Authors' Reply to "Training and Supporting Residents, for All Family Medicine Practice Settings"

TO THE EDITOR:

We appreciate Dr Wu's comments and agree wholeheartedly that meeting community needs and negotiating relationships are essential skills for all family physicians. The need for these skills is amplified in the intimacy of the rural environment, as physicians navigate daily life amongst patients at grocery stores, restaurants, schools, and social gatherings.

We further agree that preservation of full scope care and strong social support are effective training strategies to maintain vitality and resilience in practice, regardless of setting. Rural training may have unique aspects in the setting of proximity to individuals and within the community; however, the overlap and similarities that exist in urban underserved areas run parallel. Adaptability and scarcity of resources have been defined as the most unique domains of rural practice competency.¹ Whether rural or urban, areas with limited access to health care ultimately illuminate the dysfunction of our health delivery system. The skills involving comprehensiveness, leadership, and social resilience are key to training, especially in these environments. Furthermore, the providers in underserved settings readily mentor residents regarding how to advocate and promote social justice for their patients and share in a united effort to focus on meaningful solutions for marginalized communities.

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Reference

 Longenecker RL, Wendling A, Hollander-Rodriguez J, Bowling J, Schmitz D. Competence revisited in a rural context. Fam Med. 2018;50(1):28-36.