



Road map for family medicine's journey to research

Vivian R. Ramsden, RN, MSC

In reflecting on research being undertaken and completed within the context of family medicine, I reviewed words identified in the *Standards of Accreditation for the Residency Training Programs*,¹ which included enquiry, biostatistics, critical appraisal, and biomedical ethics but not experiential learning about the process of research and evaluation. Research and evaluation is something that we clinicians do every day in a variety of settings and in a variety of ways.

Research is defined as a systematic investigation into and study of materials, sources, and so on, in order to establish facts and reach new conclusions. Evaluation is defined as finding or stating the number or amount of; appraising; assessing.²

I am not sure how the complexity of research as we now think of it came to be. Evidence-based algorithms, clinical practice guidelines, and clinical pathways are generally based on Level 1A evidence,³ which rarely takes into account the connections between human experience, life events, human relationships, health, and ill health.⁴ McWhinney⁴ talks of human science being interactive and framed within the concept of dialogue, which he goes on to describe in terms of the hermeneutic process. He suggests that perhaps family medicine's greatest contribution over the next two decades would be to seek the kind of understanding that increases wisdom.

How have we done so far?

The Section of Researchers of the College of Family Physicians of Canada was founded in May 1995; its goals are to:

- identify, prioritize, and promote family medicine research themes;
- expand research capacity for family medicine research;
- identify and build resources for family medicine research;
- increase collaboration and communication among researchers;
- change attitudes toward family medicine research; and
- facilitate the dissemination of family medicine research findings into clinical practice.⁵

The Section of Researchers has an Executive Committee built on regional representation; its Chair is appointed by the Board of the College of Family Physicians of Canada. The Section of Researchers, which is interdisciplinary, meets annually.⁵

Often in the past, the venue has been the Annual Meeting of North American Primary Care Research Group (NAPCRG); however, we are hoping to extend the opportunity of learning about the process and outcomes of research to the broader audience at the Family Medicine Forum held each year. In addition to these meetings, the Research

Coordinators and Directors of the 16 departments of family medicine in Canada get together at least once a year.

Many of the research projects undertaken to date have been either quantitative or qualitative. In an editorial (page 1189), Dr Rosser highlights some of the research being done in family medicine that has affected practice.

What can you do to support research in family medicine?

Have you thought about nominating an outstanding physician for one of the annual awards of the Section of Researchers? Nomination forms for the Family Medicine Researcher of the Year and for the Outstanding Family Medicine Research Article (quantitative and qualitative designs) can be found on the College's website at www.cfpc.ca.

Have you thought of attending the Section of Researchers Awards Banquet being planned for the Family Medicine Forum? Have you thought about acting as mentor to an undergraduate student or resident who is interested in learning more about research? Have you thought about systematically answering a question you have if an answer is not readily available?

Learning and future action

The curriculum within the departments of family medicine needs to support and engage in the experiential learning required to understand the

process of undertaking systematic approaches to answering questions. Knowledge about the steps in the process does not translate into understanding how to engage in the process. Engaging in research is no less complex than attempting to change practice, and it requires both the science and the art of medicine woven together with innovation. If we look to the future, it will be with an expectation that knowledge, understanding, and experience of the process and subsequent implications will be a prerequisite and not an afterthought for engaging in research.

The wisdom within the departments of family medicine in this vast country is nothing less than awesome. By collaborating with patients, members of our own interdisciplinary teams, and externally with various interdisciplinary teams at a national level, we have the ability to transform the health care system, practice, and ourselves.

Ms Ramsden is Coordinator and Director of the Research Division in the Department of Family Medicine at the University of Saskatchewan in Saskatoon.

References

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