

## EDITORIAL

Methods Matter: Strengthening Research in *Family Medicine* and Beyond

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**HOW TO CITE:** Anderson LN.

Methods Matter: Strengthening  
Research in *Family Medicine* and  
Beyond. *Fam Med.* 2026;58(2):79–80.  
doi: [10.22454/FamMed.2026.772073](https://doi.org/10.22454/FamMed.2026.772073)

**FIRST PUBLISHED:** February 12,  
2026

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Welcome to this theme issue of *Family Medicine* focused on research methods and methodologies. We received submissions from around the world and from a wide range of scholars, including methodologists, social scientists, medical educators, and, of course, clinicians. It is fitting that many of the articles in this issue are authored by teams, reflecting the collaborative, interdisciplinary nature of research in health professions education. As I thought about the value of this issue, I recalled a quote from legendary basketball coach John Wooden: “It isn’t what you do, but how you do it.”

**WHY A METHODS ISSUE?**

Health professions education is a field enriched by scholars from different academic traditions.<sup>1</sup> While many of us received similar early introductions to the scientific method, that is often where the similarities in research training end. A PhD-trained medical anthropologist, for example, likely completed several advanced research methods courses as part of their education, whereas many clinicians come to research through hands-on experiences, perhaps during residency or through careers in medical education. These varied pathways into research shape how we think about, design, and conduct studies.

Over time, scholars can develop preferences for particular types of inquiry, becoming known as quantitative or qualitative researchers. Such specialization can be a boon; we benefit from the depth of expertise that methodologically-focused scholars bring to the field. However, this specialization can also become limiting when researchers design studies using only the tools with which they are comfortable. Many of us know colleagues who rely exclusively on surveys because they are uncomfortable conducting interviews, or who avoid quantitative

approaches for similar reasons. Similarly, health professions education as a field often relies on a limited set of methods that may potentially limit the scope of knowledge.<sup>2</sup> Bietsa and Braak<sup>3</sup> argue that researchers should expand their methodological repertoire, claiming that education researchers tend to rely on causal assumptions that cannot capture the “dynamics of educational communication and interaction.”<sup>3</sup> This also underscores an important principle: methods should not dictate the research question; rather, the research question should drive the method. Being aware of the methodological approaches and methods available allows us to select the tools most appropriate for answering the questions we ask. And if there is one thing we know about humans, it is that we will always have more questions.

**PARADIGMS, METHODOLOGIES, AND METHODS, OH MY!**

While many readers may be familiar, it is helpful to set the stage for the ideas we are exploring in this issue. To that end, it is important to understand how researchers arrive at particular methodologies or methods. Each of us brings a perspective shaped by our ontological, epistemological, and axiological assumptions.<sup>4</sup> These assumptions, formed from our personal, educational, and contextual influences, collectively support a research *paradigm*. Common paradigms in health professions education research include positivism, postpositivism, interpretivism, and pragmatism.<sup>5</sup> These assumptions about the nature of reality, knowledge, and values influence how we approach studying the world. Paradigms, in turn, lend themselves to certain methodologies. A methodology is “an approach to research linked to a paradigm or theoretical framework”<sup>6</sup> or, more simply, a systematic way of conducting inquiry. These may

include quantitative, qualitative, or mixed approaches. Methods, then, are the specific “procedures and tools”<sup>6</sup> used to collect data and may include tests, surveys, observations, interviews, and photographs, among others. While this is changing, health professions education research has historically demonstrated a preference for quantitative methods, likely because the field evolved from clinicians trained in scientific approaches.<sup>7</sup>

### READING THIS ISSUE

The call for papers for this theme issue invited authors to illuminate both the strengths and challenges of different research approaches, as well as specific methods for conducting research. Authors were free to focus on methodology, methods, or both. To that end, we highlight five specific types of methods: quantitative, qualitative, mixed, visual, and knowledge synthesis. In curating this issue, we sought contributions that span methodologies and methods. Some articles focus on methodological considerations, encouraging readers to think more deliberately about alignment between research questions and study design. Others offer practical guidance on specific methods, providing concrete strategies for data collection, analysis, and interpretation.

These articles also examine common challenges we encounter as editors. For example, studies that pose interesting questions that cannot be answered through the described methods or qualitative studies that attempt to quantify data. While this issue does not aim to make readers experts in all research approaches, we hope it supports authors in articulating their methodological decisions more clearly and confidently, thereby strengthening both the conduct and reporting of research. Clear methodological articulation also benefits readers, enabling them to better interpret and use findings, assess trustworthiness, and judge applicability to their own contexts.

Beyond its focus on methods and methodologies, we also hope this issue encourages collaboration. Health professions education research is inherently interdisciplinary and collaborative, leading to the research productivity that Varpio and MacLeod label the *multidisciplinary edge effect*.<sup>1</sup> Thoughtful partnerships among clinicians, social scientists, statisticians, and educators can deepen methodological rigor and expand the kinds of questions we are able to ask and answer. If this issue prompts a reader to seek out a new research collaborator, explore an unfamiliar approach, or reconsider how they frame a research question, it will have been a success.

Methods matter. They are essential tools for advancing understanding, improving education, and ultimately enhancing patient care. As you read and consider the articles, we invite you to engage not only as a consumer of information, but also as a reflective scholar, continually refining how and why you conduct education research in *Family Medicine*.

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