

## INTRODUCTION

Each generation grapples with challenges and opportunities that are both inherited and uniquely new. Pediatrics, at the close of the 20th century, was no different. The pediatric community embraced the challenge of providing optimal health care to all infants, children, adolescents, and young adults by addressing the educational needs of all providers of pediatric health care. Through The Future of Pediatric Education II (FOPE II) Project, the opportunity was presented to evaluate the current state of pediatric education and to make recommendations for the future.

The FOPE II Project was a 3-year, grant-funded initiative, and a Project of the entire pediatric community. The 32 pediatrician leaders who came together under the aegis of the FOPE II Project used as their foundation the report of the first FOPE Task Force (1978). There were 3 overarching goals:

- To evaluate the 1978 Report with respect to its relevancy to the education of pediatricians and others providing health care to children in the 21st century.
- To provide direction for the improvement of pediatric education, with special emphasis on workforce requirements, new instructional methodologies, and the financing of pediatric education.
- To recommend essential changes in the educational process to meet the current and future health care needs of all infants, children, adolescents, and young adults.

To achieve these goals, 5 topic-specific Workgroups were formed:

- The Pediatric Generalists of the Future Workgroup
- The Pediatric Subspecialists of the Future Workgroup
- The Pediatric Workforce Workgroup
- The Financing of Pediatric Education Workgroup
- The Education of the Pediatrician Workgroup

Each of these 5-member Workgroups labored to address a unique set of objectives. In so doing, they conducted surveys; interviewed numerous pediatricians; obtained input from other providers of child health care; contacted medical student and resident physician groups, as well as many organizations of providers and users of pediatric health care; sent informal questionnaires to leaders in the generalist, subspecialist, and academic communities; made presentations at the meetings of pediatric organizations, including the pediatric sections of multispecialty organizations; and achieved other initiatives both large and small. The results of the input described above; coupled with Workgroup members' research and deliberations, are the 5 separate reports that are collected in this supplement.

The authors of each report have acknowledged those individuals who specifically contributed their time and expertise to their Workgroup. As the Project drew to a close, Ethan A. Jewett, MA, joined the management team. Each of the individual reports has benefited from his subtle touches and his characteristic commitment to quality. Eileen Hopkins Schoen, also a member of the staff of the American Academy of Pediatrics, devoted considerable and timely assistance to the development of this supplement.

The 5 FOPE II Workgroups functioned under the auspices of the FOPE II Task Force. The chair and vice chair of each Workgroup also served as a member of the FOPE II Task Force. The essence of each Workgroup report and the salient recommendations generated by each Workgroup were published in the January 2000 supplement to *Pediatrics* as the final Task Force Report entitled "The Future of Pediatric Education II: Organizing Pediatric Education to Meet the Needs of Infants, Children, Adolescents, and Young Adults in the 21st Century—A Collaborative Project of the Pediatric Community."<sup>1</sup>

It is the intent of this second FOPE II supplement to bring forth the copious detail, data, and information that each Workgroup brought to the Task Force and its final report. The reports of the 5 FOPE II Workgroups take a more in-depth look at a host of issues relating to primary and subspecialty care, the role and education of nonpediatrician providers of child health care, the financing of pediatric education, the threats to pediatric research, the status of the pediatric

workforce, the lifelong acquisition of knowledge, and other topics. Collectively, these reports confirm the best aspects of pediatric education, and sound a call to action for areas that merit attention, as pediatrics moves forward to provide the best health care to infants, children, adolescents, and young adults.

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#### REFERENCE

1. *Pediatrics*. 2000;105(suppl):161–212. It is also available on the Project web site at: [www.aap.org/profed/fope1.htm](http://www.aap.org/profed/fope1.htm)

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