

Progress of Faculty Development in Family Practice

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Family practice is the most rapidly growing specialty in American medicine, with well over 5,000 residents currently in training and over three fourths of the nation's medical schools now involved in organized academic programs in this field. Public support and student interest in family practice remain at a high level as the specialty nears the close of its first decade of development. The remarkable progress which has been made to date has brought with it a new challenge—the development of faculty with the academic, teaching, and research skills required to assure the continued progress of family practice as a clinical specialty and of family medicine as its academic discipline.

The great majority of family practice faculty so far have been drawn from the ranks of practicing family physicians. This first generation of faculty have been well qualified by clinical experience and expertise for teaching, but have usually lacked

experience or formal training in teaching, research, and related academic areas. Without a previous tradition of teaching, research, and scholarship in academic medicine, family practice found itself with the need to develop its own traditions *de novo*.

Considerable progress is now being made in the important area of faculty development. The Society of Teachers of Family Medicine and the American Academy of Family Physicians have been active for years in conducting periodic workshops for family practice faculty at both undergraduate and graduate levels, with emphasis on teaching skills, curriculum development, and evaluation. The Bureau of Health Manpower supported four regional workshops during 1977 which were conducted at Duke University, the University of Iowa, Michigan State University, and the University of California at San Diego. The Bureau of Health Manpower is now initiating a

new grant cycle for faculty development awards, including the funding of traineeships from three months to one year for prospective full-time family practice faculty. The W. K. Kellogg Foundation last year funded two fellowship programs in the Departments of Family Medicine at the University of Western Ontario and at McGill University; the latter is described in this issue of *The Journal*.¹ The most recent initiative in faculty development in family practice is a national program of fellowships supported by the Robert Wood Johnson Foundation. Two-year fellowships will be initiated in July 1978 at the University of Iowa, the University of Utah, and the University of Washington, with two additional centers to be funded later this year. The goal of this fellowship program is to develop research and teaching skills of future full-time family practice faculty through study of such areas as administration, biostatistics, research methodology, quality of care assessment, and development and evaluation of educational programs.

All of these efforts are welcomed as the vital lifeblood of the developing specialty of family practice. Carefully planned programs and strategies for faculty development are important, and have often been neglected in medical education by falsely assuming that teaching and academic skills can be effectively developed in a "hit-or-miss" fashion without formal preparation.

Family practice now has the opportunity and responsibility to develop a new breed of academician-teacher-researcher uniquely qualified to meet the needs of the specialty. The challenge will be to integrate these skills into a community-based clinical specialty without fracturing academic pursuits from the needs of everyday practice in the "real world."

In a recent paper on developments in graduate medical education, Holden observed that family practice "has had an excellent beginning, and is expanding in terms of the numbers of physicians identified, and indeed certified, as family practitioners. The future will be determined by the academic stature of the specialty in university medical centers, and the professional satisfactions of daily practice."² Both of these predictions are on target, and both bear directly on the quality and vigor of current efforts towards faculty development in family practice, which likewise represent an excellent beginning.

References

1. Spitzer WO: A new advanced studies program for faculty development in primary care. *J Fam Pract* 6:1053, 1978
2. Holden WD: Developments in graduate medical education. In Purcell EF (ed): *Recent Trends in Medical Education*. New York, Josiah Macy, Jr. Foundation, 1976, p 256