficult to make a difference in communities, both here in Canada and around the world. So long as we keep our patients in mind as we move forward and grow as an organization, and encourage everyone else to do the same, our members will no doubt keep improving the health of individuals, families, and entire populations everywhere. ❁

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