

Enhancing Family Medicine Practice in Developing Countries through a Holistic- Comprehensive Care Model: A Review

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Enhancing Family Medicine Practice in Developing Countries through a Holistic-Comprehensive Care Model: A Review

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Abstract

Background: The family medicine practice is a model for delivery of health care to the entire population, enhancing a patient focused and integrated primary health care systems. Unlike other medical specialties, family medicine practice includes biological, psychological, socio-spiritual, and all disease entities. Although considerable researches have been devoted to explain the concept of family medicine, rather less attention has been paid to its practice in developing countries. This study aims to review the empirical literature on a holistic-comprehensive care model implemented in family medicine practice particularly in developing countries.

Method: This study reviews alternative approaches to understand what “best practice” in family medicine is. The authors searched ‘family medicine practice’, or ‘family medicine’, ‘primary health care’ and ‘developing countries’ and ‘holistic’, and ‘comprehensive’ in address field from Google Scholars, Proquest and ScienceDirect dating from 2003 to 2019. Sixteen articles were included in the study out of 171 articles reviewed.

Result: A holistic-comprehensive care model consists of four primary concepts of care: clinical care, professional behavior in clinical practice, family medicine practice management and clinical practice facilities and equipment.

Discussion and Conclusion: The future studies of family medicine practice could focus on the promotion of a more sustainable delivery of healthcare. This study concludes by synthesizing concepts for a new family medicine practice, and suggests how a holistic-comprehensive model might contribute to thinking about the future of family medicine practice in developing countries.

Keywords: Family Medicine, Family Medicine Practice, Developing Countries, Holistic-Comprehensive Care Model, Review

Introduction

The family medicine practice is a model for delivery of health care to the entire population, enhancing a patient focused and integrated primary health care systems. Unlike other medical specialties, family medicine practice includes biological, psychological, socio-spiritual, and all disease entities. Most primary health care in developing countries are provided by health care

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team include doctors and nurses but still small number of qualified doctors who are willing to work in rural areas, not as much as in developed countries. While the variety of people concentrated in urban areas, family doctors and health facilities are heavily concentrated in big cities. Currently in Africa, there is about one family physician for every 50,000 people in the country. However, in rural areas, often interventions are conducted by nurses or other clinical support services rather than family physician. As we can see that health systems struggle to adequately prepare health professionals to practice more in rural areas. In the countries such as South Africa, Nigeria, Uganda, the Democratic Republic of the Congo, Sudan, Ghana, Tanzania, Kenya, Lesotho, and Botswana, and most recently in Somaliland, Ethiopia, Mali, and Malawi, currently they are preparing for family medicine training program to support the needs of family physician in rural areas. Other issue that also needs to be addressed is “preventive care” as the first priority for family medicine practice. As the number of patients with chronic conditions arise, providing preventive treatment, such as lifestyle modification and coping skills have been identified as factors that could reduce future complications. Family physician should overcome the challenges to understand the biological, psychological, social, spiritual and cultural dimensions of health and diseases. Family doctors provide more primary care services than any other medical specialty and it is considered as the best choice of doctors.¹⁻³

A holistic-comprehensive approach was developed to provide promotive, preventive, curative and rehabilitative treatment. In holistic approach, family doctors should consider psychosocial aspects, culture, spiritual and beliefs. In addition, comprehensive care is a challenge for family doctors to provide a broad range of health services in and their appropriate provision types of patient needs. Through comprehensive care, patients receive a continuum of health services: promotion, prevention, treatment and rehabilitation within the collaboration with health insurance system.⁴⁻⁶

Although considerable researches have been devoted to explain the concept of family medicine, rather less attention has been paid to its practice in developing countries. Primary health care should consider ways to ensure that community receive their priority health needs which are more affordable, accessible and available.⁷ This study aims to review the empirical literature on a holistic-comprehensive care model implemented in family medicine practice particularly in developing countries.

