

7. **Family Practice: Uniting Across Frontiers**

Rajakumar MK. Family practice: Uniting across frontiers. Singapore Family Physician. 1988;13(4):157-9

*Dr Rajakumar MK, President of WONCA
Keynote Address Regional Conference of WONCA, September 5-9, 1987, Hong Kong*

Guest of Honour, Hon. J. W. Chamber, Secretary for Health and Welfare, Dr Eddie Chan, Chairman of the Host Organising Committee, Dr Peter Lee, President of the Hong Kong College of General Practitioners, Presidents of Colleges of Malaysia, Singapore and Australia, Honoured Guests, Ladies and Gentlemen.

It is a great pleasure to come to Hong Kong to enjoy the legendary hospitality of our friends and colleagues here and it is a great honour to deliver the Opening Address to this distinguished assembly.

We are meeting in a most exciting part of the world. The Asia-Pacific Region is the home of ancient cultures which interacted for many hundreds of years and then lost contact. We are now rediscovering each other, paradoxically under the auspices of Western civilisation. This is my own region and you must pardon me if I take pride in showing it off to our guests.

In this region, we are living through a period of great optimism and tremendous self confidence. They say that the Asia Pacific Region will show the highest growth rates for the rest of the century and the 21st century will see the full bloom of a Pacific Basin community. We are the heirs of ancient civilisations that lapsed

into a stupor for a little over a century. We have woken up under the impact of Western technology. This meeting itself is one manifestation of the energy and vitality of this region.

This is the first international meeting of family physicians to be held in Hong Kong and is the largest and most representative meeting of family physicians of this region. It has also attracted family physicians from all over the world. I hope you will find it worthwhile to experience the diversity of our cultures and cuisines. The theme of this Conference, of crossing frontiers, reflects the universalistic outlook that comes naturally to the cosmopolitan city-state of Hong Kong.

As family physicians, we are highly conscious of cultural influences in the lives of the people we are caring for. The cultural values still cherished by our people may appear old fashioned. For example, personal relationships are very important and friendship is highly valued: 'Friendship before business' is almost an aphorism in our societies.

Age still attracts deference and our young people are taught to be respectful even when differing with an older person. Grandparents are honoured persons in a family and it is considered a privilege and a duty to look after them. Lucky children can turn to 3 sets of parents for love and guidance. Families bear the burden of the care of the chronically ill and the disabled as our social services are poorly funded. It is a moving experience to see how lovingly they are cared for at home on very meagre resources. Work is part of our culture and not working is considered shameful. So much so that often our problem as physicians is how to persuade sick people to stay off work to get some rest.

These are values that family physicians everywhere, across all frontiers, will recognise as values they themselves cherish. If they are being eroded in the West, amongst us too they are being undermined by the impact of urbanisation and industrialisation. You will be dismayed to hear that Westernisation is as yet more strongly represented, not by Shakespeare, Beethoven and the Sermon of the Mount, but the Beatles, Madonna and the Consumer Society. We need more than that. We need not only the benefits of modern technology but we must jointly work across frontiers to sustain and preserve the humane values upon which civilisation rests. The great problems we face today, of poverty, social inequity,

crime and the breakdown of families, transcend cultures and frontiers. We must find common purpose as human beings.

In a world of rapid change and social instability, the family physician represents enduring values and a commitment to compassion and caring. We are all here today because of this commitment.

Modern medicine has travelled beyond its Western frontiers to become part of our heritage. As with technology, we are assimilating modern medicine into our own way of life. The discovery of the new Family Practice has led us to share in the renaissance in General Practice, a renaissance that knows no frontiers. We owe to the British and Europe our pattern of healthcare delivery with the general practitioner providing continuing care and guiding the patient through the thicket of subspecialities. In recent decades, we have benefited from the powerful thrust in North American towards Family Practice. The new impulse has transformed our vision of general practice. Family Practice has emerged as a discipline calling for extensive postgraduate training and excellence in practice. We need highly trained and skilful family physicians to make full use of the potentials of modern medical knowledge and technology. We have a long way to go in this region to take full advantage of the potentialities of modern primary care. The colonial pattern of hospital building has persisted. There is a greater readiness to build hospitals than provide safe water and efficient sewage disposal, to start coronary care units than to prevent ischaemic heart disease from a family practice. Our policy makers still prefer to invest in high-cost episodic care in hospitals than in cost-efficient continuing care in general practices.

The new concepts we espouse place great stress on the preventive approach, on identifying for special attention persons at risk, on comprehensive care and not merely episodic care, on caring for the whole person and not merely providing medication, on the ambulatory care of the individual in preference to institutional care; at all times remaining the advocate of patient's best interests. We need all we can get to educate policy makers to inform the community of the need for Family Practice as the foundation of our health care system.

