INTERNATIONAL FEDERATION OF PRIMARY CARE RESEARCH NETWORKS

Under The Task Force on Reseach of WONCA



NEWSLETTER



IFPCRN

An international forum for Primary Care Investigators

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From the IFPCRN Chair

JOIN YOUR COLLEAGUES AT THE IFPCRN
ACTIVITIES AT THE 17TH WONCA WORLD
CONFERENCE OF FAMILY DOCTORS IN ORLANDO

John W. Beasley M.D.



The IFPCRN has several activities planned for the upcoming Wonca Meeting. We hope you will join us!

We will have a booth! The space has been donated to us by Wonca.. It will be #3064 near the other Wonca booths. There will be a chance to meet with others interested in Network Research You can also bring materials from your network to display there. Please plan to drop by!



Orange County Convention Center Orlado, Florida USA

Formal IFPCRN activities

during 17th WONCA World Conference

Tuesday, 12 October, 3 PM
IFPCRN Business meeting
Immediately following Wonca Working
Party on Research
Room w232a

Thursday, 14 October, 10:30 AM
IFPCRN Workshop on Developing Primary
Care Research Networks
#4115, Room w340a

Agenda for IFPCRN Business Meeting

- 1. Bylaws, steering committee
- 2. Election of Chair and Vice-Chair
- 3. Clarification of relationship to WONCA
- 4. Consider name change to «International Federation of Practice-based Research Networks» (IFPBRN)
- 5. Development of financial and staff support for the IFPCRN
- 6. Explore ways to stimulate mentoring between individuals, networks, institutions and countries
- 7. Develop plans for one multinational project

Note: If you have additional agenda items for the business meeting, please email them to John Beasley john.beasley@fammed.wisc.edu.

Contact Information:

If you wish to contact me at the meeting, my cell phone is 1-608-469-5635. We will have space at the booth for members to list their contact information.

Related Activity from The Brisbane Initiative for Education for Leadership in Primary Care Research

Wednesday, 13 October. 9:30 AM. The Special Symposium of The Brisbane Initiative.

Room w330c.

Wednesday, 13 October, also at 9:30 AM.

The Working Party for follow-up on

The Kingston conference

Room w330d.

REPORT ON IFPCRN MEETING AT NAPCRG: OCTOBER, 2003

There was an informal breakfast meeting of IFPCRN members who were at the meeting of the North American Primary Care Research Group in Banff, Canada in October 27th, 2003.

The members attending included: Francisco Gomez-Clavelina (Mexico) John W. Beasley, Jennifer Lochner, Stephanie Tache, Diane Madlon Kay and Richard Haddy (USA) Chris van Weel (The Netherlands) Walt Rosser and Michelle Greiver (Canada) Sunwoo Sung and Jungkwon Lee (South Korea).



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The Fairmont Springs Hotel, Banff, Canada

Because the full membership did not have an opportunity to attend, no policy decisions were made, but we did conduct some interim business. Due to email problems some interested members did not receive advance notice of the meeting and were unable to attend.

The agenda was:

- 1. Introductions
- 2. Review of IFPCRN activities to date
- 3. Planning for 2004 Meeting with WONCA and the AAFP in Orlando Florida, USA
- 4. Ideas to improve communications
- 5. Publication of Research

Discussion and action taken:

I. The IFPCRN will plan the following activities at the October 2004 WONCA Meeting:

- A. The IFPCRN business meeting will probably be held on Wednesday, 12 October.
- B. IFPCRN should host a 1/2 day workshop on «Developing and Running a Primary Care Research Network». (Addendum December 2003): Chris van Weel has suggested that the program should contain

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Chris van Weel, John W. Beasley and Francisco J. Gomez-Clavelina

examples of the use of empirical data in research, the cooperation between researchers and practitioners, and generation of research questions from practice and the translation of study findings back into practice.)

C. Plan for a booth.

D. Offer to help moderate a 1/2 to 1 day track for PCRN research sessions

E. Solicit posters on PCRN research projects and methods. Try to group these posters in one area.

II. Communication and involvement issues:

A. There have been some problems with the listserver. John Beasley will work with Wes Fabb to make sure that the list is fully up to date.

