

Fiftieth anniversary of NAPCRG

Canadian contributions and personal reflections

Reflections on Canadian contributions to NAPCRG

The North American Primary Care Research Group (NAPCRG, pronounced Nap-crag) is celebrating its 50th anniversary in 2022. The occasion provides an opportunity to reflect on the Canadian perspective of this binational (Canadian and American) organization and the contributions made by Canadian members to its growth and sustainability.¹

The information provided here was derived from the membership database housed at NAPCRG and the Society of Teachers of Family Medicine headquarters² in Leawood, Kan. Currently, there are 928 NAPCRG members, and of these, 25% (231 of 928) are Canadian. Although this organization was created by physicians, over the years others (epidemiologists, nurses, social workers, etc) have become engaged in primary care or family medicine research and, subsequently, with NAPCRG. Of the Canadian membership, physician researchers make up 30% (69 of 231), while other researchers make up 26% (60 of 231); fellows, residents, and students make up 34% (78 of 231); and patient partners and community members make up 10% (24 of 231). Being a participatory researcher, I was thrilled and awed by the fact that Canadian patient partners and community members make up 59% (24 of 41) of all patient partners and community members currently holding NAPCRG membership.

Canadians have contributed greatly to the leadership of NAPCRG over these 50 years. Nine of the 22 NAPCRG presidents have originated from Canada. I would like to take this opportunity to recognize these former NAPCRG presidents for their many contributions to the organization: Drs Carol Herbert (1987 to 1989), Walter W. Rosser (1991 to 1993), Ann C. Macaulay (1999 to 2001), Moira Stewart (2003 to 2005), Jeannie Haggerty (2009 to 2011), Rick Glazier (2013 to 2015), Bill Hogg (2016 to 2017), Judith Belle Brown (2018 to 2019), and Gillian Bartlett-Esqilant (2020 to 2021). It is interesting to note that among the 9 Canadian presidents, 5 were physicians and 4 were nonphysician researchers. This representation is different from the American profile, which has not had a nonphysician researcher hold that office.

If these Canadian numbers seem low to you, consider where we started, where we are now, and where we could go. The NAPCRG 50th Annual Meeting will be an in-person event in Phoenix, Ariz, from November 18 to 22, 2022. Invite your colleagues and students to attend the NAPCRG meeting with you this fall!

—Vivian R. Ramsden RN PhD MS MCFP(Hon)
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Reflections on my journey within NAPCRG

During my numerous trips to Chennai, India, I learned about participatory research—broadly, research that actively involves the priorities of the communities that are partners in the research process—and commenced my PhD in interdisciplinary studies at the University of Saskatchewan in Saskatoon in 1999, where I framed my PhD dissertation within a Freirean model.¹

While reading about participatory and responsible research about 20 years ago, I learned that the North American Primary Care Research Group (NAPCRG) had put forward the idea of responsible research² during Dr Ann C. Macaulay's tenure as the organization's president, and that it was subsequently approved by the board of directors (which has since been updated³). I had been seeking researchers and clinicians who understood and used participatory approaches to community-based research, clinical practice, and evaluation. Also, I had been following Dr Macaulay's work since reading about responsible research and was very interested in learning more, so I registered to attend the 2003 NAPCRG Annual Meeting, which was held in Banff, Alta. By that time, I had become involved in the College of Family Physicians of Canada's Section of Researchers, so I had met several physician or clinician researchers previously who would also be attending.

In Banff, Dr Macaulay presented a workshop on participatory research. I was awed by the fact that the work that I had been engaged in was parallel to the work Dr Macaulay was describing. As a result of that NAPCRG Annual Meeting, I became involved in the organization. I joined their special interest group on participatory research and soon became a member of the Nominations Committee, where I met many people, including Dr Norman Oliver. With his guidance and support, I became Chair of the Nominations Committee (now the Governance Committee) and, with the support of Dr Jack Westfall and patient partners Maret Felzien and Kirk Kelly, was elected Vice President of NAPCRG, which is the position I currently hold.

I have continued to attend NAPCRG Annual Meetings because of the people there who speak the same language, "kindred spirits"⁴ who have embraced the fact that patients and community members are experts in their own lived experience. Although I have built research capacity in Saskatchewan and in Canada,

NAPCRG has always been my research home. I have had the opportunity to watch community members and graduate students whom I have worked with and supervised present their research findings at NAPCRG Annual Meetings. It is awe inspiring, both for them and for me.

—Vivian R. Ramsden RN PhD MS MCFP(Hon)

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Reflections on our journey within NAPCRG

Our most humbling and gratifying experience was when we were invited to facilitate a panel of Indigenous individuals from Canada and the United States speaking about their experiences with research. This panel was a first. It was opened and closed by Elder Amelia Tekwatonti McGregor from the Kahnawake Mohawk Territory in Quebec. In addition to 2 of us (S.B. and N.R.), the other panelists were Dr Ann C. Macaulay, Morgan Kahentonni Phillips, Dr Alex K. Adams, and Scott M. Krueger. This plenary presentation, entitled "Indigenous health and wellness: transformed with community-chosen research and interventions," was presented at the 45th North American Primary Care Research Group (NAPCRG) Annual Meeting in Montréal, Que, on November 19, 2017.

We became very interested in the Patient and Clinical Engagement (PaCE) Program,¹ becoming the first Canadian nonphysician (or community) dyad as a result. Since that time, we have been engaged in multiple PaCE initiatives, including participating in the video that was developed and produced by PaCE.¹ As mentioned during the plenary presentation, we (S.B. and N.R.) expressed hope for a traditional birth, which happened for the first time in decades in February 2022 at Sturgeon Lake First Nation, Sask (Figure 1).²

Birth is a sacred rite that reminds us about the delicate balance that exists between spiritual and physical worlds that is captured in our language. Our knowledge system connects us to Creator, all Creation and Mother Earth.^{2,3} (Norma Rabbitskin)

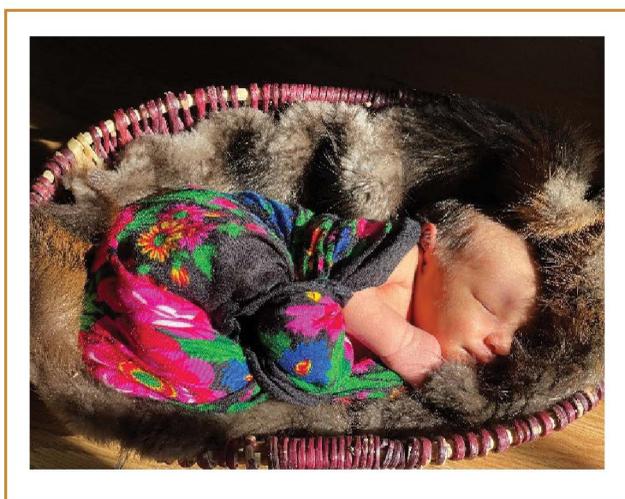
—Shirley Bighead

—Norma Rabbitskin RN BN

Sturgeon Lake First Nation, Sask

—Vivian R. Ramsden RN PhD MS MCFP(Hon)

Figure 1. First traditional birth in decades: Norma Rabbitskin's grandson.



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Celebrate with NAPCRG

I am honoured to have been able to contribute to the work of NAPCRG in a variety of ways for more than 20 years as well as to facilitate linkages with the Section of Researchers at the College of Family Physicians of Canada.

If you are not already a member of NAPCRG, I invite you to consider becoming one and help us celebrate our 50th anniversary in Phoenix, Ariz, from November 18 to 22, 2022.

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Competing interests

None declared

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for NAPCRG's 50th
Annual Meeting.

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