LETTER TO THE EDITOR



Understanding the Family Physicians in Searching for the Family Doctor

Timothy Hoff, PhD

AUTHOR AFFILIATION:

Northeastern University, Boston, MA

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TO THE EDITOR:

In her recent review of my new book on family medicine,1 Holly Salzman, MD, mistakenly suggests that the cross section of 55 family doctors whom I interviewed extensively for the book were drawn exclusively from a single state professional association (ie, the New York State Academy of Family Physicians), thus making some of the study findings reported in the book somehow less accurate due to geographic parochialism or self-selection bias. In fact, the book has a detailed appendix outlining how family physicians were identified and selected for interviews. They were selected carefully and purposively based on appropriate qualitative methodology. 2 Most of the interviewees were not affiliated with or recruited from this single state professional association. Rather, they were recruited through a variety of medical schools, residency programs, and primary care practices. Yes, most were working in the Northeastern part of the United States. But that alone does not make them less representative nor does it mean that their voices cannot vocalize appropriately for other family doctors who work elsewhere. As noted in the book, interviewees were born, raised, and went to school in different parts of the United States. In addition, great care was taken in making sure that the physicians were selected from a variety of practice (eg, urban, suburban, rural) and employment (eg, private practice, salaried employment) settings, career stages, and racial/ethnic backgrounds. Also, fairly equal numbers of female and male family physicians were in the interview sample.

Dr Salzman infers in her review that the book portrays all family physicians as burned out or regretting their career choice. It does not; rather, what it actually does is let 55 family doctors talk in-depth about their work, career, and professional experiences. In doing so, the book portrays them in much richer and truer detail than how family doctors are often presented in the literature or by the media. Certainly, some of this portrayal shows family physicians who are both exhausted by and frustrated with trying to live up to the "good on paper, challenging in reality" traditional family doctor ideal—an ideal that the book takes on directly through a historical critique of some misguided early strategies of the family medicine specialty. The book, however, also includes detailed portrayals of family doctors full of hope and brilliantly pragmatic in building sustainable careers for themselves, while still attempting to fulfill important parts of the family doctor ideal. Ultimately, though, the book's analysis justifies meaningful change where the future of family medicine is concerned. That future has several potentially different outcomes depending in part on how intelligently this specialty adapts to the realities before it and how many of its members realize that things are far from normal and that time is of the essence.

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