Material and Method

This study reviews alternative approaches to understand what “best practice” in family medicine is. More specifically, the paper explores how a holistic-comprehensive care model contributes to a more sustainable health care and patients’ wellbeing. The authors searched ‘family medicine practice’, or ‘family medicine’, ‘primary health care’ and ‘developing countries’ and ‘holistic’, and ‘comprehensive’ in address field from Google Scholars, Proquest and ScienceDirect dating from 2003 to 2019. The inclusion criteria employed were: 1) Review articles included in this study come in the forms of research articles, editorials, comments, literature reviews in quantitative, qualitative or mixed-method research. The study results might include papers in which family medicine practice applied in other countries exploring holistic-comprehensive care; 2) Papers must be written in English. These review papers were manually screened out by authors with previous experience of family medicine practice. A total number of 16 articles were identified.

Findings

A holistic-comprehensive model consists of four primary concepts of care based on four standards of family medicine practice: 1) clinical care (holistic care, comprehensive care); 2) professional behavior in clinical practice (doctor-patient relationship, partners in the healthcare team, working with colleagues, knowledge-skill development, community leader); 3) family medicine practice management (human resources, financial management, clinical practice management); and 4) clinical practice facilities and equipment (clinical practice facilities, clinical practice equipment, clinical support services).⁸

Holistic care considers patient as whole human being: physical, emotional, social and spiritual aspects.⁴⁻⁵ In addition to treating all diseases, primary doctors provide alternative therapies using local resources which are integrated in the primary health services and delivered continuity of care.⁹⁻¹⁴ In a comprehensive care, doctors must provide primary care to the entire population, all ages and sexes, promote health, prevent illness, do the early screening, treat diseases, perform medical-social rehabilitation and improve family social function.¹⁵⁻¹⁷

Several strategies to maintain family doctors’ professionalism through doctor-patient relationship: providing comprehensive health information, managing

effective and efficient length of consultation, delivering effective communication, and respecting rules and obligations between doctor-patient. A strong partnership in health care team has the potential to help support patients by improving professional relationship and teamwork clinic leadership. While working with colleagues, family doctors build their interprofessional relationships, relationship with other doctors and family doctors' association.¹⁸⁻²¹

To support a lifelong learning for family doctors when providing holistic and comprehensive care, it is important to engage them in a continuing medical education, participate in advancing medical education, and collaborate in research and scientific writing. Quality assurance programs are essential to maintain high quality of care by constantly measuring the effectiveness of the family doctors' organizations that provide it. As a community leader, doctors engage in social group association, participate in health and society program, as well as encourage communities in disaster program.²²⁻³⁰ Properly implementing quality improvement of family medicine is a key to a well-functioning practice.

A multidisciplinary health care team comprises people with wide ranging-skills: family doctors, nurses, midwifery and clinical administrator. In addition, doctors have a responsibility to be in charge of clinical examination fees, and maximize the benefits for their patients regarding use of alternative resources from health-care systems. Managing a comprehensive clinical practice efficiently requires evaluation and planning of staff and occupational health and safety procedures. Further, clinical practice facilities and equipment must be prepared to the most up-to-date and standardized medical and non-medical equipment to ensure health care team is able to provide the highest standards of clinical and patient care.³¹⁻³² Family doctors have a professional and legal duty to respect patient's privacy and confidentiality with regards to their medical information, and manage the records appropriately as standards of continuity of care. Applying both conventional and local or alternative resources, family doctors delivered both basic medical care and common health services at a low cost.³³ Good quality of a holistic and comprehensive in family medicine practice is essential to the proper ongoing care of patients.

Conclusion

The future studies of family medicine practice could focus on the promotion of a more sustainable delivery

of healthcare. This study concludes by synthesizing concepts for a new family medicine practice, and suggests how a holistic-comprehensive model might contribute to thinking about the future of family medicine practice in developing countries.

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