

Report: Health care reform must be local, regardless of court decision

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(Medical Xpress) -- Even with an imminent Supreme Court ruling on the health care overhaul law, it's still the primary care physician and the local community that will determine the path of true health care reform. That's the message from "Communities of Solution: The Folsom Report Revisited," a policy paper published online in the May/June issue of *Annals of Family Medicine*.

"The Folsom Report, published in 1967, called for a closer alliance between [public health](#) and [primary care](#)," says corresponding author Kim S. Griswold, MD, MPH, associate professor of family medicine in the University at Buffalo School of Medicine and [Biomedical Sciences](#). "Now, nearly 50 years later, we're calling for the same thing. We need to inject -- and maintain -- the public ingredient in medical care."

The original Folsom Report grew, in part, out of the social justice movements of the 1960s and 1970s. It was responsible for several important advances, including the establishment in 1969 of a new medical specialty called family medicine.

In 2010, Griswold was one of a group of nine family physicians from throughout the U.S. who were brought together as the Folsom Group by the American Board of Family Medicine to revisit and discuss the original Folsom Report.

"Our goal was to look at the intersections of [health care reform](#) at the federal and local levels and to look at [health care disparities](#)," says

Griswold, who also is a faculty member in the UB Department of Psychiatry and in the Department of Social and [Preventive Medicine](#) in the School of Public Health and Health Professions. "We used Folsom as a springboard to see how we could create healthier communities across the nation.

"As [family physicians](#), we care about the patient in front of us and the community from which he or she comes," Griswold says. "I care about your diabetes but what if there aren't safe places in your community for you to walk around and exercise? I can provide the patient with medications but I can't fix the neighborhood he or she lives in. For that, I need the public health perspective."

Griswold notes that by connecting with public health and other community health workers, physicians can develop or find resources, such as a shuttle to a nearby park so patients can safely exercise or to well-stocked grocery stores, where they can purchase food for a healthier diet.

The paper mentions that there are now fewer primary [care physicians](#) than in past decades, especially where they are most needed. It notes that in some communities, such as Buffalo, the addition of community health workers has helped improve health care at the local level. The paper suggests that primary care physicians should consider as one option using community health workers and health educators in their practices.

Formidable barriers also exist in inner-city communities for growing numbers of immigrants and legally re-settled refugees. At Buffalo's Neighborhood Health Center, for example, Griswold and colleagues provide care to refugees from various countries. In one case, she notes, a Burmese translator was needed, but they needed someone who could speak one of the 14 Burmese dialects, making the challenge of finding someone even more significant.

That's the type of situation that requires what the Folsom Group calls "communities of solution," where problems, such as language or transportation barriers, are managed and solutions are delivered to the communities that need them, regardless of artificial boundaries, such as political or geographic communities.

"The nation has done this beautifully with disaster response," says Griswold, "where first responders in a region all respond immediately without regard to which jurisdiction it is. That's what we need for [health care](#)."

Griswold notes that the publication of the report this year followed the release in March of an Institute of Medicine Report on the "Integration of Primary Care and Public Health" (iom.edu/Reports/2012/Primary-Care-and-Public-Health.aspx).

More information: www.annfammed.org/content/10/3/250.full

Provided by University at Buffalo

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