The role of research training during higher medical education in the promotion of academic medicine in the UK

P K Myint, A M J MacLullich, M D Witham

Objectives: To examine the research activities and perceived barriers to research among higher specialist trainees in geriatric medicine and to show how trainees active in research might have a role in assisting their peers in getting started in research.

Design: Cross-sectional questionnaire survey on research activities, attitudes to doing research and perceived difficulties in doing research.

Setting and participants: Trainee members of the British Geriatrics Society (BGS) in the UK.

Results: A total of 122 responses (30% response rate) were received after a single mailing and a follow-up questionnaire to trainees attending the BGS national conference. Although 64% (67/104) of respondents would like to undertake a period of research, many perceived barriers preventing them from planning, funding and executing a research project. Among those who had not undertaken research, the majority (70%, 42/60) indicated that they have no clear idea of a topic to research, 64% (39/61) did not know how to develop an idea and 62% (38/61) indicated that they did not know how to get funding. Trainees motivated to do research were faced with particular difficulties with regards to funding and selection of a project topic.

Conclusions: One useful method would be systematically to provide basic information to trainees on how to enter into the early stages of research. This would help to overcome some of the unnecessary uncertainty that many trainees keen to do research seem to have.
Research - Your wants, your needs, the future of your speciality

Dear Colleague,

Please take a few moments to fill out this questionnaire, which aims to give us information on who is interested and active in research, together with the obstacles that you perceive to becoming research active. This will help us to provide the resources and information that we need to successfully participate in research.

Which year of training are you in?
- SpR year 1
- SpR year 2
- SpR year 3
- SpR year 4
- SpR year 5
- Others

Do you have an MD or PhD?
- MD
- PhD
- Neither

Are you studying for a higher degree?
- Yes
- No

Would you like to obtain a higher degree?
- Yes
- No

Are you currently involved in research?
- Yes
- No

Have you previously been involved in research?
- Yes
- No

Would you like to undertake a period of research?
- Yes
- No

Would you be prepared to take time out of your training programme to undertake research?
- Yes
- No

If yes, for how long?

If you have undertaken research, what did your project entail? How long did you spend doing research?

If you have not undertaken research, how do you respond to the following statements? (please circle)

- I don’t want to do any research: Agree, Not sure, Disagree
- I don’t want to prolong my training: Agree, Not sure, Disagree
- I don’t have a clear idea of which topic to research: Agree, Not sure, Disagree
- I don’t know how to get funding: Agree, Not sure, Disagree
- I don’t know how to develop an idea: Agree, Not sure, Disagree
- I have no-one to supervise me: Agree, Not sure, Disagree

Other

Thank you for your time. If you would like to join an informal research forum, please add your name and email here:
Name: Email:

Figure 1  Trainee survey questionnaire. LAS, locum appointment for service; LAT, locum appointment for training; SHO, senior house officer; SpR, specialist registrar.

Table 1  Level of training among the respondents

<table>
<thead>
<tr>
<th>Grade/year of training</th>
<th>No (%) of respondents</th>
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<tbody>
<tr>
<td>SpR year 1</td>
<td>20/122 (16)</td>
</tr>
<tr>
<td>SpR year 2</td>
<td>26/122 (21)</td>
</tr>
<tr>
<td>SpR year 3</td>
<td>21/122 (17)</td>
</tr>
<tr>
<td>SpR year 4</td>
<td>19/122 (16)</td>
</tr>
<tr>
<td>SpR year 5</td>
<td>18/122 (15)</td>
</tr>
<tr>
<td>Others*</td>
<td>18/122 (15)</td>
</tr>
</tbody>
</table>

SpR, specialist registrar.
*Locum appointment for service, locum appointment for training, research fellow, year 3 senior house officer and general practitioner.

the BGS. The main objective of our survey was to examine the research activities and perceived barriers to doing research among higher specialist trainees in geriatric medicine. Our survey predated the Walport report.11 We report the findings of this questionnaire survey and the ensuing efforts to deal with the barriers to carrying out research, which the survey highlighted.

METHODS
We conducted a national postal survey (fig 1) of specialist registrars (SpRs) and trainee equivalent grades who were members of the BGS in the UK. The questionnaire was distributed with the BGS Newsletter in January 2004 and
their voluntary response was invited. Repeat distribution of the questionnaire took place at the 2004 BGS Spring Scientific Meeting to increase the response rate.

The respondents’ research activity was assessed by asking whether they had obtained a postgraduate academic qualification, followed by a series of questions on present, past and future intended research activities. We asked whether respondents were prepared to take time out of their training programme to do research and if so for how long. For those who had not undertaken research, we provided several statements—for example, “I don’t want to do any research”—and asked for a response on a three-point scale: agree—not sure—disagree. The focus of the questions was perceived barriers to doing research.

Data were analysed using SPSS V.11.5. Independent Student’s t test was used to compare year of training with perceptions of their ability to undertake a period of research. Statistically significant differences were found in terms of mean number of years spent in SpR grade for those who agreed and for those who disagreed for statements such as “No clear idea of topic to research”, “Don’t know how to get funding” and “Don’t know how to develop idea”. Although more senior SpRs disagreed, more junior SpRs agreed with these statements (table 3).

**DISCUSSION**

The main finding from this survey is that there are many trainees in geriatric medicine who are interested in doing research, but who do not know how to plan, fund and execute a research project. Specifically, trainees often stated that they do not know how to obtain funding or to develop research ideas. It is encouraging that this level of interest in research is evident even in geriatric medicine, where prior experience in research is not essential for entry into higher specialist training. A substantial number of trainees in geriatric medicine wish to take dedicated time for this out of their clinical training programmes, and many wish to obtain a higher research degree.

