



Tor Atle Rosness (born 1976), editor of the Journal of the Norwegian Medical Association, nursing home doctor in Bærum municipality and associate professor at Lovisenberg Diaconal University College.

Photo: Sivert Almvik

To undertake research is to produce knowledge. Doctors should take pride in being part of it

Who wants to be a researcher?

Many of my colleagues ask what I am actually doing when I tell them that I have spent my day on research. I wish to answer that I have spent my precious time on trying to understand the world we live in, have formulated some original ideas and have become wiser. The former is often correct, the two latter unfortunately more rarely so.

The title of *researcher* is not protected, and today there are many who refer to themselves as researchers (1). Like the medical profession, research is associated with high status (2). One might believe that being a doctor *and* a researcher would be especially attractive. However, the doctors' failing interest in research was documented already in 2003 – and this is not a particularly Norwegian phenomenon (3). There is little reason to believe that the situation has changed significantly since then. To be sure, more doctors are now taking doctoral degrees, but few continue along an academic career path (4). Moreover, the proportion of doctors in the health enterprises who graduate with a PhD is declining, despite the record numbers seen in 2014 (5). After their disputation, many doctors are likely to run into the «post-achievement blues syndrome» with regard to a further academic career – it may be hard to know what to do next, once the great goal has been achieved.

One reason why many doctors have little desire to undertake research is that it takes time – often, an awful lot of time. The everyday life of a researcher may be cheerless. Many fail to produce exciting research results. Months or even years may pass before a publication is accepted. The first commandment for the researcher is to have patience, but the lengthy and arduous work may appear meaningless (6). Another reason why doctors fail to turn out in force and embrace the life of a researcher is that they are punished financially. Of all doctors, medical PhD scholars have the lowest salaries (7).

Yet another reason why doctors may be sceptical of a life in research is the need to make sure that your research holds water by cutting a level-headed path through the statistical jungle of p-values, confidence intervals and regression analyses. And irrespective of what hypothesis one started out with as a naïve researcher, there is little comfort to be drawn from knowing that medical research is becoming increasingly dependent on sophisticated statistical analyses (8), of which few doctors really have any grasp. A further argument against a research career is that many doctors are loath to work on something that brings delayed gratification, a disproportionate amount of work and a low income. When summing up, it is easy for a doctor-researcher to ask himself: Why am I doing this?

The Researcher Factory, founded in 2002, seeks to motivate children and young people to opt for natural sciences and technology (9). It should be lauded for its ambition to make it as natural for children to engage in research as in other leisure activities. Preserving this childlike curiosity and urge to explore may also be a motto for doctors who undertake research. However, the feeling that research is fun and not a waste of time may gradually be eroded by the need to write extensive and tedious applications for research funding or by only being a passive co-author who contributes little.

Despite all obstacles there are fortunately a few doctors who have chosen a life in the service of research. Being a good researcher should simply be a matter of preserving one's curiosity. However, curiosity by itself does not provide any returns on the taxpayers' money, nor in terms of research careers, and having a large number of publications has become more important than the issues that have been studied. A high publication count is concomitant with high research activity and is often the only thing that counts, literally speaking, for the institutions.

However, engaging in research can and should be so much more than just publication points. It requires an ability to think critically, remain unbiased and have an open attitude to the existing empirical material and knowledge. An antidote to notions of research as unimportant, tedious, statistics-laden and financially unrewarding is to think of oneself as privileged in the role of researcher. Because: the task of a researcher is to inspire others! To engage in research is to produce knowledge, something which is useful and important to society and patients, as well as to the idea of knowledge as a lofty and virtuous goal in itself. For this reason, doctors ought to take pride in engaging in research.

References

1. Kjensli B. Hvem kan kalles forsker? <http://forskning.no/forskningsformidling/2009/06/hvem-kan-kalles-forsker> [8.10.2015].
2. Kvilesjø SO. Så høy status har ditt yrke. www.aftenposten.no/jobb/Sa-hoy-status-har-ditt-yrke-5561201.html [8.10.2015].
3. Nes M, Røttingen JA. Leger og forskning – når er bunnen nådd? Tidsskr Nor Lægeforen 2003; 123: 344–5.
4. Bratlid D, Hansen TW. Forskes det for mye her i landet? Tidsskr Nor Lægeforen 2012; 132: 2367–8.
5. Piro FN. Flere doktorgradsprosjekter i helseforetakene. Tidsskr Nor Lægeforen 2015; 135: 1266–7.
6. Hem E. Hva driver norske forskere med? Tidsskr Nor Lægeforen 2005; 125: 865.
7. Wesnes SL. Ta PhD – og tap 2,7 millioner! www.dagensmedisin.no/artikler/2008/05/22/ta-phd---og-tap-27-millioner/ [8.10.2015].
8. Skovlund E. Et uunnværlig verktøy. Tidsskr Nor Lægeforen 2015; 135: 1424.
9. Forskerfabrikken – vi trener hjernen. www.forskerfabrikken.no/om-oss [8.10.2015].