Our academic organisations also have the task of projecting these concerns to the community. Joined together in a world organisation, WONCA, we project to the community and to international organisations these caring values that are at

the heart of Family Practice. The vigour of the new general practice is manifested in the strength and growth of WONCA.

In the past year, WONCA has established formal relations with two international organisations, the WHO and the UNICEF. WHO is the organisation linking Ministry Health of our governments; with them, we are collaborating on development of medical classification systems, on organising quality assurance and audit programmes, and plan to assist medical schools in developing countries to start departments of Primary Care and Family Practice. The noble objective of the Alma Ata Declaration that transcends national frontiers to bring 'Health For All by the Year 2000' is difficult to achieve but as physicians we must see in this global endeavour an opportunity to demonstrate the necessity of primary care of excellence as the basis to Health For All. The representatives of WHO are with us today and we offer the joining of hands with the Family Physicians of the world to achieve 'Health for All'.

The other organisation with which we established a link is UNICEF, a much loved movement bringing together volunteer societies to care for children. We plan to associate with them in their work throughout the globe. We all perforce to share this little globe and everywhere there are hungry and neglected children who need care and food. Both individually and collectively we have a responsibility here - we must not avert our eyes and look away. All members of WONCA will have an opportunity in the coming years to give expression to the idealism and charity. There is no frontier of compassion for the hunger and suffering children. The question that Andre Gide posed—what price to put to a child's suffering—is still with us today. So WONCA is uniquely fitted for such a worldwide-wide endeavour. Over 100000 physicians are represented in WONCA and they live and practice in virtually every community of the 35 members of WONCA, and we are growing every year. We are meeting at the doorstep of the largest nation in the world, People's Republic of China. I am confident that they too will join our family in the not too distant future. Last year, I visited China and enjoyed their hospitality and I found that they too were beginning to discover the importance of Primary Care and the values of Family Practice. Who, you will ask, has been introducing them to Family Practice? It was a delegation for the Hong Kong College led by its President that formally presented Family Practice to them. That seed has taken root and I believe it will flourish. I believe that the

Family Practice way of Primary Care can make a tremendous contribution to the health of the people of that vast country.

We are meeting on this little rock off the coast of China. Can you imagine a place which faces greater adversity, or where the odds of success are smaller? Yet a flourishing metropolis exists here, managed by anonymous civil servants and amateur politicians, with a talented population. Hong Kong has absorbed a tremendous growth of population by immigration and has continued to flourish. Hong Kong is the gateway to China, not just geographically but for technology, trade and new ideas as well. It becomes part of the People's Republic in a decade. I see a powerful symbolism in that families of doctors in Hong Kong whose ancestors came to Hong Kong from China when the British first arrived, will continue to be here when Hong Kong reverts to China. I am certain Hong Kong will continue to flourish and play Athens to their great Sparta. You may be surprised that I can see Athens in the harsh entrepreneurial environment of this island state.

Remember, this island has one of the great universities of the world and its Faculty of Medicine celebrates its centenary next week. They have as their Vice Chancellor one of the most distinguished academics my country has produced. Consider, in how many nations of the world is the Vice Chancellor of the University near the top of the order of precedence after the head of state. Now that is what I call showing Confucianist respect to learning!

These miracle makers are our hosts today. The tiny member Colleges in WONCA seem to concentrate talents and nowhere have I seen a more dedicated College Council than in the Hong Kong College. This has been a year of accomplishments. In addition to organising this splendid meeting, they have graduated their first batch of Fellows by examination. I had a small part in helping to develop this examination and the outstanding performance of candidates this year is a cause of pleasure to me. I must congratulate Dr Stephen Foo and his Board of Examiners for their very hard work for over three years to bring this examination into existence. The College has also published a pioneering survey of morbidity in Hong Kong, the third in a series, and I must congratulate Dr Paul Lam and his team for their very difficult achievement that only a few Colleges can match. Speaking for all of you, I must congratulate Dr Eddie Chan, Chairman of the Organising Committee of the Hong Kong College for the excellent planning of

what promises to be a most successful meeting. I am particularly looking forward to the excellent scientific programmes that Dr John Chung and his Committee have devised for us. I have kept in touch with the organisers and I can tell you that they have spared nothing to make this meeting a success. May I on your behalf tell the President of the Hong Kong College, Dr Peter Lee and the Chairman of the Organising Committee, Dr Eddie Chan and his committee, how much we look forward to enjoying this week with them and how grateful we are to them for having accepted the responsibility of being hosts to this Regional Meeting.

We belong to the oldest discipline of medicine, general practice, now renewed as Family Practice. Our meetings are occasions not only for learning; the fellowship of these occasions is a precious asset. So I bid you to learn and to teach, make merry and make friends. To our Guest of Honour and our honoured guests, I say thank you for gracing this Opening. To all I say welcome, my friends, to the Regional Conference of WONCA.