

ARTICLE

Introduction

Transforming Family Medicine Research: Strategic Planning, Summits, and a Special Issue

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A New Era in Family Medicine Research

In recent years, the landscape of family medicine research has undergone significant transformation. The COVID-19 pandemic has underscored the need for robust primary care systems, and Family Medicine, with its emphasis on comprehensive and continuous care that is built on the trust within the patient-provider relationship, is at the forefront. In this special issue, we reflect on the journey of the Association of Departments of Family Medicine (ADFM) and the North American Primary Care Research Group (NAPCRG) in developing a strategic plan to elevate family medicine research to new heights.

The 3 S's: A Strategic Plan, a Summit and a Special Issue

In 2020, ADFM grew their partnership with NAPCRG, building off of the successful Building Research Capacity (BRC) initiative.^{1,2} With increased bandwidth and a leadership transition, the ADFM Research Development Committee reflected on a

new path forward through a listening tour with key partners in family medicine.³

Concerns related to inactivity were articulated, along with compelling reasons why now is an opportune time to prioritize expanding research in family medicine. These included: 1) ongoing issues in filling research pathways and fellowships that were not being adequately addressed; 2) the presence of exceptional leaders and partners positioned to make a significant impact; and 3) strong engagement across the entire discipline of family medicine.⁴

The culmination of these efforts was a successful Family Medicine Research Summit held October 30, 2023, where over 140 attendees gathered to strategize an action plan for meeting the strategic goals.⁵ The final iteration of the National Research Strategy for Family Medicine: 2024 to 2030 is shown in Figure 1 below and highlights these 3 priority areas:

1. Pathways and Mentorship Programming: Creating a robust system to mentor and guide emerging researchers in family medicine.
2. Funding and Advocacy Efforts: Ensuring sufficient resources and support for groundbreaking research in the field.
3. Infrastructure Development: Building the necessary infrastructure to facilitate cutting-edge research initiatives.

Key Themes in Family Medicine Research: Insights from the Special Issue

This special issue of *JABFM* is filled with thought-provoking articles that delve into the strategic advancements and ongoing challenges in family medicine research.

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Figure 1. National research strategy for family medicine, 2024 to 2030.

National Research Strategy for Family Medicine: 2024-2030		
VISION <i>Family Medicine research is whole-person, family, and community centered and improves health by enhancing health promotion, improving care for chronic diseases and advancing healthcare delivery, while including cross-cutting themes of health equity, technology, and team science</i>		
STRATEGIC PRIORITIES		
Pathways / Mentorship 	Funding & Advocacy 	Infrastructure 
GOALS		
Grow the family medicine research workforce by expanding pathways and strengthening mentorship	Increase funding for family medicine research and advocate for enhanced health policy and support	Build a national infrastructure for organizing and optimizing family medicine research opportunities
OBJECTIVES		
A1: Maintain, promote and contribute to a database of family medicine research programs to connect learners to research training opportunities A2: Enhance and grow pathways to participate in family medicine research for <ul style="list-style-type: none"> • medical students (e.g. expanding MD/PhD programs) • residents (e.g. creating additional degree programs and fellowships) • and family physicians (e.g. offering training opportunities) A3: Create structured mentorship experiences inside and outside home institutions A4: Normalize a team science approach by developing cross-disciplinary partnerships with PhDs, interprofessional groups, and community based organizations A5: Promote a "culture of curiosity" among medical students and family medicine residency programs to ensure the workforce is well-equipped to critically analyze and apply evidence	B1: Define and promote the value of family medicine research broadly B2: Align advocacy efforts with the 2021 NASEM report and forthcoming action plan to build momentum and increase support for family medicine research, including the creation of an Office of Primary Care Research B3: Continue advocacy to increase funding for AHRQ National Center for Excellence in Primary Care Research and support efforts to direct other sources of funding to primary care research (e.g. foundations, payers, venture capital and other federal agencies such as: PCORI, CDC, and HRSA) B4: Advocate for increased funding for Departments of Family Medicine from institutional leadership B5: Identify and promote promising practices for chairs to support and fund research participation within their departments and institutions	C1: Create partnerships and align the discipline with future advancements in healthcare delivery to be on the forefront of new research opportunities and changes in healthcare policy C2: Utilize a repository of clinical data to answer key questions in primary care C3: Increase accessible and integrated research models that produce clinically applicable research and evidence-base (e.g. optimize PBRNs, communities of practice, and consider other types of networks such as geographic and content networks) C4: Leverage Clinical and Translational Science Awards (CTSA) networks and create Centers of Excellence to increase family medicine research within institutions C5: Design and utilize distinctive methodology such as pragmatic trials, participatory methods, community-based research, translational science, implementation research and dissemination, big data analytics and machine learning

