FaMEC: 2002 – 2004

The Family Medicine Education Consortium (FaMEC) has gone from strength to strength in its six years of formal existence. It was created in 1999, at the World Rural Health Conference in Durban, through a process facilitated by our Flemish colleagues from Belgium. They had already trodden the path to inter-university collaboration on educational matters and very generously shared their trials, tribulations and successes with us.

So how far have we got towards achieving our consortium aims?

FaMEC was awarded the contract by the National Department of Health to develop a distance training module on an integrated approach to STI’s, HIV, AIDS and TB. This project was very ably led by Prof Bob Mash of the Stellenbosch Department of Family Medicine. He worked with representatives of all eight departments of Family Medicine as well as content experts from other disciplines to produce the first of what we hope will be many modules developed in this collaborative way. Each department now has the opportunity to use the module in its teaching programmes.

The Handbook of Family Medicine (also very effectively edited by Bob Mash) continues to be well used and has made a significant contribution to Family Medicine education in South Africa. In fact, the time for a revised second edition is probably looming.

Recently, FaMEC held a very successful national road show for training in Neonatal Resuscitation. The programme was brought to South Africa by Prof Ian Couper of Wits University and presented by Dr Jim Thurley from Australia. It will have resulted in the training of approximately 270 doctors and nurses in neonatal resuscitation skills approved by the South African Paediatric Association. Forty of these practitioners have been certified as trainers, who will now be expected to train people that they work with.

FaMEC has formalised the creation of “the Network” of South African Family Medicine organisations with its partners the South African Academy of Family Practice/Primary Care, the Rural Doctors Association of Southern Africa and the College of Family Practitioners of the Colleges of Medicine of South Africa. The purpose is to formulate common strategies to attain the common vision of the organisations with regards to undergraduate, post-graduate and vocational training, CPD and research and to work through its member organisations (with their individual core skills) to implement these.

FaMEC has secured a permanent position on the Committee for General Practice of the Medical and Dental Professionals Board of the Health Professions Council of South Africa. Work being done by this committee, has resulted in the acknowledgement by the HPCSA that Family Medicine is a specialty. The next phase will be the implementation of this decision, with the creation of accredited registrar posts in accredited teaching sites, which will be in relevant primary medical care settings, eventually in both the private and public sectors.

An obligatory rotation through Family Medicine is part of the future two-year internship. It is hoped that this exposure will encourage graduates to consider Family Medicine in their future career planning.

The support that FaMEC members have given to this journal has also meant that Family Medicine has the means to disseminate relevant new knowledge and provoke discussion on issues of concern to the Family Medicine community.

All the departments of Family Medicine have agreed to the outcomes and assessment criteria for post-graduate training in Family Medicine. Currently, representatives of each department are matching these with their course content. Work is progressing well towards the creation of a unified national end-point exam.

Our Flemish partners are still working with us in a wonderful North-South collaborative project to optimise post-graduate training for Family Medicine in South Africa. This project is progressing very well under the leadership of Prof Jannie Hugo. So much so, those possibilities of extending the project to include collaboration with partners in the SADC countries will be explored over the forthcoming year. For the first time this year, scholarships were awarded by the project to five South Africans (Drs. Marietjie van Rooyen, Shabir Moosa, Claire van Deventer, Gary Morris and Hoffie Conradie) to spend two weeks in Belgium learning more about Family Medicine training there and launching some collaborative research projects.

We are also very pleased to have been able to award the very first “Dumo Baqwa Award for Community Oriented Family Medicine” to Dr Bernhard Gaede for his research entitled COPC analysis of intersectoral HIV/AIDS work in Okhahlamba, done while training at MEDUNSA. This award is in memory of the previous Head of the Division of Primary Health Care at the University of Cape Town, who died in 2002.

I have been very privileged to be the Chairman of FaMEC during these exciting times and thank the FaMEC community for their support over the last three years. Prof Khaya Mfenyana of UNITRA was unanimously elected recently as the Chairman for the forthcoming year.

Julia Blitz-Lindeque
FaMEC chairman 2002 – 2004