

# Community Medicine And Academia

J Blessing

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## Abstract

Community medicine and academic medicine, regardless of location and practice specialty, are often viewed as divorced partners forced to continue a relationship. Many community practitioners see themselves in the “real world” while those in the academic setting are in some “other world,” often viewed as out of touch with the realities of true health care. Academic practitioners, some times publicly, but most often privately and among themselves, view community practitioners as out of date, behind the times, or practicing less than up-to-date medicine, certainly not to the standards of the academic center. The truth is that each loses sight of the other because of the trees in their particular forests.

Please forgive me for the extensive use of metaphors, but the analogies are useful in describing this relationship that seems to exist in health care. The truth is that neither assumption is correct nor, absolutely, incorrect. The community practitioner who does not stay abreast of the continuing changes in the science of health care will soon find themselves failing to meet the needs of their patients. The academician who fails to recognize the forces influencing the community foster concepts and makes advances that cannot be applied universally or may not be applicable to the community setting.

It is for these reasons that the lines of communication must be open and a forum of exchange and interaction developed. That is the purpose of this electronic journal. It is designed for physician assistant students, practitioners, and all health care providers. This forum will help the flow information between the community and the academy, particularly for

physician assistants. It is important that the research of physician assistants and others have an outlet. There are many outlets for health care information, but relatively few designed and targeted to physician assistants. This journal adds to those resources.

It is important for those in community practice to be responders and contributors. Research and investigation are not the exclusive domain of the academician and research scientist. Problems can be posed and investigated by community providers. This can be a forum for community practitioners. I also believe this journal can serve as a link between the community and academic physician assistants for collaborative efforts.

A partnership between the academy and community must exist with each as an equal partner. The problems of one must be the problems of the other. It is my hope that practicing physician assistants will use the data and information in this journal to help in their practice. I also hope that this journal will inspire more physician assistants to become involved in research and investigation of problems of interest. The opportunity for partnerships to form between the community practitioner and the academician is here. Interest, response, and involvement will be the driving forces for the success of the journal. I encourage all physician assistants, physician assistant students, and physician assistant academicians to use this journal as a resource for advancement of the art and science of our profession.

## References

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