B. The Web Site has not been successfully transitioned to the WONCA website. Chris van Weel will discuss the needs with the WONCA Executive next week. (Note: As of September, 2004, it has been decided to continue the website as a MSN website:

> http://groups.msn.com/IFPCRN There will be a link from http://www.globalfamilydoctor.com

C. All members are busy and it is hard to get attention and involvement. Francisco needs more material for the newsletter and we need responses to solicitations for newsletter material. How can we become a higher priority for our members?

III. Publication issues:

Although we need more primary care journals, this is not the time (nor do we have the resources). Many of the existing journals (Asia-Pacific, European Jr. of GP) are struggling. There would be problems with getting listed in Index Medicus, finances for staff support, and other problems. John Beasley will contact Mark Rivo, the editor of WONCA news, to see about a section for the IFPCRN within WONCA newsletter. Chris van Weel will again talk with WONCA Executive to help reduce page limitations

IV. Other issues discussed:

A. Lobbing governments. There was a brief discussion of the need to work with other organizations to increase governmental support for primary care research in all countries.

B. The Brisbane Initiative For International Education For Primary Care Research. Chris van Weel presented information on the progress of the Brisbane Initiative. They are planning a workshop at Wonca.

V:The IFPCRN needs the following help in the next few months:

A. Francisco needs help to develop and maintain our web site.

B. We need a person to help develop a draft set of bylaws.

C. Francisco would welcome help on the newsletter — both from somebody to help edit sections of it AND, equally importantly to contribute news about network status.

IFPCRN Newsletter will receive the scientific contributions of every IFPCRN and WONCA members, as well as comments, letters, PCRNs' reports and official announcements of scientific meetings.

Francisco J. Gómez-Clavelina Editor

E-mail: ifpcrnnews@msn.com Website http://groups.msn.com/IFPCRN

Publications

IFPCRN Members Publish First International Survey of Status of Family Medicine Research

John W. Beasley M.D.

The British journal, *Primary Health Care Re* **L** search and Development, has accepted the paper: «The Contribution of Family Doctors to Primary Care Research: A Global Perspective from the International Federation of Primary Care Research Networks (IFPCRN)» for publication. The authors, representing key informants from 10 different countries and regions were: John W. Beasley, MD; (US), Susan M. Dovey, MPH, PhD; (New Zealand), Leon Neville Geffen, MBChB; (South Africa), Francisco J. Gómez-Clavelina, MD; (Mexico), Cynthia L. Haq, MD; (US), Victor Inem, MBBS, MPH; (Nigeria) Cindy L.K. Lam, MBBS, MD; (Hong Kong), Azhar Nugmanova, MD; (Kazakhstan) Waris Qidwai, MBBS; (Pakistan) Danica Rotar Pavlic, MD, MSc; Slovenia) Chris van Weel, MD, PhD; (The Netherlands).

This group addressed four questions related to the status of research in academic Family Medicine, the status of Practice Based Research Networks, the Level of Productivity of Family Doctor Researchers and the prospects for the future of Family Practice research. The group found that the contributions of Family Doctors to the global primary care research enterprise, while progressing in most areas of the world, still falls short of that which is needed if we are to optimize the health of our populations. This is true even in countries which are relatively rich in resources; the shortfall is even more notable in countries where resources are more limited.

The group noted that there are multiple challenges that Family Doctors will have to contend with in order to make their full contribution to primary care research. These include:

- Poor articulation of scope of primary care research
- Misallocation of resources (10/90 gap)
- Funding sources tend to fund disease specific research and focus on biomedical technologies
- Research seldom leads to biomedical breackthrough or financial gain and is thus undervalued

- Historical focus on research about rather than within primary care
- Historical role of Family Doctors did not include research
- Lack of culture and/or expertise among many Family Doctor academicians
- Lack of Formal training programs (or expectations) – training is mainly directed at vocation skills
- Difficulties involving community Family
 Doctors in research despite necessity of
 conducting research involving those physicians
- Frequent «top down» approach
- Few venues for publication

At the same time, there has been considerable progress in all regions of the world. This progress includes:

