



Collective effort: our key to success

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[doubt] things would be worse for us nationally as [family physicians if] the CFPC did not exist. I would love any concrete examples of what [the] CFPC has accomplished.”

These words, from a member early in practice, gave me pause. After all, I have taken a different path but have been a long-time supporter of the College. Even as my career focus shifted from family medicine to public health, I continued to pay my dues in full, volunteer as an examiner, apply for grants from the Foundation for Advancing Family Medicine, and contribute to *Canadian Family Physician* and Family Medicine Forum where I could.

I decided to look to the past to glean how we have arrived at the present. I turned to David Woods’ informal history of the College,¹ which chronicles the problems and solutions the CFPC tackled in the first 25 years after its founding in 1954, when it operated out of a basement on St George Street in downtown Toronto, Ont.

At that time there were concerns about medical students being increasingly pushed toward joining the ranks of other specialties and a need for resources to support the maintenance of competence over time. Variability in training and standards complicated efforts to define the practice of family medicine, which, coupled with a lack of data and research, made it difficult for family doctors to fight for better practice conditions.

Some of these issues may seem familiar, but Woods’ book clearly outlines the vital efforts of the College’s predecessors to address and advance our work on these challenges. There no longer remains an absence of a national organization dedicated exclusively to the interests of family doctors. The existence of the College today addresses what was then a serious detriment to the field.

One of the College’s first priorities was to define the discipline of family medicine to determine what support, resources, and policies were needed. That early definition emphasized standards in training and certification, which were used in partnership with faculties of medicine and universities to establish credentials, departments of family medicine, and residency programs. The definition also underlined critical linkages between the work of family doctors in the community and in local hospitals.

Generation and dissemination of knowledge then followed, not only in the form of maintenance of

certification and continuing professional development requirements, but also in the conduct of research specific to family medicine by family doctors, circulated by a dedicated journal and at scientific meetings. An awards and grants program brought recognition to the vital contributions of peers, which further elevated the stature of family medicine.

Then, layered upon the foundation of standards, knowledge, and recognition, came advocacy—work that helped society at large appreciate that primary care, led by family doctors, is the strong base of the health care system in Canada. In the mid-70s, evidence and data engaged by the College emerged to support advocacy for advancing alternative payment mechanisms that would reward the provision of comprehensive and continuing care.¹

These are clear, concrete examples of pillars of practice, created and fostered by the College, that benefit the field of family medicine today. But the College continues to grow and evolve alongside the practice of family medicine itself, and our collective endeavour continues.

Dr Murray R. Stalker, the CFPC’s first president, noted in his inaugural address that the College would one day stand shoulder to shoulder with its specialist counterparts: “The great benefits derived from the Royal College of Physicians and Surgeons of Canada were not obtained in the first year. We envision a long-range program [and] have faith in the dignity and destiny of the general practitioner for the benefit of Canadian medicine and the Canadian people.”¹

Dr W. Victor Johnston, the College’s first executive director, explained it succinctly: “Organization for self-improvement and self-protection is not only desirable but is imperative.”¹

In my mind, one thing is crystal clear: the College is only as strong as all of us, and if it did not exist today, there would be an urgent need for us to come together to create it. While our challenges today differ from those in 1954, the answer, as it was at the beginning, is to bring our collective energy and effort under the College banner to advance family medicine today and beyond. 🌱

Reference

1. Woods D. *Strength in study. An informal history of the College of Family Physicians of Canada*. Mississauga, ON: College of Family Physicians of Canada; 1979.

Can Fam Physician 2023;69:218 (Eng), 217 (Fr). DOI: 10.46747/cfp.6903218

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