

STRATEGIC ADVOCACY FOR PRIMARY CARE RESEARCH

From Policy to Action in the US

May 13, 2025 | 11:30am CT | Zoom

Presenters:



Shannon Robinson, MPA
Research Coordinator: National Family
Medicine Strategic Plan for Research



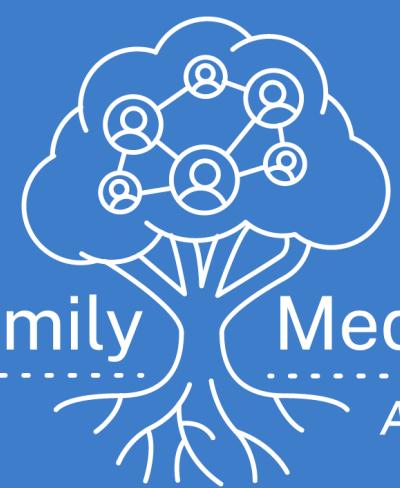
Sebastian Tong, MD, MPH
Co-Chair, NAPCRG Research Advocacy
Committee



Nina DeJonghe, MPP
Director of Government Relations

2025

The U.S. National Family Medicine Research Strategic Plan

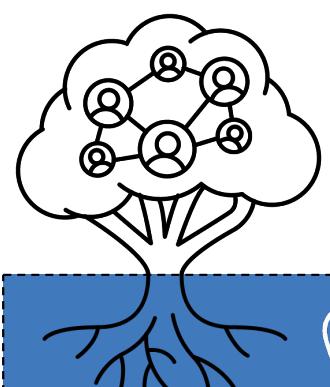


Family Medicine Research
A National Strategic Plan

Background



2023 Research Summit



Vision: Family Medicine research is whole-person, family, and community centered and improves health enhancing health promotion, improving care for chronic diseases and advancing healthcare delivery, while including cross-cutting themes of health equity, technology, and team science.



Pathways/ Mentorship

Goal:

Grow the family medicine research workforce by **expanding** pathways and strengthening mentorship



Funding / Advocacy

Goal:

Increase funding for family medicine research and advocate for **enhanced** health policy and support

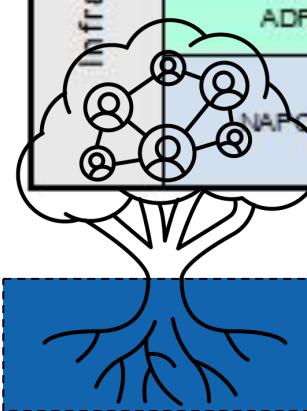


Infrastructure

Goal:

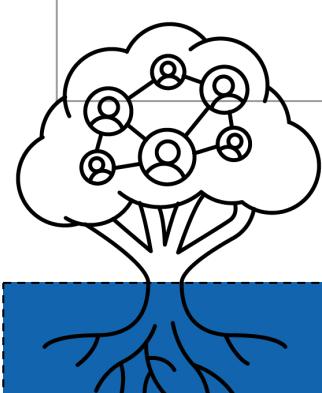
Build a national infrastructure for organizing and **optimizing** family medicine research opportunities.

