

The Intellectual Basis of Family Practice

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—This review is the first in a series on foundational and historical books informing family medicine education.—

Book Title: The Intellectual Basis of Family Practice

Author: G. Gayle Stephens

Publication Details: Society of Teachers of Family Medicine, 2024 (Original 1982), 246 pp., \$20.00, paperback

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HOW TO CITE: Chen F. The

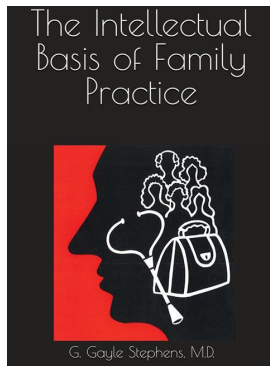
Intellectual Basis of Family Practice.
Fam Med. 2025;57(10):752–753.

doi: [10.22454/FamMed.2025.981461](https://doi.org/10.22454/FamMed.2025.981461)

FIRST PUBLISHED: November 20,

2025

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I first encountered Gayle Stephens when, as a medical student, I came across his provocative article, “Family medicine as counter-culture.”¹ The author was the founding chair of family medicine at the University of Alabama and one of the leading intellects in the formative years of our specialty. His book, *The Intellectual Basis of Family Practice* is a collection of his speeches and writings, mostly from the 1970s, and serves as a foundational text that dives deep into the theory and philosophy underlying the field of family medicine. STFM has recently republished this book and Dr Stephens’ writings are historic, prescient, and sadly predictive.

Stephens articulates a vision for family practice that emphasizes its unique position in the health care system. He argues that family practice is not just a collection of specific skills or procedures, but rather a holistic approach to patient care that necessitates a broad understanding of individuals within the context of their families and communities.

A core theme of the book is the emphasis on continuity of care and the long-term patient-doctor relationships that family practitioners build. Stephens emphasizes that these relationships are central to effective treatment and patient satisfaction, as they allow for a more personalized approach to health and wellness.

The book firmly establishes the intellectual demands of family practice, positioning it as a field that requires not only medical knowledge but also a deep appreciation for the psychosocial dimensions of health. Stephens called for a model of care that integrates scientific knowledge with the empathetic understanding of patients’ lives, acknowledging the complexity and individuality of each patient’s situation.

Among the major essays in this collection are clarion calls for reform, revolution, and resistance against the growing medical-industrial complex. In a timely turn, he writes about the never-ending battle against technology threatening to remove humanity from doctoring. His teaching pearls are timeless: distinguish ignorance from uncertainty, don’t lose faith in relationships, and don’t turn your practice into a business.

I was surprised at the absence of discussion of the role of community in health and family medicine. Similarly, there is remarkably little mention of elements of public health or its current iteration, population health.

Stephens’ work stands out for its thorough examination of the philosophical and ethical dimensions of family medicine. The book has been influential in shaping how family medicine is taught and understood, emphasizing our field’s commitment to comprehensive, patient-centered care.

The book is both timely and dated, and accurately foreshadows our present bleak challenges of burnout, consolidation, and commoditization. Stephens is emphatically moral about the sanctity and ethos of the work of family doctors, the intellectual rigor required to perform this work at the highest level, and spiritual righteousness

that only comes with the intimate privilege of dwelling in patients' lives and being party to their journeys of illness and healing.

REFERENCE

1. Stephens GG. Family medicine as counterculture. *Fam Med*. 1989;21(2):103-109.