

# The world of WONCA

THE initials WONCA stand for World Organization of National Colleges and Academies of Family Medicine/General Practice. This rather cumbersome title reflects what used to be at times a rather cumbersome organization.

In 1964 Dr W. Victor Johnstone, then Executive Director of the College of Family Physicians of Canada, organized the first world conference in Montreal. Subsequently, a Liaison Committee of Colleges and Academies was created. In 1970, at the fourth world conference in Chicago, Dr Montie Kent Hughes proposed the formation of a world organization.

Aided and encouraged by Dr Donald Rice, who had succeeded Dr Victor Johnstone as Executive Director of the Canadian College, Dr David Game of Australia, who became first Secretary, and Dr Stuart Carne, who became the first Treasurer, WONCA came officially into being at Melbourne in 1972. Biennial world conferences have been held ever since.

In the early years the number of member countries was small, and the question was increasingly asked, 'Why a world organization?' More recently, however, the number has grown to 23 and is still increasing. Furthermore, the functions of the organization have emerged more clearly.

First, there is a great need for information sharing. In many countries of the world, basic information about primary care, and knowledge and experience hard-won in other countries, is simply not yet available. A world organization has an obvious function, which WONCA is beginning to grasp, of disseminating information more widely. At the recent conference in Toronto WONCA accepted this role, and in addition, the editors of several journals of general practice met and agreed to co-operate more closely in future in spreading news of general practice around the world.

Second, despite enormous differences in the work and the organization of medical care in different countries, common problems and principles are emerging, particularly in training programmes—the experience of one country can often be transferred, albeit with modifications, to another.

Third, at a time when some countries in the world, notably in Europe, are introducing government-controlled certification for entering general practice, the need for the co-ordination of political policies by general practice organizations is becoming clearer.

Finally, a notable problem in general practice has been the development of a world literature. Professor McWhinney's WONCA committee on bibliography has already made notable successes, and we hope will continue to make progress.

In a world organization of this kind, different countries will make the running at different times. At present it looks as if the main centres of activity lie in a

great triangle which spans the world. In the North American continent, Canada is at present the dominant figure, with family medicine programmes in every medical school and an active and energetic college.

In the southern hemisphere, the Australians are far ahead; the huge Government-backed Australian Family Medicine Programme is a unique enterprise shared between Government and college.

The third point of the triangle lies in Europe, where at present the UK has so far made the greatest progress in promoting general practice as a discipline, in building up its own academic organization, and in establishing departments of general practice. It is appropriate that the new President of WONCA, Dr Stuart Carne, is a British general practitioner.

All three countries share a common language and literature. It may prove significant in the long run to note that each point on this triangle is adjacent to a geographically much larger land mass, which currently shows signs of rapidly developing an interest in general practice/family medicine. Adjacent to Canada lies the USA, which, after a late start, now appears to be running strongly in developing family medicine programmes. Adjacent to Australia lies the huge land mass of Asia, with what are at present smaller, but rapidly developing independent colleges of general practice; while geographically adjacent to the UK lies the continent of Europe, which too, shows many signs of rapid development. The Dutch have made notable contributions to the academic discipline of general practice, Denmark is about to introduce compulsory training for general practice in 1977, and generally interest in primary care is growing fast.

The English-speaking triangle of nations has contributed notably to the formation of WONCA and has dominated its short history. It will be interesting to see how quickly the other nations of the world join and take their full share in creating new ideas and developing new policies.

It will be worth watching the world of WONCA.

## Occasional Papers

The *Journal* has now introduced a new series of publications which will be known as 'Occasional Papers'. For many years there have been two other series of *Journal* publications, Reports from General Practice, which indicate College approval or College policy, and *Journal Supplements*, in which the views expressed have been simply those of the author.

The rising circulation of the *Journal*, coupled with the sharp increase in postal costs, have meant that the custom of distributing a copy of these publications to

every reader of the *Journal* has become increasingly expensive. While it is still the *Journal's* intention to continue these series—and indeed, *Prescribing in General Practice* was distributed as a supplement only last month—nevertheless, there seems to be a need for another series which can be produced more cheaply and may be bought on application by those who are interested in a particular topic.

For this reason the Occasional Paper series has been introduced and the first two have now been published. The first is the new *International Classification of Health Problems in Primary Care*, designed by a working party of the World Organization of General Practice (WONCA), and approved by WONCA for use all over the world.

This Occasional Paper includes not only the classification itself but an article by Professor Bentsen and a report by the working party of its experiences in designing the classification.

The second Occasional Paper is the report by E. V. Kuenssberg, the new President of the College, on his experience as Wolfson Visiting Professor visiting a great many countries, both in Europe and North America. This report surveys both the organization and the educational developments in these countries and compares them with current developments in the UK. Published under the title *Opportunity to Learn*, Occasional Paper Number 2 is also now available.

These two Occasional Papers can be obtained direct from the headquarters of the Royal College of General Practitioners, at 14 Princes Gate, Hyde Park, London SW7 1PU, at a cost of £2.25 each, post free.

## New arrangements for the Journal

The *Journal* appears today in a new form, thus making the fourth major change in its format since the first Research Newsletter was produced in 1954.

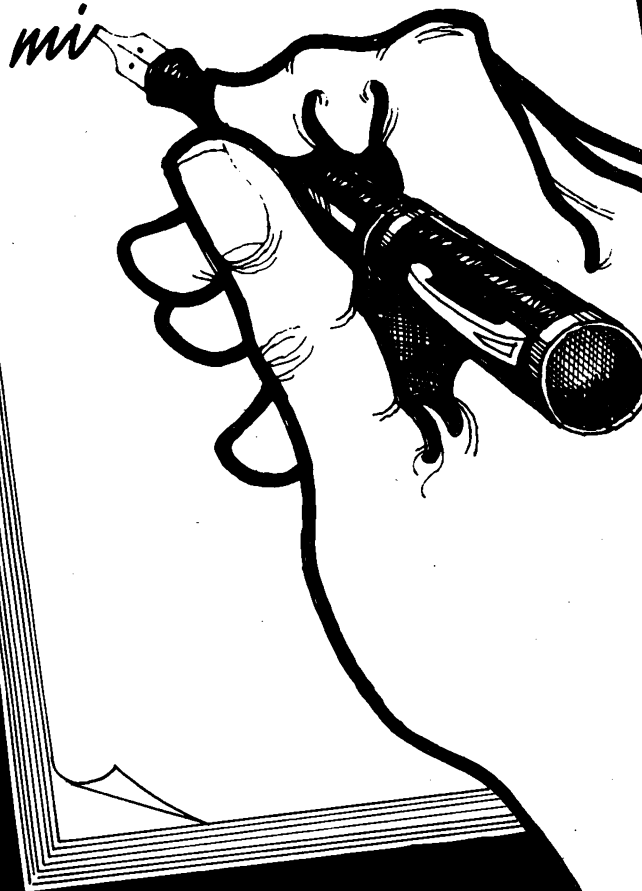
By changing to A4 size—the first change since 1969—and incorporating many other design features, we are trying to give the *Journal* a new, modern look and make it easier to read.

This issue is the first to be published by Update Publications Limited, who are well known for their other medical and dental journals, especially *Update*, which is itself designed for general practitioners.

We welcome this new publishing arrangement and invite comments on the new form of the *Journal* from our readers.

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