- Recognized need for research that makes a difference in care
- Recognition that research outside of primary care cannot alone provide a sufficient knowledge base for primary care
- Increased national and international funding both for infrastructure and for project grants
- Activation of Family Doctors Internationally (e.g. Brisbane Initiative, Kingston Conference, IFPCRN)
- Activation of national Family Doctor groups (e.g. AAFP)
- Formation of Networks of Networks (e.g. US FPBRN, UK FBCRN, IFPCRN)
- Beginning of international collaborative studies
- Increasing numbers and extent of formal research training programs in nearly all countries
- Involvement of community Family Doctors in supporting academic research and through PBRNs
- New technologies (e.g. Satellite, internet)

The group concluded that a critical mass of researchers and resources is a essential element for primary care research development and international collaboration is one way to promote further development.

Visit the IFPCRN Website http://groups.msn.com/IFPCRN

Publications and Links

RESULTS OF KINGSTON CONFERENCE PUBLISHED BY ANNALS OF FAMILY MEDICINE

John W. Beasley M.D. Francisco J. Gomez-Clavelina M.D.

Under the title Improving Health Globally: The Necessity of Family Medicine Research, 74 primary care experts from 34 countries met between March 8 and 11, 2003, at Queens University in Kingston, Ontario, Canada. The results of this meeting have now been published: *Walter W. Rosser and Chris van Weel* Research in Family/General Practice is Essential for Improving Health Globally. Ann Fam Med 2004; 2:S2-S4.



Chris van Weel and Walter W. Rosser Improving Health Care Globally: A Critical Review of the Necessity of Family Medicine Research and Recommendations to Build Research Capacity Ann Fam Med 2004; 2: S5-S16.

Both articles are available through the Annals of Family Medicine Web Site:



BRISBANE INITIATIVE GROUP DEVELOPS STRATEGIES FOR PROMOTING ADVANCED RESEARCH EDUCATION

The Brisbane Initiative¹: International Education for Leadership in Primary Care Research met in Washington, DC, in March, 2004. Specific plans for the coming year include the development of fellowships and visiting traineeships, formal leadership

programs, the development of educational resources, the development of expert groups and the creation of international "think tanks" for primary care research. To facilitate the development, the group will work to organize an advisory group which can help us gain funding for a secretariat. Fur further information, contact the chair. Chris van Weel at

C.vanWeel@HAG.umcn.nl

 Check background about Brisbane Initiative, go to: Brisbane Initiative. InternationalAdvanced Education for Primary Care Research. IFPCRN Newsletter 2002;1(1): 4-6. Download this Newsletter Issue from IFPCRN Website: http://groups.msn.com/IFPCRN

Distance interactions

Internet Proves Successful Communication Among Investigators

Francisco J. Gomez-Clavelina M.D. John W. Beasley M.D.

Conducting primary care research across national boundaries can be a most difficult undertaking. While greatly facilitated by the use of email and internet resources, the issues of Human Subjects (Ethics) Committee reviews in different cultures and languages can present daunting problems, and funding is often more difficult to obtain for projects that cross national boundaries.

One approach, albeit a limited one, to overcoming these barriers is demonstrated by the multinational study cited elsewhere in this newsletter. In this study there were no human subjects issues as all the key informants were colleagues in the project and participated in writing the paper. And, of course there was neither possibility of coercion into participation nor any risk to any of the co-authors.

It might even be said that what was done for this study was not even "research" and it was certainly not clinical or health services research. However, the results of our inquiry did provide a useful overview of the status of research development around the globe. There are other topics that could be addressed using the same methods. These might include exploratory views of the perception of the role of Family Doctors in the health systems, how they perceive themselves in

these roles and perhaps the chief ethical issues facing Family Doctors to give a few examples. The method does have the great advantages of being very inexpensive, open to anybody in any country with internet access and relatively easy to conduct. It cannot, of course be applied either to inquiry where other subjects are contacted or experimental interventions are done (unless Human Subjects Committee Approval is sought). Despite the limitations, further use of this method should provide some useful overviews of health care and make possible limited international comparisons.

On the other hand, the Academy of Family Medicine Professors of Mexico (AMPMF) used the Internet for a conference at distance during the IV National and II International Colloquy of Professors-Investigators in Family Medicine, April 22-23, 2004.