Priority	Lead Organization	Organizational Champion	Objective	Action Steps
Pathways/Mentorship	NAPCRG	Research Coordinator: Shannon Robinson	A1: Maintain, promote and contribute to a database of family medicine research programs to connect learners to research training opportunities	TBD
	NAPCRG, ADFM, AFMRD	Trainee Committee	A2: Enhance and grow pathways to participate in family medicine research for <ul style="list-style-type: none"> medical students (e.g. expanding MD/PhD programs) residents (e.g. creating additional degree programs and fellowships) and family physicians (e.g. offering training opportunities) 	TBD
	STFM	Research Committee	A3: Create structured mentorship experiences inside and outside home institutions	<ol style="list-style-type: none"> Create a bidirectional, national family medicine research mentorship training academy to promote better mentorship practices Investigate mentorship models and develop curricula, training, and programming to ensure successful skill development
	NAPCRG, ADFM	Committee on Advancing the Science of Family Medicine	A4: Normalize a team science approach by developing cross-disciplinary partnerships with PhDs, Interprofessional groups, and community based organizations	<ol style="list-style-type: none"> Create a NAPCRG-AFMRD portal for collaborative research opportunities Recommend that a qualified research director is embedded within family medicine departments and training programs
	ADFM	Research Development Committee	A5: Promote a "culture of curiosity" among medical students and family medicine residency programs to ensure the workforce is well-equipped to critically analyze and apply evidence	<ol style="list-style-type: none"> Develop a standardized longitudinal curriculum in scholarly inquiry that spans pre-medical, UME, and GME (residency and fellowship) education with emphasis on research that aligns with our disciplines research vision. Re-examine accreditation standards for medical schools and residency programs to assess the incorporation of research curricula and infrastructure needs (e.g. learning networks, research support, etc.)
Funding and Advocacy	NAPCRG	NAPCRG's Executive Committee	B1: Define and promote the value of family medicine research broadly	TBD
	ABFM		B2: Align advocacy efforts with the 2021 NASEM report and forthcoming action plan to build momentum and increase support for family medicine research, including the creation of an Office of Primary Care Research	<ol style="list-style-type: none"> Create a data-driven story through a convening of primary care researchers and NIH insiders to support creation of a funded office that supports research able to promote the health of people Advocate for the NASEM standing committee on primary care to work with the NIH to advise Congress on a plan to develop a plan for primary care research at the NIH, incl NIH funding for NASEM standing committee task report on primary care research
	STFM/AFMAC	Council of Academic Family Medicine	B3: Continue advocacy to increase funding for AHRQ National Center for Excellence in Primary Care Research and support efforts to direct other sources of funding to primary care research (e.g. foundations, payers, venture capital and other federal agencies such as: PCORI, CDC, and HRSA)	<ol style="list-style-type: none"> Advocate for AHRQ to allocate half of the PCOR trust fund funding to primary care projects, and as one tactic to accomplish this goal, FMLC member orgs should nominate more FM reps to AHRQ National Advisory Council, including nominating NAPCRG PaCE members for public/patient NAC positions. Facilitate formation of a consortium of foundation funders to establish a funding initiative in Primary care research
	ADFM	Research Development Committee	B4: Advocate for increased funding for Departments of Family Medicine from institutional leadership	<ol style="list-style-type: none"> Build collaborations with other primary care domains to collectively advocate to the Dean - build on strengths as collaborators
		Research Development Committee	B5: Identify and promote promising practices for chairs to support and fund research participation within their departments and institutions	<ol style="list-style-type: none"> Create the content of a curriculum for chairs on how a chair can best support research in their environment
Infrastructure	NO VOLUNTEERS		C1: Create partnerships and align the discipline with future advancements in healthcare delivery to be on the forefront of new research opportunities and changes in healthcare policy	<ol style="list-style-type: none"> Partner with payers to gain access to data and fund research around shared goals Define the end-users of primary care research and think across sectors about strategic partnerships (policymakers, patients, and the "unfriendlies" etc)
	NO VOLUNTEERS		C2: Utilize a repository of clinical data to answer key questions in primary care	TBD (not discussed at Summit given time constraints)
	NAPCRG	Committee on Advancing the Science of Family Medicine	C3: Increase accessible and integrated research models that produce clinically applicable research and evidence-base (e.g. optimize PBRNs, communities of practice, and consider other types of networks such as geographic and content networks)	<ol style="list-style-type: none"> Create a consultation service focused on leveraging existing research resources
	ADFM	Research Development Committee	C4: Leverage Clinical and Translational Science Awards (CTSA) networks and create Centers of Excellence to increase family medicine research within institutions	<ol style="list-style-type: none"> Convene effort for strategic communication of value proposition that resonates with CTSA
	NAPCRG	Committee on Advancing the Science of Family Medicine	C5: Design and utilize distinctive methodology such as pragmatic trials, participatory methods, community-based research, translational science, implementation research and dissemination, big data analytics and machine learning.	<ol style="list-style-type: none"> Strategically place and identify regional primary care research centers of excellence and their key strengths Defining shared measures that are relevant for primary care research and provide access to expertise in a national research consortium



