



#### Dear fellow students,

following questionnaire is part of my dissertation at the institute for family medicine in Frankfurt, which I ask you to complete.

The questionnaire is about your image of family medicine, about the aspects you like or dislike about family medicine and about the factors playing a role in the decision for or against family medicine as further medical specialist education.

Regarding the shortage of family physicians and doctors in rural areas it is the aim of this study to shape the education and the working conditions in a more attractive way. So it is another aim, to create a general basis for improvements of your own education and working conditions. You can participate in giving your answers and opinions and perhaps become clearer about your expectations of working life.

Irrespective of whether or not you like family medicine, all opinions are important for this study!

Completing the questionnaire will last 10 to 15 minutes and of course your data will be treated confidentially and pseudonymized evaluated.

If you have any questions or remarks please contact me under following mail-address: Antonia.Bien@gmx.net

#### Thank you very much for your support!

Antonia Bien

#### Contact:

Doktorandin cand. med. Antonia Bien Institut für Allgemeinmedizin Johann Wolfgang Goethe-Universität Haus 10 c Theodor-Stern-Kai 7 D-60590 Frankfurt E-Mail: <u>Antonia.Bien@gmx.net</u> Telefon: Fr. Dr. C. Güthlin Tel.: 069-6301-83882 1. Which medical specializations are you interested in in the order of your preferences? (2 alternatives possible)

	1				lo not	know	yet	
	2				one, b	ut:		
				(for e indust	•	le wo	rking ir	n the pharma-
2.	When did your medical specialization			Was certain previous to studies				
	preference emerge? (Multiple choice possible)			Was r	einfo	rced d	luring	studies
				Emerged during studies				
				Emer	ged in	an in	ternsh	ip during studies
3.	Are you ready to set up in private practice / be employed as a family doctor (both specializing in family medicine or specializing in	l can't imagine that at all	□ 1	□ 2	□ 3	□ 4		l can well imagine that
	internal medicine but working a	s GP)						

4. How important were the following factors or persons in the emergence of the desired field of work?

	Not importa nt at all 1	2	3	4	Very importa nt 5
Interest in the subject					
Confirmation of personal strengths and capabilities					
General / Working conditions in the preferred specialist area					
Negative/ disappointing experiences in other specialist areas					
Prospect of taking over or working in an existing practice					
Teaching in the preferred specialist area					
Practical experience in the specialist area					

	Not importa nt at all				Very importa nt
	1	2	3	4	5
Sense of achievement when gaining practical experience					
Taking on responsibility during practical training /clinical traineeships					
Experience of medicine in rural areas (inpatient and outpatient sectors)					
Personal experiences as a patient					
Influence of doctors in the family					
Influence of doctors among circle of acquaintances					
Influence of family members or acquaintances in another health-related profession (nurse, physiotherapist, etc.)					
Influence of family and acquaintances with no medical background					
Other:					

5. In your opinion, what is to be said against... (Multiple choice possible)

wo	rking in a practice?	a permanent occupation in hospital?			
	Financial risk		Working in shifts		
	Bureaucracy, administrative effort		Competition		
	Inadequate payment		Hierarchy		
	Recourse claims		Lack of lasting patient contacts		
	High workload		High workload/ stress		
	Difficulties getting a licence in preferred region		No flexibility		
	High responsibility		Limited individual responsibility		
	No career chances				
	Lack of contact with colleagues				
	Other:		Other:		

6.	a) Are you ready to work in a rural area in			Yes; go to <b>6b</b>
	future?			No; go to <b>6b</b>
				I do not know; go to <b>7</b>
b	b)	<ul> <li>When did your attitude toward working in a rural area emerge?</li> <li>(Multiple choice possible)</li> </ul>		Was certain previous to studies
				Was reinforced during studies
				Emerged during studies
				Emerged in an internship during studies

7. From your point of view, pros and cons:

For working in a rural area as a family		Against working in a rural area as a family			
tor	doctor				
More individual responsibility		High workload			
Varied tasks		Lack of contact with colleagues			
Close patient contact		No privacy			
Safe job		Lack of private patients			
Family friendly environment		Difficulties for the partner in finding a job			
low living expenses		Long distances			
living nearby nature					
Other:		Other:			
	tor More individual responsibility Varied tasks Close patient contact Safe job Family friendly environment low living expenses living nearby nature	tor     doc       More individual responsibility     □       Varied tasks     □       Close patient contact     □       Safe job     □       Family friendly environment     □       Iow living expenses     □       living nearby nature     □			

### 8. Do you agree with following sentences about your general attitude toward family medicine?

	strongly disagre e				strongly agree
	1	2	3	4	5
Doctors working in family medicine had a negative influence on my attitude toward general practice					
Doctors working in family medicine had a positive influence on my attitude toward general practice					
Doctors working in other specialist areas had a negative influence on my attitude toward general practice					
Doctors working in other specialist areas had a positive influence on my attitude toward general practice					

9. What did you generally find was the attitude toward family medicine of other medical specialists during your university education?

rather disparaging						rather appreciative
rather disparaging	1	2	3	4	5	rather appreciative

