

NAPCRG 52nd Annual Meeting — Abstracts of Completed Research 2024.

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Title

Family Medicine: Finding Its Way on the Federal Research Roadmap

Priority 1 (Research Category)

Economic or policy analysis

Presenters

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Abstract

Context: Challenges persist in securing substantial funding for the Family Medicine (FM) research enterprise, particularly from major sources like the National Institutes of Health (NIH). Analyses from a decade ago revealed stagnant funding levels, prompting further investigation into the subsequent years. This project emerged from the 2023 Family Medicine Research Summit, and serves as a periodic update to similar analyses conducted in 2008 and 2015. Objective: The project assessed funding trends from the NIH RePORTER database for grants awarded to departments identified as “Family Medicine”. Study Design and Analysis: We explored the relationship between funding success and multidisciplinary, examining whether US Departments of FM (DFMs) incorporating diverse disciplines in their names exhibited higher chances of securing research funding. Setting or Dataset: Data encompassed awards from various federal agencies, predominantly including the US National Institutes of Health and others from 2014-2023. Population Studied: US DFMs Intervention/Instrument: The NIH RePORTER and Liaison Committee on Medical Education (LCME) databases. Outcome Measures: Percent of Federal US funding received per year by US DFMs. Impact of multidisciplinary department structure on funding likelihood. Results: The investigation identified 73 funded DFMs in the NIH RePORTER database out of a total of 131 DFMs at LCME accredited schools. Despite notable increases in both the total funding and percentage of funding allocated to DFMs over the decade, FM still accounted for less than 1% of total NIH awards. Multidisciplinary departments displayed a higher likelihood of securing research funding compared to their counterparts identified solely as DFMs. Conclusions: While the study reveals a mild upward trend in funding levels for DFMs, challenges persist in securing a more substantial share of federal research funding. Despite limitations, including the exclusion of non-NIH funding sources, the study provides valuable insights into the current state of federal funding for Family Medicine research, urging sustained efforts for further progress in the field.

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