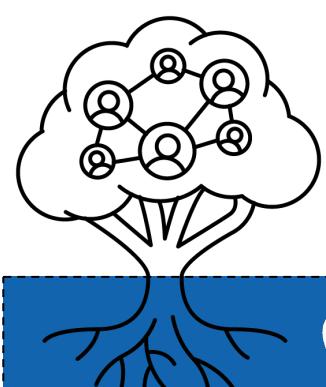
Advocacy Objectives - NFMSPR

Objective	Action Steps
B1: Define and promote the value of family medicine research broadly	
B2: Align advocacy efforts with the 2021 NASEM report and forthcoming action plan to build momentum and increase support for family medicine research, including the creation of an Office of Primary Care Research	<ol style="list-style-type: none">1. Create a data-driven story through a convening of primary care researchers and NIH insiders to support creation of a funded office that supports research able to promote the health of people.2. Advocate for the NASEM standing committee on primary care to work with the NIH to advise Congress on a plan to develop a plan for primary care research at the NIH, incl NIH funding for NASEM standing committee task report on primary care research
B3: Continue advocacy to increase funding for AHRQ National Center for Excellence in Primary Care Research and support efforts to direct other sources of funding to primary care research (e.g. foundations, payers, venture capital and other federal agencies such as: PCORI, CDC, and HRSA)	<ol style="list-style-type: none">1. Advocate for AHRQ to allocate half of the PCOR trust fund funding to primary care projects, and as one tactic to accomplish this goal, FMLC member organizations should nominate more FM reps to AHRQ National Advisory Council, including nominating NAPCRG PaCE members for public/patient NAC positions.2. Facilitate formation of a consortium of foundation funders to establish a funding initiative in Primary care research



Current Activities

- Continued efforts
 - 2021 NASEM report
 - CAFM, AFMAC, FMLC, etc.
 - Multiple letters of support sent
 - Social media presence
- NIH: Communities Advancing Research Equity (CARE) for Health™
 - Pilot establishing primary care Research Network Hubs to expand research opportunities
 - Continued partnership - quarterly meetings



JABFM Special Issue - Complete!

SPECIAL COMMUNICATION

Tactics for Institutional Advocacy to Increase Research Capacity in a Family Medicine Department

Masahito Jimbo and Gerardo Moreno

The Journal of the American Board of Family Medicine - December 2024.

SPECIAL COMMUNICATION

Building Research Capacity (BRC): Purposes, Components, and Activities to Date

Stephen K. Stacey, Peter H. Seidenberg, Lynn M. Meadows, David Schneider and Bernard Ewigman

The Journal of the American Board of Family Medicine - December 2024.

COMMENTARY

Mentoring for the Diverse Range of Family Physicians' Engagement in Research

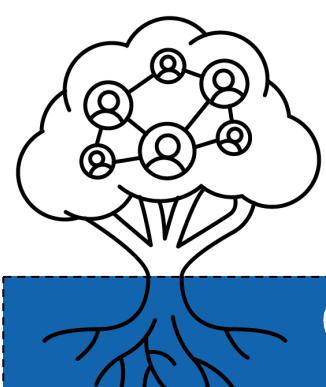
Myra L. Muramoto, Melanie Steiner, David F. Schmitz and Nahid J. Rianon

The Journal of the American Board of Family Medicine - December 2024.



Special journal issue - share history and future vision for research within the discipline

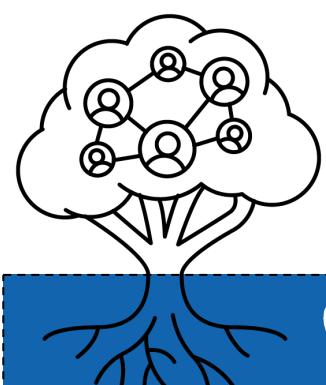
JABFM Special Issue: > 600 copies to be mailed- Q1 2025



Current Activities

Development of curriculum for new FM Dept chairs

- Promising practices to support and fund research participation
 - Why research is important in family medicine
 - Tools to Assess Research Capacity
 - Resources
 - Learning Sessions - Webinar
 - Regulation
 - Ecosystem
 - Infrastructure
 - Funding



Curriculum for future department chairs: What to know in the research realm

Goal of this Curriculum: Identify and promote promising practices for chairs to support and fund research participation within their departments and institutions

The vision: Create a document intended to serve as a foundation for developing a full curriculum with individual lessons. Ensure the content is concise, with references included, and designed so that different sections can be presented at national meetings.

Where to share: New Chairs Workshop; LEADS fellowship; ADFM website under "Chair Resources".

Ideal audience: Leaders with a non-research background who are negotiating a chair package.

Future Direction: Expand the curriculum to target department chairs with research experience who aim to further grow and scale their department's research enterprise.

Introduction / Preamble

The Family Medicine Research Summit, held in October 2023, brought together over 140 attendees, including department chairs, researchers, practicing physicians, patients, residents, and students, representing a diverse range of family medicine stakeholders. During the Summit, the group refined and endorsed the [National Research Strategy for Family Medicine 2024-2030](#), which outlines three strategic priorities, three goals, and fifteen objectives. The Research Curriculum for Department Chairs aligns with Objective B5: "Identify and promote promising practices for chairs to support and fund research participation within their department and institutions."