Two hours of communication on real time video-sound were enough for two lectures: «Family Medicine and Medical student education» and «A Method For Collaboration in International Primary Care Research: Results From an Explorative Study». The first by Cindy Haq, Professor of Family Medicine and Population Health Sciences and Director of International Health, University of Wisconsin Medical School and the second by John W. Beasley, Professor Emeritus, University of Wisconsin, Department of Family Medicine (Madison USA) and Chair, IFPCRN. Cesar Duque Gómez, Junior Medical Student and Cristina M. Delgadillo, Medical Student helped with translation at Madison.

Francisco J. Gómez-Clavelina, Family Medicine Professor of the National Autonomous University of Mexico (UNAM), president of AMPMFand ViceChair of IFPCRN was the contact in Mexico. After each lecture, a rich discussion of the subjects was held between the speakers and the attendees to the Colloquy at National Autonomous University of Mexico (UNAM), Mexico City. This Colloquy and internet communication was the beginning of more academic meetings to review the UNAM's training programs for medicine students and family medicine specialists as well.

The Family Medicine Department of UNAM and AMPMF will test <u>Internet 2</u>, this is a new technology for communications which can open new horizons for academic and educative aims.

The AMPMF an The Family Medicine Department of UNAM offer a special «thank you» to John Beasley, Cindy Haq and Janet Reschke for their effort to implement the necessary transmition to the Conference from Madison, Wisconsin USA. In Mexico, the members of the staff were: Francisco J. Gómez Clavelina, Irma Jiménez-Galván y José Antonio Villarreal Muñoz.

IFPCRN Continues to Grow

As of September, 2004 the IFPCRN has 95 Members representing 32 Networks in 25 Countries!

The countries represented in IFCRN membership include:

Australia, Austria, Belgium, Canada, China, Fiji Islands, Ireland, Israel, Lebanon, Malaysia, Mexico, Netherlands, Nigeria, Pakistan, Portugal, Romania, Serbia and Montenegro, Sierra Leone, Singapore, South Africa, South Korea, Spain, Turkey, the U.K. and the U.S.

As always, our thanks to Mary Stone from the University of Wisconsin in the US for helping us maintain our database!

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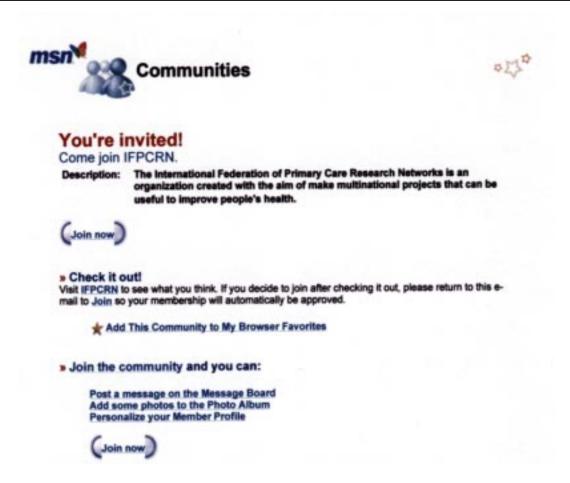
This is an interactive issue!

You can read this Newsletter working with links.

Links let you jump to other locations in the same document

or to Web sites

- Navigate to CONTENTS section on page one (or click on the word CONTENTS)
- Select the article that you want to read, the pointer be comes a hand with a extended finger
- ♦ Click on it. You could read the selected article
- ♦ Click on the article's title and go back to CONTENTS
- Click on URLs or icons and you will access to the selected Web site using your Internet browser



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International Federation of Primary Care Research Networks



Organized under WONCA
The World Organization of Family Doctors
Membership Registration

	Type of Membership: li	ndividual	Network	
If network membership, What is the name of that network?				
What is your net	work role (e.g. director, execut	ive, member)	?	
Your name				
	Address			
	State/Province			
Postal/Zip Code	Country			
Phone	Fax		-	
E-mail address_				
Current researc	h interests and projects (pers	onal and/or	network projects)	
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Comments?				
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IFPCRN Website: http://groups.msn.com/IFPCRN

Note: You can download this membership registration from IFPCRN Website