### 10. In retrospect, how would you assess the following courses in general practice?

	very bad				very good
	1	2	3	4	5
a) Course in general practice					
b) Block internship in general practice					
c) Lectures in the field of general practice □ did not attend any					
d) Further curricular courses in the field of general practice (Introduction to careers in medicine, Introduction to clinical medicine, Interdisciplinary areas)					

	very bad				very good
	1	2	3	4	5
e) Electives:					
1.					
2.					
<ul> <li>f) Clinical traineeship in general practice</li> <li>Not completed</li> <li>Mandatory clinical traineeship</li> <li>Voluntary clinical traineeship</li> </ul>					

# 11. Which courses in general changed your attitude toward family medicine in a positive or negative way?

	<u>Positive</u>	<u>Negative</u>	
1.		1.	
2.		2.	

# 12. Does a role model exist among the general practitioners you have met in your life?

Yes	No

### 13. Do you agree with following sentences?

	strongly disagre e				strongly agree
	1	2	3	4	5
During my block internship, I had the opportunity to care for patients independently.					
If anything, I felt that excessive demands were made of me during my block internship.					
If anything, I felt that too few demands were made of me during my block internship.					
I was able to develop my communicative and social capabilities during my block internship in general practice.					
I felt like part of the practice team during my block internship in general practice.					

	strongly disagre e				strongly agree
	1	2	3	4	5
During the block internship, my teaching physician found time to answer any questions and to teach me.					
During the block internship, my teaching physician seemed very happy in his profession.					
The courses in general practice were useful for my medical education.					
The courses in general practice provided me with sufficient insight into the subject to rule it out or consider it as a medical specialty.					

- **14.** In your general practice education, what topic areas do you think should be dealt with in more detail? (Multiple choice possible)
- Economic aspects of setting up a practice
- **D** Running and organizing a practice
- Conducting a conversation (e.g. bearing bad news, communicating with difficult patients)
- The path to setting up one's own practice
- Different working arrangements in general practice (group practices, employment, healthcare centers (Medizinisches Versorgungszentrum))
- **D** The future of family medicine
- Internships in outpatient services to reduce uncertainty
- Frequent reasons for seeking advice concerning family medicine

- Additional titles (e.g.naturopathy)
- Structured specialist training in an organized network
- □ Working as a country doctor
- **O**ther:
- No information was missing in my general practice training
- There were too many courses in general practice
- 15. In your opinion, in what form should additional educational content in general practice be taught?
  - Preferably in the form of voluntary courses
     Preferably in the form of mandatory courses

This part is about your image of family medicine:

### 16. How attractive or unattractive do you see following aspects of family medicine?

	Not attractiv e at all				Very attractiv e
	1	2	3	4	5
Value of family medicine in health care system					
Working conditions					
Compatibility of work and family					
Prevention					
Varied scope of diseases					
Focus on individual					
Lack of emergency situations					
Necessity of referral					
Focus on communication					
Less operations/ diagnostic					
Patients of all ages					
Many similar diseases					
Home visits					
Unlimited reachability					
On-call-duty					
Smaller Team					
Income					
Additional titles (e.g.naturopathy)					
Early decision between outpatient and inpatient patient care					
Prestige among colleagues					

	Not attractiv e at all				Very attractiv e
	1	2	3	4	5
Public prestige of family medicine					
Other:					

# 17. How important would be a change of following frame conditions in family medicine, to make it more attractive?

	Not importa nt at all				Very importa nt
	1	2	3	4	5
More possibilities of employment					
Training for taking over or founding a praxis					
Guarantee a professional representation					
Better coordination of medical specialist further education					
Guarantee a child care					
Support regarding finances					
Support regarding law and administration					
Support in learning competences of family medicine					
Optional courses to discuss questions concerning family medicine					
Other:					
Personal anonymized data:					

18. Gender:

	female		male
		years	

19. Age:

20. Family status:	<ul> <li>married</li> <li>in partnership</li> <li>divorced</li> <li>single</li> <li>widowed</li> </ul>
21. Do you have children?	□ Yes □ No
22. Do you have a pre-education?	□ Yes □ No
23. How were you allowed to medical studies?	<ul> <li>Wait rate</li> <li>High school best quote</li> <li>Special admission strategies of universities</li> <li>Other:</li> </ul>
24. a) Which is the size of municipality where you mainly grew up?	<ul> <li>Rural district (up to 5,000 inhabitants)</li> <li>Small town (&gt;5,000 to 20,000 inhabitants)</li> <li>Medium-sized town (&gt;20,000 to 100,000 inhabitants)</li> <li>Large town (&gt;100,000 inhabitants)</li> </ul>
b) Would you classify your personal background as predominantly rural?	□ Yes □ No
25. a) Where were you born?	<ul> <li>In Germany; go to 26</li> <li>In another country; go to 25 b)</li> </ul>
b) For how many years do you live in Germany?	years
26. Where did your parents grow up?	
Your <u>father:</u>	<ul><li>Mainly in Germany</li><li>Mainly in another country</li></ul>

Your <u>mother:</u>

- □ Mainly in Germany
- □ Mainly in another country

# Thank you!