



Building a family medicine movement

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Dear Colleagues,

At the CFPC's 2022 Leaders Forum, a gathering of elected leaders and staff from the CFPC and its Chapters, Dr Danielle Martin shared her thoughts on *building forward*, a theme of the May meeting. Dr Martin, keynote speaker and Chair of the Department of Family and Community Medicine at the University of Toronto in Ontario, amplified the idea of creating a movement in family medicine (FM). She reminded participants that such exploration requires us to consider thoughtfully who we are and who our allies are. She also stated that *why* is the first question to ponder, one whose answer is unequivocal in FM: "Primary health care is where the battle for human health is won or lost." The evidence is solid: we know that countries with robust primary care systems and family physician leadership have better population outcomes, and their citizens fare better in quality of life and longevity. Dr Martin urged us to work toward translating our values into motivation and to build intentional relationships to spark action.

I have been part of several small movements during my career. Some were disruptive in terms of using negation to achieve a goal. Others were moderate; that is, they were not formal movements, yet those involved knew something transformative was happening. This was the case for me in the early 1980s; I had chosen to do a 2-year FM residency instead of the traditional 1-year internship. There was a soft but palpable renewed interest in FM, there were great rotations in the various general specialty services and in FM, and we had educational experiences geared to our work in comprehensive primary care. We enjoyed consultative support from colleagues in other specialties, which allowed us to embrace our skills and ensure continuity in care. All successful movements I have been part of have had 3 common traits: they built upon a commonality of purpose, fostered relationships based on shared values, and were visibly supported by citizens or patients.

The literature on this topic indicates successful movements tend to have at least 5 strategies in common¹:

Ensure your purpose is clear. This is about the *why*, and for FM, it really is as Dr Martin described. Trying to get decision makers to understand the unique value proposition of family doctors in the implementation of comprehensive primary care has been an enduring challenge.

Focus on values, not catchphrases. Continuity, comprehensiveness, and patient centredness are key FM values, and they continue to be essential drivers of our work in family practice. Respondents to our January 2022 membership survey reiterated this.

Build on the strengths of small groups. During her address, Dr Martin spoke of the *snowflake model*; in it, successful mobilization happens when small groups connect and those in initial nodes in turn connect with other small groups. We have seen this recently in joint advocacy efforts from the Ontario College of Family Physicians and the Ontario Medical Association and from the British Columbia College of Family Physicians and Doctors of BC. Capacity building in small groups can eventually mobilize large crowds.

Overcome resistance to change. For a movement to be successful, participants must positively influence outsiders.² For FM, this includes, at a minimum, other specialist colleagues and specialty societies at the national, provincial, and territorial levels. This also affects our patients directly. I suggest we renew our efforts to listen to them and involve them.

Use engagement to drive success. Those involved in creating successful movements know the importance of having many sustained personal interactions and the need for face-to-face engagement. In the best of all possible worlds, all parties involved can claim success as their own because of meaningful engagement.

We are living with an unprecedented level of disruption, and FM is at an inflection point. Movements are all about narratives and relationships,³ which are 2 key elements of FM. Let us create and sustain a movement in FM, and let us restore faith and optimism in what remains an incredible opportunity to make a difference in the lives of our patients and communities. 🌱

References

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3. *Marshall Ganz' Framework: people, power and change*. Merrifield, VA: Women in Conservation Leadership; 2018. Available from: <https://wcl.nwf.org/wp-content/uploads/2018/09/Marshall-Ganz-People-Power-and-Change.pdf>. Accessed 2022 Jun 20.

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Cet article se trouve aussi en français à la page 553.