- [Toward a Unified and Collaborative Future: Creating a Strategic Plan for Family Medicine Research](#)
- [Shaping the Future of Family Medicine Research: The 2023 National Family Medicine Research Summit](#)
- [Building Research & Scholarship Capacity in Departments of Family Medicine: A New Joint ADFM-NAPCRG Initiative](#)

Why research is important in family medicine

The tripartite mission of academic health systems includes the pillars of clinical care, education, and research. In family medicine, research applies methodology to curiosity, allowing us to answer questions that matter to our care teams, patients, and the communities we serve. The pursuit of scholarship in the realms of quality improvement, process improvement,

Communication & Promotion

- Website
 - Overview
 - Pathways/Mentorship
 - Funding/Advocacy
 - Infrastructure
- LinkedIn Page
- Connect Posts

[MEMBER CENTER](#)[CONFERENCES](#)[AWARDS](#)[PROGRAMS](#)

National Family Medicine Strategic Plan for Research (NFMSPR)

What is the National Plan for Family Medicine Research?

Recognizing the transformative potential of research in family medicine, ADFM and NAPCRG have developed a comprehensive strategic plan designed to advance the discipline by 2030. This forward-thinking plan outlines actionable steps and measurable goals to support research across the entire spectrum¹, from clinicians critically appraising evidence to dedicated career researchers. At its core, the plan emphasizes our vital role in every stage of the research process, with a particular focus on improving health outcomes for patients, populations, and communities.



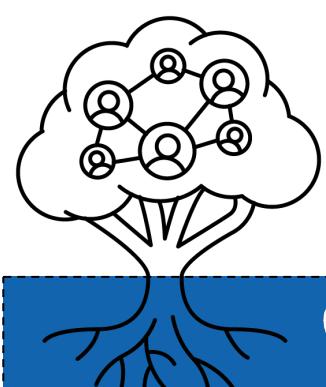
National Family Medicine Strategic Plan for Research

Family Medicine Researcher at NAPCRG, ADFM, STFM

Leawood, Kansas, United States

33 followers • 31 connections

 NAPCRG, ADFM, STFM



Communities Advancing
Research Equity for Health

CARE for Health™



CARE for Health™ Program Overview

PROGRAM GOALS

Develop **infrastructure for a primary care-focused clinical research network**

Establish a **foundation for sustained engagement with communities** underrepresented in clinical research