Trainees who required assistance in issues such as project idea and funding were of a junior grade. This may be simply because trainees in more senior years have already had some opportunity to get involved in research projects, which may or may not prepare them to become future academics. In contrast, it seemed that more junior SpRs were more likely to wish to obtain a higher degree. These results suggest that there is a mismatch in the early years of training between the wish to undertake research and the skills and trainees’ perceptions of their ability to undertake a period of research. Conversely, senior SpRs have a better idea of their ability to carry out research, but lack the time or inclination to do so. This suggests that there is a window of opportunity for targeted promotion of research activities that could be positively associated with increasing number of years at the SpR grade, the reverse pattern is observed for willingness to obtain a higher degree.

<table>
<thead>
<tr>
<th>Table 2</th>
<th>Current research activity and aspirations among the participants of the survey</th>
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<tbody>
<tr>
<td>Current activity</td>
<td>No/response (%)</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Studying for a higher degree</td>
<td>46/121 (38)</td>
</tr>
<tr>
<td>Would like to obtain a higher degree</td>
<td>81/113 (72)</td>
</tr>
<tr>
<td>Currently involved in a research project</td>
<td>68/121 (56)</td>
</tr>
<tr>
<td>Previously involved in research projects</td>
<td>69/119 (58)</td>
</tr>
<tr>
<td>Would like to undertake a period of research</td>
<td>67/104 (64)</td>
</tr>
<tr>
<td>Prepared to take time out</td>
<td>64/106 (60)</td>
</tr>
<tr>
<td>of training to do research</td>
<td></td>
</tr>
<tr>
<td>Up to 1 year</td>
<td>15/51 (29)</td>
</tr>
<tr>
<td>1–2 years</td>
<td>25/51 (49)</td>
</tr>
<tr>
<td>2–3 years</td>
<td>11/51 (22)</td>
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<tr>
<th>Table 3</th>
<th>Frequency distribution of responses from 63 trainees who had not undertaken research at the time of survey</th>
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<tbody>
<tr>
<td>Agree</td>
<td>Unsure</td>
</tr>
<tr>
<td>Do not want to do research</td>
<td>14/63 (22%)</td>
</tr>
<tr>
<td>Do not want to prolong training</td>
<td>23/62 (37%)</td>
</tr>
<tr>
<td>No clear idea of topic to research</td>
<td>42/60 (70%)</td>
</tr>
<tr>
<td>Do not know how to get funding</td>
<td>38/61 (62%)</td>
</tr>
<tr>
<td>Do not know how to develop an idea</td>
<td>39/61 (64%)</td>
</tr>
<tr>
<td>No one to supervise</td>
<td>21/61 (34%)</td>
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potentially attract a substantial number of trainees to pursue research activity and possibly an academic career.

With a response rate of about 30% in one medical subspeciality, this survey should not be viewed as a census of research activity among trainees in higher medical education. It does, however, give useful information as to how we might help promote academic medicine among trainees. Although Paice et al.13 examined the SPRs' self-reported satisfaction with regard to their clinical training before and after the introduction of the Calman reforms, the trainees' perceived needs in or obstacles to getting adequate research training during their higher medical education were not assessed. Some authors have provided general guidance for research training for junior doctors,14 whereas others have concentrated on the magnitude of the problem with regard to academic medicine in the context of Calman training.15 However, specific strategies to promote research among the higher specialist medical trainees have not been reported.

Prompted in part by the results of this survey, the BGS implemented a series of initiatives to remove some of the barriers to performing research. These include a series of “how to” articles published in the BGS newsletter and on the BGS website, “How I got into research” articles written by research active SPRs in geriatric medicine, “Meet the Professors” sessions at BGS national conferences, and a directory of UK geriatric academic research centres with contact names and a description of research opportunities. A web-ring for mentoring and exchanging views among SPRs interested in research has also undergone a trial, and the criteria for accepting posters at the BGS national conference has been modified to encourage trainees to prepare and present audit projects to give a flavour of the presentation process.

Among junior doctors, the wish to pursue an academic career has been shown to be positively related to the challenge of research and the intellectual environment of research units.15 However, not all trainees will wish to undertake time out of clinical training to do research. Nevertheless, it is important to ensure that opportunities for research can be integrated with clinical duties for those unwilling to take time out so that adequate research training is provided during a trainee’s higher medical education. Moreover, exposure to a period of research training within a clinical programme can be a springboard for exploring more substantial options. Furthermore, creation of a research-oriented culture among the future clinical leaders is, in our opinion, as important as recruiting future academic leaders, which will help to create an environment where both can flourish.

ACKNOWLEDGEMENTS
We thank the BGS Academic and Research Committee and Ms Recia Atkins and staff from the BGS office for their support. We also thank the participating trainees and academic centres for taking part in these surveys.

Authors’ affiliations
P K Myint, School of Medicine, Health Policy and Practice, University of East Anglia, Norwich, UK
A M J MacLullich, The Geriatric Medicine Unit, University of Edinburgh, Edinburgh, UK
M D Witham, Section of Ageing and Health, University of Dundee, Dundee, UK

Funding: Mailing and administrative costs of the surveys were supported by the British Geriatrics Society.

Competing interests: None.

Publication disclaimer: The results of the BGS trainees survey were published in the September 2004 issue of the BGS Newsletter.

REFERENCES