In 1997 the Canadian Medical Association (CMA) embarked on a study of the future of medicine. Two premises guided this activity: (1) the pace of change in the practice of medicine that physicians experienced in the last quarter of the 20th century is bound to increase in the 21st century; and (2) it is essential that the medical profession position itself to influence future developments in medical practice.

In order to prepare the profession to anticipate and meet the challenges of the future, the CMA is engaged in a medium- to long-term (5–20 years) planning exercise. This policy statement summarizes the results of the first part of this exercise: working definitions of health, health care and medicine; a vision for the future of the medical profession; and the implications of this vision for the roles of physicians. This work was conducted by an expert project advisory group, which developed background papers on these topics and prepared this statement for approval by the CMA Board of Directors.

Definitions

*Health:* is a state of physical, mental, emotional and spiritual well-being. It is characterized in part by an absence of illness (a subjective experience) and disease (a pathological abnormality) that enables one to pursue major life goals and to function in personal, social and work contexts.

*Health care:* is any activity that has as its primary objective the improvement, maintenance or support of physical, mental, emotional and spiritual well-being, as characterized by the absence of illness and disease.

*Medicine:* is the art and science of healing. It is based on a body of knowledge, skills and practices concerned with the health and pathology of individuals and populations. The practice of medicine encompasses those health care activities that are performed by or under the direction of physicians in the service of patients, including health promotion, disease prevention, diagnosis, treatment, rehabilitation, palliation, education and research.

A vision for the future of the medical profession

Medicine will continue to be a healing profession dedicated to serving humanity. Its cornerstone will continue to be the relationship of trust between the patient and the physician. It will uphold with integrity the values of respect for persons, compassion, beneficence and justice. It will strive for excellence and incorporate progress in its art and science. It will maintain high standards of ethics, clinical practice, education and research in order to serve patients. It will encourage the development of healthy communities and of practices and policies that promote the well-being of the public. It will demonstrate its capacity for societal responsibility through self-regulation and accountability. It will actively participate in decision-making regarding health and health care policy. It will guard against forces and events that may compromise its primary commitment to the well-being of patients.

The roles of physicians in the future

Although the vision and values of medicine are enduring and will remain stable, the practice environment of physicians will change as the medical profession responds to health system and societal influences. This in turn will have implications for the roles of physicians.

The traditional role of physicians has been medical expert and healer. This has involved diagnosing and treating disease and other forms of illness, comforting those who cannot be cured and preventing illness through patient counselling and public-health measures. While this role will remain at the core of medical practice, the evolving context of health care requires physicians to assume additional roles to support their primary role.

The CMA proposes the following roles as essential to the future practice of medicine (cf. Fig. 1 for their interrelationship). Although no physician will function in all roles simultaneously, they should all have the fundamental competencies to participate in each of these roles.

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• **Medical expert and healer:** Physicians have always been recognized for their role as medical expert and healer; it is the defining nature of their practice and derives from the broad knowledge base of medicine and its application through a combination of art and science. This is the foundation for continued physician leadership in the provision of medical and health care in the future.

• **Professional:** There must be renewed efforts to reaffirm the principles of the medical profession, including upholding its unique body of knowledge and skills; maintenance of high standards of practice; and commitment to the underlying values of caring, service and compassion. The medical profession of the future must continue to develop standards of care with ongoing opportunities for continued assessment of competency in order to remain a credible, self-regulated discipline worthy of public respect and trust.

• **Communicator:** Increasing emphasis will be placed upon the ability to gather and communicate medical information in a compassionate and caring fashion, to enter into a partnership with patients when organizing care plans and to provide important information through counselling and the promotion of health. As always, the patient–physician relationship will remain paramount, with its essential features of compassion, confidentiality, honesty and respect.

• **Scholar:** Scholarship involves the creation of new knowledge (research), its uniform application (clinical practice) and its transfer to others (education). It is this strong association with the science of medicine and physicians’ willingness to embrace the scholarship of their practice that is closely linked to their roles of medical experts and professionals.

• **Collaborator:** Health care services will increasingly be provided by interdisciplinary teams throughout the continuum of care from health promotion activities to the management of acute life-threatening disorders to the delivery of palliative care. In the role of collaborator, physicians recognize the essential functions of other health care workers and respect unique provider contributions in patient-centred health care delivery.

• **Advocate:** As the health sector becomes increasingly complex and interdependent with other sectors of society, it will be essential for physicians to play a greater role as health advocates. This may pertain to advocacy for individual and family health promotion in the practice environment; it may also relate to the promotion of improved health at the broader community level.

• **Manager:** In order to provide quality care, physicians of the future must be effective resource managers at the individual practice level, at the health care facility level and as part of the wider health care system.

In order to fulfil these roles and participate in communities as integral members of society, physicians need to lead balanced lives.

Physicians may sometimes experience conflicts among these roles. The CMA Code of Ethics specifies the basic principles of professional ethics for dealing with such conflicts.

**Conclusion**

The CMA has developed this vision for the future of medicine and the future roles of physicians to assist individual physicians and medical organizations to anticipate and prepare for the challenges of the next 20 years. The vision provides the profession with criteria for evaluating proposed changes in how medicine is practised and reaffirms the core values of medicine that must be upheld in whatever system emerges.

The CMA invites other organizations, nonmedical as well as medical, to comment on the contents of this statement and its implications for health and health care. The CMA welcomes opportunities to dialogue with others on how the health care system can be improved for the benefit of future patients and society in general.

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