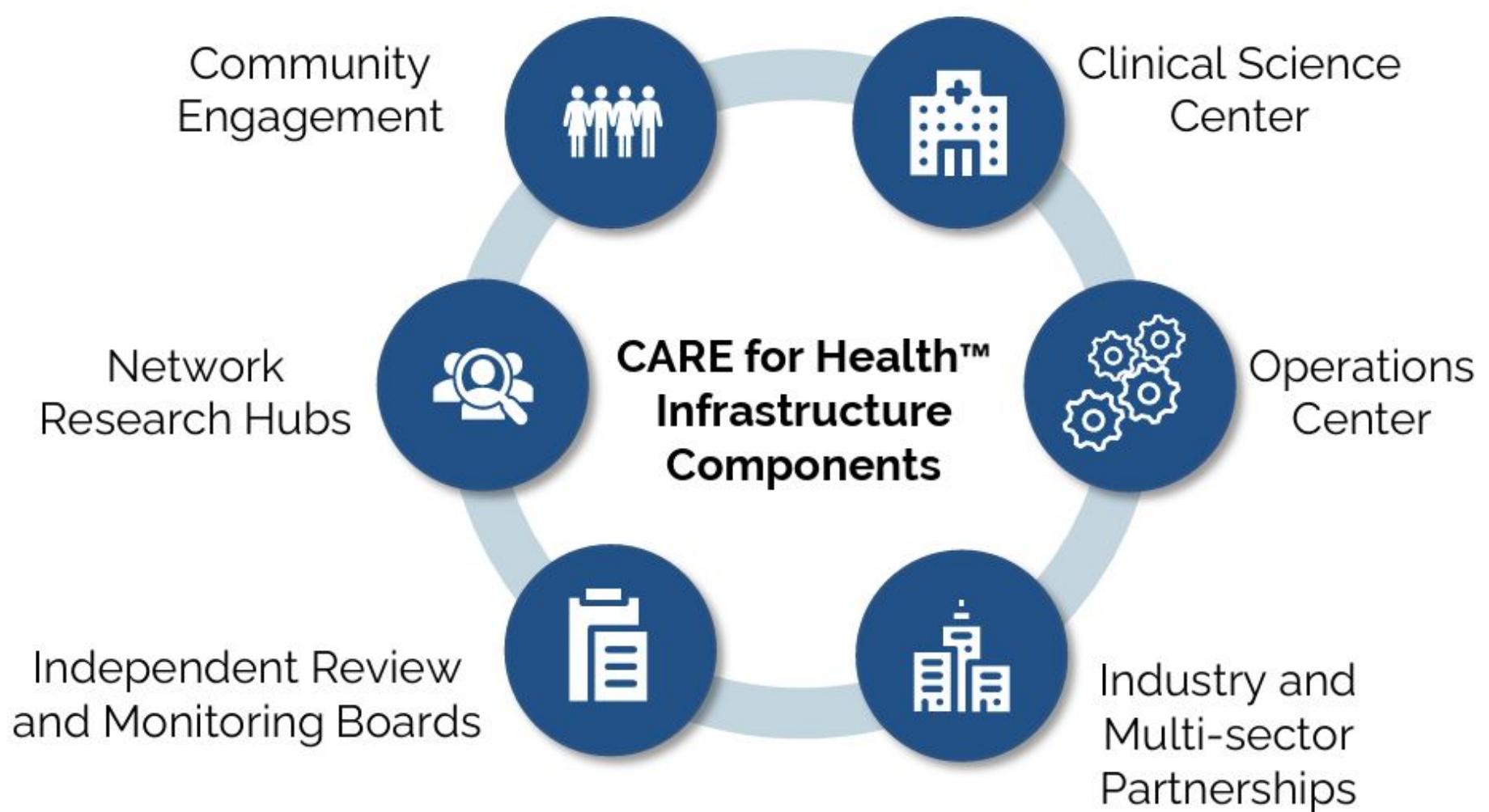
Implement **innovative study designs**

Integrate **research into routine primary care**

Facilitate **adoption of evidence-based research findings**

PROGRAM COMPONENTS

Starting as a **two-year pilot**, CARE for Health™ will develop six components to build a Network of Networks.



Overview (continued)

Coordinated infrastructure that embeds innovative research into routine clinical care in primary care settings to:

- Support primary care-based clinical research in mission areas **spanning prevention and treatment** and with a **focus on health equity and whole person health**
- Establish a foundation for **sustained engagement with communities underrepresented** in clinical research
- Implement **innovative study designs suitable for primary care settings** that address common health issues, inform clinical practice, and enhance dissemination and implementation

...thereby facilitating and accelerating research advances for adoption and implementation into everyday clinical care, improving health outcomes, and advancing health equity for all

Funded Hubs

Applicant Organization	Research Network Affiliation	FQHC	PBRN
Oregon Health and Science University	NIH CTSA	✓	✓*
University of Wisconsin - Madison	NIH CTSA	✓	✓
West Virginia University	IDeA-CTR	✓	✓
University of Oklahoma Health Sciences Center	IDeA-CTR	✓	✓
University of New Mexico Health Sciences Center	NIH CTSA	✓	✓
University of Alabama - Birmingham	NIH CTSA, IDeA-CTR, PCORnet	✓	✓*

* Indicates >1 PBRN

Building a Foundation for CARE for Health™ Network of Networks: Clinical Community Reach

The network research hubs will:

1. Participate in clinical trials with existing NIH funded studies.
2. Engage additional clinics as part of efforts to understand communities' research priorities and preferences.



To learn more about CARE for Health

<https://commonfund.nih.gov/clinical-research-primary-care>

President's FY 2026 Budget

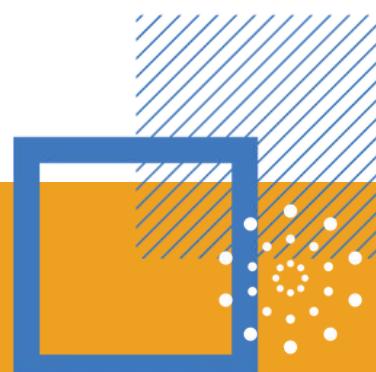
What we know, so far...

Agency for Healthcare Research and Quality

- Proposed funding reduction of \$129 million
- Ends new grants; existing contracts and interagency agreements to be offloaded.
- Reorganization and integration of AHRQ functions into the new HHS Office of Strategy.

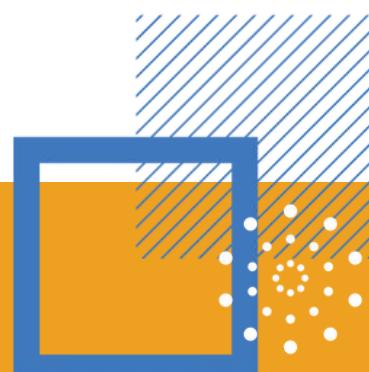
National Institutes of Health

- Budget maintains \$27 billion for NIH research
- Continues Advanced Research Projects Agency for Health (ARPA-H)
- Cuts \$17 million



AHRQ, what's at stake?

