

## PREFACE

### **The Horizon of Formal Family Medicine Specialist Program in Indonesia**

After decades of tireless preparation and advocacy of the founding fathers in family medicine, the family medicine and primary care specialist program in Indonesia is now finally established. Beginning in 2021, Universitas Gadjah Mada (Yogyakarta) was the first university in Indonesia to open the program on a regular-based curriculum, followed by Universitas Indonesia (Jakarta), Universitas Prima Indonesia (Medan), Universitas YARSI (Jakarta), Universitas Pelita Harapan (Jakarta), Universitas Padjajaran (Bandung), Universitas Syah Kuala (Banda Aceh), Universitas Riau (Riau), Universitas Sumatera Utara (Medan) and several other universities in Indonesia are about to follow. Prior to the great establishment, an academic master program in family medicine was established in UGM and Universitas Sebelas Maret / UNS (Surakarta) in about 2013, which graduating more than 100 alumni, also a fellowship program on primary care doctors was established in Universitas Padjajaran (Bandung) which graduate more than 100 fellows. This effort did not count many yearly trainings that has been conducted in collaboration together with locals District Health Care in Jakarta and Yogyakarta by those universities since 80's.

So now, how is the horizon of this new program in Indonesia?

At least three main topics to discuss are essential for it. First, this program is a recent specialist program in Indonesia and the first specialist program based on primary care and community level, different from the other specialists that are at the hospital level. Primary care is a level of health that the physicians have become "cinderella" in their own house. All recognize that their roles are essential, but on the other hand, they often get minimal acknowledgment. With this new specialist program in family medicine, all eyes will then be focused on them; everyone would feel that the training is the jack of all trades, the one that being able to overcome all of the problems primary care has. Therefore, to manage this situation, the program quality is at stake; to maintain our promise that the graduates will be able to provide expected quality services, but we shall not also discard that the success of care also needs support from the access, policies and facilities.

Second, in all reform and changes, our primordial instinct desires to implement the change as immediately and massively as possible, followed by the need to progress the existing doctors in primary care to become family doctors, to increase interest in the college's membership, as well as becoming teachers of prospective residents who will attend the education. This need then is being followed up by the work of the Indonesian College of Family Doctors in collaboration with The Indonesian Ministry of Health and Indonesian Medical Council to propose a Recognition of Prior Competences (*Rekognisi Kompetensi Lampau*) program for the senior doctors. Great initiative, but again, we need to be conscientious of the quality of the program and the alumni who will serve the community.

Third, there is a need to ensure that specialist education graduates will later receive awards for service quality. Therefore, efforts to increase remuneration and practice authority are always essential.

So how about the various considerations above? There is a genuine call for us all stakeholders involved in the establishment and the run of family medicine in Indonesia to continue to work together, hands-in-hand and coordinate with each other to maintain a standardized quality of education and strive for the best professional recognition for the future of our family medicine generations. It is huge job that attentively be conducted step-by-step. Where? In our unique workplace, either in the health service, policy or in the education sector. When? It is now. Why? Because our primary care now is more than ever!

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