EDITORIAL

Improving the Quality of Research in Philippine Family Practice Part Two

The Philippine Academy of Family Physicians (PAFP) has developed and implemented several policies in its efforts to improve research in family and community medicine in the Philippines. The Publications Committee through the FFP Editorial Board is tasked to ensure the quality of published researches in the Academy. Since 2006, it has established editorial and peer review policies to guide its members generate quality research outputs for publication. Unfortunately as in many administrative and organizational change, priorities and directions also change. As a result, the continuity of implementation of the policies becomes a challenge. In addition, the quality of published articles depends on the submission from its members. Submissions usually come from residents in family medicine residency programs who mostly view research as basic compliance for certification by the PAFP rather than a serious professional work. In this situation, the FFP editorial board cannot solve the research quality problem by itself. The PAFP needs a multi-committee approach to solve this.

The PAFP Research Committee is primarily responsible for improving the research capacity as well as research output of all the members of the Academy. The strategy adapted was mainly conducting research workshops for residents of accredited departments. The committee's strategy to train research capacity of the practicing physicians, i.e. the general membership is minimal. There was an attempt to conduct a nationwide research on common diseases seen in family practice like hypertension and diabetes in the past. But this effort did not progress. The committee may have to expand capacity building efforts to the general membership. It should continue to develop a single nationwide research project that can train the members to gather data from their own practice, analyze the data and recommend some improvements. While the current capacity building approach works for residents, the learning by doing approach may be more appropriate for the practicing family physicians.

The PAFP Residency Committee may also have a role in improving research outputs from its training programs. The residency committee is primarily responsible for accreditation of residency training programs. Some of these programs are in academic institutions with strong research orientation. But others are in hospitals with no academic affiliation. It may be helpful for rigorous criteria for research to be included in the accreditation standards. Standards like published research outputs should probably be required before the department can be accredited or re-accredited. This should probably be required for both residents and consultants.

Another committee, the PAFP Board of Examiners may also develop policies to enhance research quality. To generate interest in research, examination questions related to the research methodologies and the findings of research publications may be included in the qualification examinations for future diplomates and fellows. This was done several years ago with the inclusion of evidence-based medicine (EBM) and quality assurance (QA) in health care in the diplomate examinations for several years. This may have contributed to the increased acceptance of EBM and QA among the PAFP members.

There are other committees that may play a role such as the EBM-QA Committee, Library Committee, Informatics, etc. This multi-committee policy approach may be more of induced enticement than encouragement. But with most of the facilitative encouragement already done, this effort is worth a try.

Noel L. Espallardo, MD, MSc, FPAFP