- The Administration is restructuring the Department of Health and Human Services (HHS), the Agency for Healthcare Research and Quality (AHRQ) will be under the Office of Strategy.
- AHRQ plays a unique and irreplaceable role in supporting primary care clinical and practice research and ensuring that evidence-based solutions are implemented across the country.
- AHRQ has saved healthcare systems over \$12 billion by implementing evidence-based improvements.
- Center for Primary Care Research (uncertain)



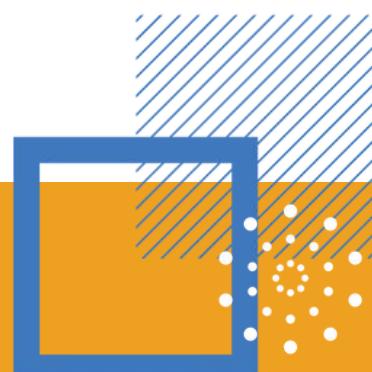
NAPCRG

National Institutes of Health

Program Consolidation/Creation of 5 New Institutes:

- National Institute on Body Systems Research
- National Institute on Neuroscience and Brain Research
- National Institute of General Medical Sciences
- National Institute on Disability-Related Research
- National Institute on Behavioral Health

As of May 5, 2025, a total of 777 NIH grants awarded to U.S. institutions have been terminated, which represents a \$1.9 billion loss in funding.



Call To Action: What each and everyone one of us can do

Sebastian Tong, MD, MPH
U.S. Chair, NAPCRG Advocacy Committee



We each have agency to act!



NAPCRG

Why your voice matters

Unique perspective of
the health care system

Unique perspective as
researchers (clinicians)

Constituent

Categories of Actions

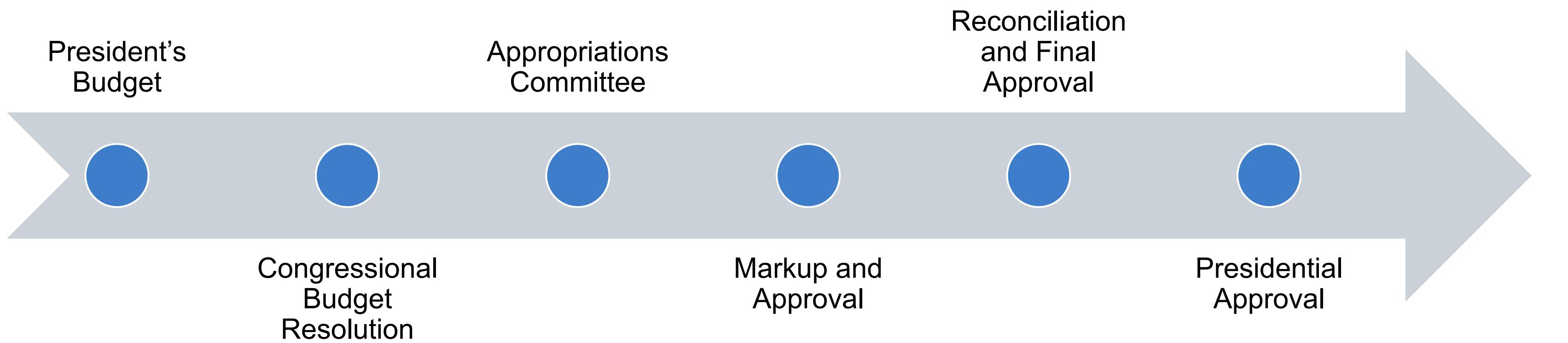
Public

- Protest
- Educate the Public (op-ed, interviews)
- Talk to your patients, colleagues, friends, extended family

Political

- Communicate with your representatives and senators

Regular U.S. Appropriations Process



From chaos to something organized

Relatively speaking...



EXECUTIVE OFFICE OF THE PRESIDENT
OFFICE OF MANAGEMENT AND BUDGET
WASHINGTON, D.C. 20503

THE DIRECTOR

May 2, 2025

The Honorable Susan Collins
Chair
Committee on Appropriations
United States Senate
Washington, D.C. 20510

Dear Chair Collins:

This letter provides President Trump's recommendations on discretionary funding levels for fiscal year (FY) 2026. They are being provided in advance of the President's full fiscal plan to reach balance and restore confidence in America's fiscal management, so that your Committee may commence with debate and consideration of appropriations bills for the upcoming fiscal year.

The recommended funding levels result from a rigorous, line-by-line review of FY 2025 spending, which was found to be laden with spending contrary to the needs of ordinary working Americans and tilted toward funding niche non-governmental organizations and institutions of higher education committed to radical gender and climate ideologies antithetical to the American way of life.

