

Title: Demographic profiling – an effective advocacy tool for innovative approaches to generate a critical mass of family physicians in India

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Context and setting: India loses an average of 56,000 mothers to childbirth-related complications, 200,000 children to diarrhea and 400,000 children to pneumonia annually. Large numbers of well-trained multi-competent Family Physicians are needed to address this huge deficiency in healthcare delivery, help meet India's Millennium development goals and make the Universal Health Coverage a reality. But there are limited training opportunities and no mandated revalidation system for the 250,000 private practitioners and 30,000 Government doctors in India who function as Primary care Physicians to the 1.2 billion population in the country.

Residential courses in Family Medicine offered since 1990 have attracted few applicants, as the Private practitioners were unwilling to leave their practice, the Government had difficulty in releasing the already-lean workforce in the Primary Health Centres for the three-year residential training, compounded by the low esteem for the specialty. A two-year Postgraduate Diploma in Family Medicine was started as a blended learning program (distance learning and hands-on components) in 2006 by the Christian Medical College, Vellore, India to help generalist doctors update themselves and to be able to deliver good quality care, with a special focus on doctors serving in rural, low-resource and Government settings and in northern states which have poor health indices. Surprisingly high enrollments for this course from doctors across the country and abroad prompted the authors to look at the demographic profile of these applicants for this course over a period of six years to use that as an advocacy tool to inform relevant stakeholders about this approach to address the huge training gap.

What was done: Existing data (2006 to 2012) on students applying for the course was collected and collated from the Student Information Database and analysed. Faculty workshops for institutional, national and international faculty who teach in the program were conducted to impart understanding about target audience and skills to address the same. A dissemination booklet was printed and the information showcased to all relevant stakeholders - Institutional, University and Government authorities and potential International partners.

Results and impact: 1,124 doctors applied for the course; 45% were female; 42% from an age 31 to 40 years with about 46% doctors from the Government sector (half of them sponsored by the government). 90% of the applying doctors were in active practice, 73% of them had no postgraduate degree; in fact, 40% of them had a gap of >10 years since their last educational pursuit. South-Indian states contributed to 60% of the applicant pool; 14% were non-residential

Indians from the Middle East and 4% of applicants were other nationalities, predominantly African. Updating knowledge and improving practical skills seem to be the reason why 64% applied for the course. 77% of the applicants indicated that they applied because they could do the course without leaving their workplaces.

Disseminating this information has helped the institutional, national and international faculty to have a better understanding of the students and to tailor their teaching and preparation of study materials. This has also prompted institutional policy changes like changes in selection process to encourage applicants from northern states, planning to start a regional centre in the north-west zone, provision of more scholarships for rural doctors and approval to launch an online Masters in Family Medicine with Edinburgh University, UK. Dissemination of this to the University and Government officials has led to increased awareness and commitment to Family Medicine and policy changes to facilitate more innovative training programs to generate a critical mass of Family Physicians in India is anticipated.

Lessons learned: Demographic profiling has proven to be an effective advocacy tool to create awareness among relevant stakeholders to promote much-needed and less sought-after specialties like Family Medicine in developing countries like India. Following this up with a more exhaustive course impact evaluation could further help in this advocacy initiative.