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Pathways and Mentorship

Bennett et al. highlight the urgent need for robust pathways to cultivate physician-scientists, urging significant investments in training and long-term support. Ringwald et al. emphasize the central role of trainees in the success of the strategic plan, detailing how mentorship programs and funding initiatives are crucial for nurturing the next generation of researchers. Meanwhile, Seidenberg et al. advocate for building a culture of curiosity within family medicine, proposing both top-down and grassroots approaches to foster an environment where practice-based research becomes a norm. Importantly, Wheat and Rodríguez address the importance of diversity, equity, and inclusion (DEI) in research, presenting models to expand the family medicine research workforce and enhance mentorship for underrepresented groups.³

Funding and Advocacy

The articles also shed light on the critical areas of funding and advocacy needed to sustain and advance family medicine research. Newton et al. discuss the pivotal role family medicine researchers play in evaluating and reporting on primary care payment and delivery system reforms, highlighting the necessity of adequate funding and advocacy efforts to support these initiatives. As a means of advocacy, Seehusen et al. explore the

current and future challenges of publishing family medicine research, underscoring the need for systemic changes in academic publishing to support the dissemination of high-quality research.

Infrastructure

Infrastructure development is another key theme, with several articles highlighting innovative approaches and tools to enhance research capacity. Parente et al. discuss leveraging the NIH's All of Us Research Program to use large datasets for primary care research, while Phillips and Bazemore illustrate how transforming EHR data into research-ready datasets can unlock significant potential for primary care innovation. Nease et al. explore the role of Practice-Based Research Networks (PBRNs) in generating evidence from community-based practices, emphasizing the need for ongoing support and infrastructure development. Hoekzema and Newton examine the impact of residency accreditation requirements on scholarly activity, demonstrating how strategic enhancements in residency training can boost research productivity. Collectively, these articles showcase how strategic investments in data infrastructure, community engagement, and innovative tools can drive significant advancements in family medicine research.

The NIH is Listening

Pandhi et al. describe the benefits of leveraging the NIH federally funded Clinical and Translational Science and Clinical and Translational Research Awards (CTSAs and IDeA CTR) programs. These mechanisms have become even more critical, as the NIH has recently launched the Communities Advancing Research Equity for Health – or CARE for Health initiative,⁶ a \$30 million dollar pilot program focused on testing the feasibility of a National Primary Care Research Network that builds on infrastructure within primary care, as well as CTSAs and IDeA CTR programs. The goal of this network is to address common health issues such as obesity, mental health, perinatal care, and cancer screening, which fits exceedingly well into the scope of our work in family medicine.⁷ This initiative not only underscores the growing recognition of primary care's pivotal role in health care but also presents an unprecedented opportunity for family medicine to lead the charge in transforming national health outcomes. We congratulate the first three awardee Institutions: Oregon Health and Science University (OHSU), University of Wisconsin-Madison (UW) and West Virginia University (WVU).

Shaping the Future of Family Medicine Research

The strategic plan for family medicine research, as outlined in this special issue, represents a collective commitment to advancing the discipline. By fostering collaboration, securing funding, and building infrastructure, we are paving the way for groundbreaking research that will transform primary care and improve patient outcomes. We invite you to engage with these articles and join us in this

exciting journey toward a brighter future for family medicine research.

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To see this article online, please go to: <http://jabfm.org/content/37/S2/S27.full>.

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