We also considered, for each program, whether the governmental service provided could be provided better by State or local governments (if provided at all). Just as the Federal Government has intruded on matters best left to American families, it has intruded on matters best left to the levels of government closest to the people, who understand and respect the needs and desires of their communities far better than the Federal Government ever could.

Your Role in the Appropriations Process

Advocacy: Engage with lawmakers during key stages to ensure funding for primary care is prioritized. Involvement in this stage also includes submitting appropriations requests.

Coalition Work: Collaborate with stakeholders and advocacy groups to amplify the importance of funding for HRSA, AHRQ and NIH, etc.

Education: Provide data, testimonials, and schedule meetings with policymakers, demonstrating the impact of proposed funding on healthcare access and outcomes.

Monitoring: Keep track of the legislative calendar and milestones to time advocacy efforts effectively.

Senate Appropriations Committee

- Susan Collins (Maine)
- Mitch McConnell (Kentucky)
- Lisa Murkowski (Alaska)
- Lindsey Graham (South Carolina)
- Jerry Moran (Kansas)
- John Hoeven (North Dakota)
- John Boozman (Arkansas)
- Shelley Moore Capito (West Virginia)
- John Kennedy (Louisiana)
- Cindy Hyde-Smith (Mississippi)
- Bill Hagerty (Tennessee)
- Katie Britt (Alabama)
- Markwayne Mullin (Oklahoma)
- Deb Fischer (Nebraska)
- Mike Rounds (South Dakota)
- Patty Murray (Washington)
- Richard Durbin (Illinois)
- Jack Reed (Rhode Island)
- Jeanne Shaheen (New Hampshire)
- Jeff Merkley (Oregon)
- Chris Coons (Delaware)
- Brian Schatz (Hawaii)
- Tammy Baldwin (Wisconsin)
- Chris Murphy (Connecticut)
- Chris Van Hollen (Maryland)
- Martin Heinrich (New Mexico)
- Gary Peters (Michigan)
- Kirsten Gillibrand (New York)
- Jon Ossoff (Georgia)

Senate HELP Committee

- Rand Paul (KY)
- Lisa Murkowski (AK)
- Roger Marshall (KS)
- Josh Hawley (MO)
- Jim Banks (IN)
- Ashley Moody (FL)
- Susan Collins (ME)
- Markwayne Mullin (OK)
- Tim Scott (SC)
- Tommy Tuberville (AL)
- Jon Husted (OH)
- Patty Murray (WA)
- Chris Murphy (CT)
- Maggie Hassan (NH)
- Ed Markey (MA)
- Lisa Blunt Rochester (DE)
- Tammy Baldwin (WI)
- Tim Kaine (VA)
- John Hickenlooper (CO)
- Andy Kim (NJ)
- Angela Alsobrooks (MD)

Policy Action Plan

1. Goal
2. Strategy
3. Target
4. Tools

Goal

What is the problem?

What is the solution?

What is the policy ask?

Example:

Insufficient infrastructure funding to promote rural research.

Grant awards to support infrastructure in rural communities

Congressional line item to support research infrastructure

Strategy

What resources are available to you?

Who are your allies?

Who are your opponents?

Target

Who are the people or organizations in power who can make decisions?

Example:

Representatives on specific committees

e.g. House Committee on Energy and Commerce, Subcommittee on Health

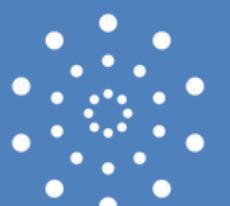
e.g. Senate Committee on Health, Education, Labor and Pensions

Tools

What actions will you direct at your target?

Potential tools

- Visits
- Letters, emails, phone calls
- Demonstrations and press conferences to raise awareness/sway public opinion
- Asking membership organizations to write letter of support
- Editorials



NAPCRG

How to contact your representatives

- Email / phone
 - Look for information about terminated grants/actions
- Set up a meeting
 - Talk to health policy aide

Crafting a message

- Use storytelling techniques
- Estimate the value of your work in quantitative terms
- Tailor communication materials for different audiences
 - What matters to which audience (e.g. patient care or stakeholder engagement)
- Translate research into concise and understandable messages and usable formats

Preparing for a meeting

- What positions has your representative taken before? What matters to them?
- What is your ask?
 - Ask for what is possible
 - E.g. writing a letter to agency, asking questions at a hearing, adding specific appropriations language
 - Tell them why they should support you
- Bring a one-page summary



Senator Patty Murray  @murray.senate.gov · 7d

THIS is what NIH funding means for real people, and why we can't lose it.

I sat down with Emily & her daughter Charlie to discuss how NIH-funded clinical trials at Seattle Children's led to a cure for Charlie's cancer.

