Building Rural Primary Care Research by Connecting Rural Programs

David F. Schmitz, MD¹

Sharon Casapulla, EdD²

Davis G. Patterson, PbD³

Randall Longenecker, MD^{2,4}

¹University of North Dakota School of Medicine and Health Sciences, Grand Forks, North Dakota

²Heritage College of Osteopathic Medicine, Athens, Ohio

³University of Washington School of Medicine, Seattle, Washington

⁴The RTT Collaborative, Athens, Ohio



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CORRESPONDING AUTHOR

David F. Schmitz University of North Dakota School of Medicine and Health Sciences 1301 North Columbia Road, Stop 9037 Grand Forks, ND 58202-9037 david.f.schmitz@und.edu

ABSTRACT

Both research and medical education make substantial contributions to rural primary care and health. An inaugural Scholarly Intensive for Rural Programs was conducted in January 2022 to connect rural programs within a community of practice focused on promoting scholarly activity and research in rural primary health care, education, and training. Participant evaluations confirmed that key learning objectives were met, including stimulating scholarly activity in rural health professions education programs, providing a forum for faculty and student professional development, and growing a community of practice that supports education and training in rural communities. This novel strategy brings enduring scholarly resources to rural programs and the communities they serve, teaches skills to health profession trainees and rurally located faculty, empowers clinical practices and educational programs, and supports the discovery of evidence that can improve the health of rural people.

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PURPOSE

B oth research and medical education make substantial contributions to rural primary care and health. Engagement in scholarly activity is associated with rural health care improvements¹ and development of medical students' leadership and advocacy skills.² Rural residency training programs, often smaller in size and with limited resources, face numerous challenges meeting scholarly activity requirements.³ Residency programs need technical assistance and faculty development to promote and conduct successful research within rural medical education settings. Although some programs exist to meet these needs,³⁻⁵ our project's goal was to connect rural programs within a community of practice focused on research in rural primary health care, education, and training.

METHODS

The RTT Collaborative (RTTC), a nationwide board-directed nonprofit cooperative of programs in rural health professions education and training, planned and hosted an inaugural Scholarly Intensive for Rural Programs in January 2022 online via Zoom, with support from the Collaborative for Primary care Research Education and Practice (Rural PREP) and funding from the US Health Resources & Services Administration. This 2-day national event involved 85 students, faculty, rural program directors and staff, grant writers, and researchers from 24 states, including physicians, physician assistants, nurses, and pharmacists.

The Intensive focused on unique aspects of research in rural communities, rural clinical practices, and rural training programs. Our aims were to stimulate scholarly activity in rural health professions education programs, provide a forum for faculty and student professional development, and sustain and grow a community of practice in rural program scholarship. Plenary sessions included, "What Makes a Research Question Rural?" and "Unique Challenges and Opportunities for Research in Rural Medical Education." Two breakout tracks each day, including both presentations and discussion, reflected goals for both individual skill development and enhancement of rural research That Matters" focused on primary research skills at each step of the research process, from writing a rural research question to dissemination of results. The second track, "Program Development" addressed program management and resources to facilitate research in both clinical practice



and in rural health professions education and training. Second day tracks included "Engaging the Community of Practice" and a "Design and Dissemination Studio."6 Presenters included students, educators, clinicians, and experienced researchers covering topics ranging from local (eg, "Engaging with the Communities We Serve") to more global (eg, the work of federally funded rural health research centers). The RTTC website now hosts products of the Intensive, including video recordings and presentation slides for free public use (Supplemental Appendix).

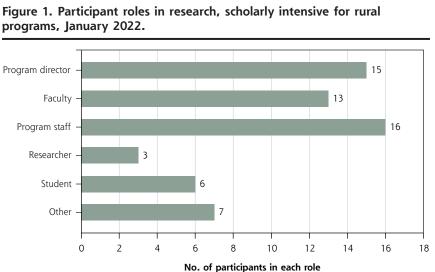
RESULTS

The 54 participants who completed online evaluations represented 18 states and a

variety of roles, including rural program staff (16), program directors (15), faculty (13), students (6), researchers (5), and others (Figure 1). Of the respondents, 34% expressed a desire to promote scholarly activity in their programs, 33% sought to connect with others interested or involved in research, and 30% wanted to develop their own research skills. Most participants agreed/strongly agreed that the conference met key learning objectives: (1) stimulate scholarly activity in rural health professions education programs (96%); (2) provide a forum for dissemination (94%), for mutual encouragement (96%), and for faculty and student professional development $(95\%)_i$ and (3) sustain and grow a community of practice in rural program scholarship (88%).

CONCLUSION

Our first Scholarly Intensive for Rural Programs demonstrates that online meetings can meet rural training program needs and promote research in, with, and for rural communities. Supporting individual and group scholarly activity in rural health professions education and training programs researching rural topics offers several advantages. The best of rural health research, whether clinical or educational in nature, engages rural communities in partnership, prioritizes rural community needs, and strengthens community-provider ties. Bridging research to practice through development of relationships within a community of rural programs offers promise for this underrepresented group of researchers serving under-resourced rural places. Support of rural research bolsters rurally located health professions education and training programs that produce graduates more likely to choose rural practice.⁷ We have demonstrated this activity has the potential to further grow a community of practice that supports education and training in rural communities. This novel strategy brings enduring scholarly resources to rural programs and the communities they serve, teaching enduring skills to



health professions trainees and rurally located faculty, empowering clinical practices and educational programs, and yielding evidence that can improve the health of rural people.

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Key words: rural health; primary health care; research; professional education

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Supplemental materials

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