

The Relevance of Research in Clinical Practice

Kirsten Davie *Dip Phys, Dip MT, PGCertRehab, MBA*
 President, Physiotherapy New Zealand, Wellington, New Zealand

Davie, K. (2024). The relevance of research in clinical practice. *New Zealand Journal of Physiotherapy*, 52(2), 84. <https://doi.org/10.15619/nzjp.v52i2.425>

Physiotherapists have a thirst for knowledge. We want the best for our patients, care about intervention outcomes, and understand the need to keep abreast of current developments (New Zealand Parliamentary Counsel Office/Te Tari Tohutohu Pāremata, 2023).

The three pillars of our professional knowledge come from (a) clinical practice; (b) patient experience; and (c) research. It is vital that research is relevant to clinicians in practice and to the task at hand. Something is relevant to a task if it increases the likelihood of accomplishing the goal (Hjørland & Sejer Christensen, 2002). Physiotherapists understand the need to focus on specific patient goals and maximise patient outcomes. Relevant research addresses problems found in clinical practice and includes variables within the control of practitioners to influence outcomes they care about (Toffel, 2016).

Research relevance is increasingly important in guiding strategic research planning and connecting with clinicians (Dobrow et al., 2017). It is this connection between research and the community of practice it relates to that helps close the gap between publication and practice. The time lag between research and practice is also decreasing. Publications like the *New Zealand Journal of Physiotherapy* can now be read from digital platforms, providing a foundation for our young graduates to gain practical experience safely and effectively. To successfully integrate new colleagues into clinical practice we must understand their knowledge base. Keeping abreast of research advances is critical in this respect.

The impact of COVID-19 has been a catalyst for innovations in clinical practice that are promoted through research, such as the feasibility and value of telehealth (Zadro, 2022). Embedding clinical research placements across healthcare settings is a possible way of further reducing the gap between evidence and practice within physiotherapy (Dario & Simic, 2021).

The primary goal of evidence-based medicine has been to change the way clinicians make decisions. We use a variety of methods when arriving at the best decision or recommendation for a patient (Tonelli, 2010). As clinicians we are tasked with using our resources wisely for patients. This responsibility to be stewards of limited resources is recognised as influencing the perceived value of a study and what makes clinical research compelling enough to alter or reinforce clinical practice (Tonelli, 2012).

Our profession relies on evidence to support advocacy efforts. An example of this is the Physiotherapy New Zealand (PNZ) Oncology, Palliative Care and Lymphoedema (OPAL) special interest group live publication, which is grounded in evidence

to support rehabilitation (Clouden et al., 2024). The PNZ Occupational Health Physiotherapy Group are similarly focused on gathering evidence to call for a legislative change to allow physiotherapists to sign return-to-work medical certificates. Without research, this call would not be possible.

In the context of the current government, health funders are clear that they will resource according to improved patient outcomes. These outcomes are balanced with and based upon evidence that stands upon research. I would suggest that research has never been more relevant nor necessary, as we navigate health reform and inherent uncertainty.

ADDRESS FOR CORRESPONDENCE

Kirsten Davie, President of Physiotherapy New Zealand, PO Box 403, Wellington, 6140, New Zealand.

Email: president@physiotherapy.org.nz

REFERENCES

- Clouden, J., Nott, H., Searle, E., & Swann-Ward, R. (2024, February). *Physiotherapy in cancer care: Oncology rehabilitation*. https://pnz.org.nz/Story?Action=View&Story_id=5204
- Dario, A., & Simic, M. (2021). Innovative physiotherapy clinical education in response to the COVID-19 pandemic with a clinical research placement model. *Journal of Physiotherapy*, 67(4), 235–237. <https://doi.org/10.1016/j.jphys.2021.08.008>
- Dobrow, M. J., Miller, F. A., Frank, C., & Brown, A. D. (2017). Understanding relevance of health research: Considerations in the context of research impact assessment. *Health Research Policy and Systems*, 15, Article 31. <https://doi.org/10.1186/s12961-017-0188-6>
- Hjørland, B. & Sejer Christensen, F. (2002). Work tasks and socio-cognitive relevance: A specific example. *Journal of the American Society for Information Science and Technology*, 53(11), 960–965. <https://doi.org/10.1002/asi.10132>
- New Zealand Parliamentary Counsel Office/Te Tari Tohutohu Pāremata. (2023, June 15). *Health practitioners' competence assurance act (2003)*. <https://www.legislation.govt.nz/act/public/2003/0048/latest/DLM203312.html>
- Toffel, M. W. (2016). Enhancing the practical relevance of research. *Production and Operations Management*, 25(9), 1493–1505. <https://doi.org/10.1111/poms.12558>
- Tonelli, M. R. (2010). The challenge of evidence in clinical medicine. *Journal of Evaluation in Clinical Practice*, 16(2), 384–389. <https://doi.org/10.1111/j.1365-2753.2010.01405.x>
- Tonelli, M. R. (2012). Compellingness: Assessing the practical relevance of clinical research results. *Journal of Evaluation in Clinical Practice*, 18(5), 962–967. <https://doi.org/10.1111/j.1365-2753.2012.01901.x>
- Zadro, J. R., Needs, C., Foster, N. E., Martens, D., Coombs, D. M., Machado, G. C., Adams, C., Han, C. S., & Maher, C. G. (2022). Feasibility of delivering and evaluating stratified care integrated with telehealth ('Rapid Stratified Telehealth') for patients with low back pain: Protocol for a feasibility and pilot randomised controlled trial. *BMJ Open*, 12, Article e056339. [doi:10.1136/bmjopen-2021-056339](https://doi.org/10.1136/bmjopen-2021-056339)