This is why we have to speak up, this is who we're fighting for.



OPINION
GUEST ESSAY

Josh Hawley: Don't Cut Medicaid

May 12, 2025, 5:01 a.m. ET

Source: X @murray.senate.gov

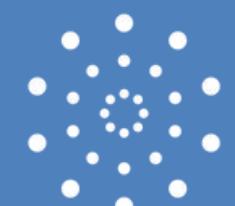
The Etiquette of Engagement

Do this:

- Thank Member/Staff
- Stay on Message
- Listen – look for opportunities to address their needs
- Make the Ask
- Follow Up

Don't do this:

- Don't Be Late
- Don't Argue
- Don't Make it Political
- Don't Have to Be Expert
- Limit your Ask – what's your top priority?



NAPCRG



TIPS FOR OBTAINING FUNDING FOR PRIMARY CARE RESEARCH

Primary care research is critical to strengthening the nation's primary care system. Thus, sustainable funding to support primary care research is needed to continue to make improvements in the delivery of primary care. AHRQ's National Center for Excellence in Primary Care Research (NCEPCR) virtually convened a group of stakeholders in March 2025 to gather their insights about how to maintain a broad portfolio of primary care research funding. NCEPCR and Abt Global developed this resource, based on the information shared by the stakeholders.

This resource includes the following sections:

- [Diversifying Funding Sources for Investigator-Led Research](#)
- [Other Approaches for Supporting Primary Care Research-Related Work](#)
- [Suggestions and Considerations](#)
- [Additional Resources](#)



National Center
for Excellence in
Primary Care Research

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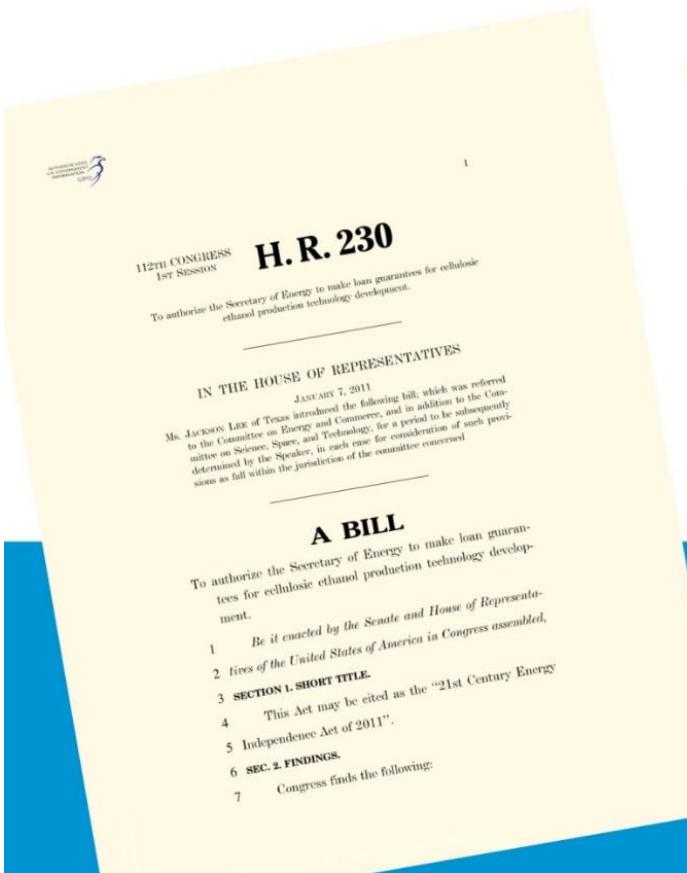
<https://www.ahrq.gov/ncepcr/funding/tips-obtaining.html>

NEW Advocacy Modules

STFM's **FREE Advocacy online modules** have been completely revised and updated for 2015 with new modules, more interaction, video interviews with fellow family medicine advocates, animated slides, and a running time of under 45 minutes.

www.stfm.org/OnlineEd/AdvocacyCourse

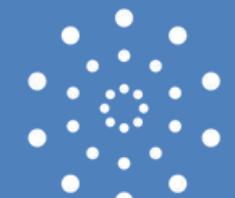
- Module 1: *Getting Started in Advocacy*
- Module 2: *Prepare and Make Contact*
- Module 3: *The One-Pager*
- Module 4: *The Visit*
- Module 5: *Maintaining the Relationship*



Choose to engage in hope!

“Darkness cannot drive out darkness; only light can do that. Hate cannot drive out hate; only love can do that.”

-Martin Luther King, Jr.



NAPCRG

Let's share!

- What have you done that has leveraged your agency and/or brought you hope?
- What ideas do you have for impact?