EDITORIAL

Under way to academic primary health care

Research in primary care is not customary [1] although in the Nordic countries there have been efforts to enhance primary care research [2]. Special challenges are associated with research within general practice and primary care. Research has traditionally not promoted the general practitioner’s (GP) or other professionals’ careers in primary care, thus demotivating research [3]. Further, primary care is usually not well connected to universities or other research units. Therefore, research training, support, and supervision may not be easily available. Although developmental projects are often appreciated in primary care, rigorous research projects are not commonly accepted in the busy working culture.

However, there are several potentialities in primary care that could make research highly attractive [4]. Primary care has a wide range of unselected patients – from those with mild symptoms and early stages of diseases to those with chronic illnesses and multimorbidities. We have those “normal” patients on whom the common care guidelines should be implemented [5]. The working approach in primary care is comprehensive, coordinated, promoting continuity and it is simultaneously patient-centred and population-oriented. These approaches are markedly different from specialized care and should be highlighted. Consequently, there are multitudes of original research topics and representative materials available. Fortunately, the internet has brought researchers and supervisors closer to each other making networking easier. However, we do need a research culture, funding, and good networks of senior researchers in primary care to make it academic and more valued.

At the University of Helsinki we have worked for several years with a multilevel strategy to promote primary care research. In 2002 the University of Helsinki entered into contracts with several communities to build a network, the Academic Health Center. The idea is to support and enable multidisciplinary research within primary health, combined with support from the university. The researchers identify research projects within their own area in primary care.

A 12-module research course for professionals working in primary care was initiated in 2007, the aims being to prepare researchers to understand the methodology of clinical epidemiology and scientific thinking, to develop their own research plans, and to provide them with peer support. The courses are multidisciplinary including nurses, nutritionists, physiotherapists, and dentists in addition to primary care physicians. This has enriched the discussions and interactions. We also aim at identifying suitable supervisors for the participants. The ongoing course is our seventh and over 60 people have completed the course and developed their own research plans. We have also been able to help participants to get funding and grants for doing research.

Researchers in the post-doctoral phase also need support. For this group we have arranged courses supporting their continued research including topics on how to supervise PhD students, how to make a good research plan, and how to apply for funding; the courses also offer support on their road towards docentships. This network has provided us with a network of senior researchers working in primary care who are capable of supervising PhD students and having an impact on research in primary care. At the moment our primary health care department is able to give support and supervise about 40 PhD students.

Simultaneously, we have cooperated with primary health care and used it as a platform to perform randomized controlled trials. Our senior researchers have developed and tested care models that are especially suitable for primary health care including prevention of metabolic syndrome and gestational diabetes, the enhancement of self-management and self-efficacy in dementia families, exercise as rehabilitation in dementia, and psychosocial intervention for loneliness among older people. These care models, their implementation, and our network of researchers have provided visibility and recognition to research among health authorities. Further, networking with researchers in specialized care has provided academic recognition.

In Finland, the updated Healthcare Act in 2011 stated that multidisciplinary research should be a task for health centres. This, along with a higher number of researchers and good research plans within primary health care, has resulted in more funding for primary care research. At the moment we are establishing a research network in the primary health care sector.

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care sector of the metropolitan area of Finland. A research network has been emphasized to be a key factor to promote primary care research [5,6].

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References
[1] Carter YH, Hilton S. Academic general practice: No time for ivory towers. Fam Pract 2000;17:283–4.
[2] Håkansson A. Taking a doctorate in family medicine in the Nordic countries. Scand J Prim Health Care 2008;26:129–31.
[3] Liira H, Korhonen P. Kliininen tutkimus terveyskeskuksessa - esteet ja onnistumisen mahdollisuudet. [Clinical research work in the community health centre: Obstacles and chances of success]. Duodecim 2014;130:1014–18.
[4] Mäkelä M, Mattila J. Yleislääketieen tutkimus Suomessa [General practice research in Finland]. Duodecim 2014;130:1007–13.
[5] Rörtveit G. Research networks in primary care: An answer to the call for better research. Scand J Prim Health Care 2014;32:107–9.
[6] Sullivan R, Hinds A, Pitkethly M, Treeek S, Wilson P, Wyke S. Primary care research network progress in Scotland. Eur J Gen Pract 2014;20:337–42.