SAPC hot topic: increasing the visibility of academic primary care

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The challenge

Academic Primary Care (APC) exists to shine a light on the daily work of primary care (SAPC, 2012), offering a critical creative voice that has enhanced primary care (MacAuley, 2010; Glanville et al., 2011). Yet changes within political, clinical and academic contexts challenge the future direction of the discipline both nationally and internationally. 'Now More Than Ever', we need a strong voice for APC to ensure that the discipline is recognised as relevant in a changing world, demonstrating its distinct contribution to a collective effort to deliver the primary care vision. As part of its career scoping work (Adams et al., 2013), SAPC has identified a key concern for academics in the field as the need to communicate an understanding of APC and why it matters, in order to attract both funding and recognition of work that does not always 'fit' the usual frameworks. So how can we make academic primary care practice more visible to a wider audience?

New solutions

More scientific papers are being published than ever before. It is estimated that 25 000 new scientific articles related to research and teaching appear each week. The challenge to academics is not just publishing, but making their work *visible*. There are both ethical and academic (career progression) drivers to disseminating work widely. However, the key focus of this article is on increasing the *impact* of the findings from

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research and teaching practice in order to support the SAPC goal of 'excellence in APC enhancing primary care' (SAPC, 2011).

The move towards open access in scientific publishing means that our work is no longer locked in the private world of academia and this allows anyone to have access to the full text of our work. This could lead to a greater public understanding of primary care research because of previously only being able to explain our research in the sound bite quotes available to us in traditional media. Indeed, Ben Goldacre, the writer, broadcaster and medical doctor, has been trying to persuade the BBC to provide web links straight to journal articles in their online science and health articles (Goldacre, 2010). However, open access alone is not enough; as academics, we need to actively engage in strategies, which in turn help people engage with our work.

The internet has led to the creation of new kinds of ways to disseminate findings from research and teaching practice. Academics can now act as journalists and find direct channels via the internet to inform people about their work. Many universities and research centres now run their own research blogs. The rise in online science websites also provides us with new opportunities to engage with journalists, offering new scope to raise the public perception of academic primary care. Internet news sites such as The Huffington Post (www.huffingtonpost.com) can be an efficient way to share work and highlight the latest academic primary care practice. The viral nature of websites allows for online information posted on blogs, science and news sites to be rapidly spread to an audience of millions.

The internet also brings freedom from the constraints of the static, read-only format of printed material. The popularity of TED

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(www.ted.com), which provides 18-minute video presentations on a range of topics from their conferences, demonstrates the appeal of using the spoken word to spread ideas globally. Video can convey features of our work that is not possible with the printed word, for example, utilising the interview format may be more compelling than just one author relaying the salient information of their research. Platforms such as YouTube allow anyone to use video as part of their research dissemination strategy. Some of our work may be more conducive to multimedia communication, integrating video, audio, graphics and text. SciVee (www.scivee.tv) encourages researchers to post 'pubcasts', a 5-10 min video clip of the author describing a paper. If the full text of the paper is available online and is open access with no copyright restrictions, the contents of the paper can be easily synchronised by the author with the video to create a new kind of learning experience.

The first generation of the internet may have rapidly transformed our ability to search and access a phenomenal amount of information as an effective tool to distribute the printed word. However, we are now living in a web 2.0 world, where we are not just passively consuming online information, but have the ability to publish it, edit it and debate it. The internet now allows us to interact with other users through recent attributes such as blogging, tagging, commenting and social networking. This has changed how we interact with the internet, with the feedback loop of updates presenting a culture of doers, rather than consumers.

These information channels are also used by journalists, with stories often being picked up and appearing in the science pages of the broadsheet papers. Indeed, 'free' media coverage can be an easy way to disseminate research findings beyond scientific publications to as many people as possible. Traditional media resources such as newspapers, television and radio are often interested in health-related stories, and media training courses are available from university public relations departments for those who are new to working with the media.

Dissemination of scientific ideas has traditionally operated in a top-down way, where researchers or journalists write and the audience reads. New possibilities offered by the array of emerging technologies provide potential for more dynamic

interactions and to actively engage people in science and in creating debates. The way we traditionally disseminate our work can evolve to a more complex participation-based concept, closing the gap between academics and the public. All the traditional media now have online versions where once passive readers/listeners/viewers can instantly comment and debate stories. This makes the media more accessible and we need to start thinking about how we can interact and learn from such debates. The internet offers an opportunity for us to engage a (non-academic and academic) community in research and teaching as it happens – to make the debates that often go on behind closed doors transparent and therefore to make academic primary care more visible.

Next steps

As academics, we are expected to be at the 'forefront' of knowledge 'production'. Therefore, perhaps we also need to utilise the newest approaches to involve other people in science and research activities. New technology, including the internet, offer important new tools for public engagement and dissemination strategies. We need to think both creatively and carefully about how we might use them.

SAPC is currently undertaking a strategic review of how best to support both our discipline and our members (SAPC, 2013). Updating and extending our communication strategy will be a key part of that. We are thinking how we as a society can make use of these approaches to raise the profile of a vision of primary care and the discipline of APC, and also how we can best support individual primary care academics in making the best use of the opportunities offered by the media and new technology to increase the impact of our work. We welcome comments or suggestions and would be keen to hear from individuals interested in working with us to take this work forward.

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