

Title of policy/position statement: Resource Paper on Global Health and Nursing Research Priorities

Issue being addressed: Research priorities to guide the Honor Society of Nursing, Sigma Theta Tau International's decision-making during the next biennium

Policy or position developed, recommended, adopted: It is recommended that Sigma Theta Tau International accept the following list of research priorities to guide its decision-making during the next biennium: promotion of healthy communities through health promotion, disease prevention and recognition of social, economic and political determinants; implementation of evidence-based practice; targeting the needs of vulnerable populations such as the chronically ill and poor; and capacity development for research by nurses.

Background of issue: A work group was formed by the Research/Scholarship Advisory Council (RSAC) to develop a paper identifying the research priorities that should be used to guide the Honor Society of Nursing, Sigma Theta Tau International's decision-making during the next biennium. Members of the work group are as follows: Patricia Davidson RN PhD, MRCNA, John Daly RN PhD FRCNA, Esther Chang RN PhD FRCNA, Mi Ja Kim RN PhD, Karen Hancock PhD, Quinn Mikalski RN. B Htlh Sci (Hons). The RSAC accepted the paper developed by the work group and submitted it to the board of directors for approval. RSAC members are as follows: Roberta Cavendish, PhD, RN, CPN; John Daly, RN, PhD, FRCNA, FCN, FINE; Jennifer Elder, PhD, RN, FAAN; Kenn Kirksey, RN, PhD, APRN, BC; Patricia Messmer, PhD, RN, BC, FAAN; Sandra Picot, PhD, RN, FAAN; and Catherine Toderò, PhD, RN.

INTRODUCTION

Recent decades have seen an exponential growth of nursing research that has improved the health of individuals and communities. This substantial body of work has positioned nurse researchers as leaders of health-related research, with many researchers working in interdisciplinary teams. This **RESOURCE PAPER** sets out recommendations for global nursing research priorities based upon a review of electronic sources, reference lists of published materials and policy documents. Documents were selected for this review if they derived priorities by use of a consensus approach. The priorities below are therefore indicative of hundreds of clinical experts and researchers in nursing and health. Where applicable, reference to specific policy documents is made. Addressing these priorities is critical to improve the health of communities locally and globally.

THE UNITED NATIONS MILLENNIUM DEVELOPMENT GOALS (MDGs) address the complex interplay of socioeconomic determinants and health and provide an important contextual milieu to regional health priorities.

1. *Eradicate extreme poverty and hunger.* Specifically, reduce by half the proportion of people living on less than a dollar a day and who suffer from hunger.
2. *Achieve universal primary education.* Ensure that all children complete a full course of primary schooling.
3. *Promote gender equality and empower women.* Eliminate gender disparity in primary and secondary education preferably by 2005 and at all levels by 2015.
4. *Reduce child mortality.* Reduce by two thirds the mortality rate among children under five.
5. *Improve maternal health.* Reduce by three quarters the maternal mortality ratio.
6. *Combat HIV/AIDS, malaria and other diseases.* Halt and begin to reverse the spread of HIV/AIDS and the incidence of malaria and other diseases.
7. *Ensure environmental sustainability.* Integrate the principles of sustainable development into country policies and programs; reverse loss of environmental resources. Reduce by half the proportion of people without sustainable access to safe drinking water. Achieve significant improvement in the lives of at least 100 million slum dwellers by 2020.
8. *Develop a global partnership for development.* Develop open trading and a financial system that is rule based, predictable and non-discriminatory.¹

In spite of local differences in health and research concerns, many regions share common priorities, and it is useful to list these to advance the science of nursing and assist in strategic planning for research. Many nurse research priorities are aligned to major diseases and regional health concerns. Below are listed a synthesis of global nursing priorities. What is apparent from this review is that nurses are advocates for the communities in which they work and responsive to local needs and conditions.

1. HEALTH PROMOTION AND DISEASE PREVENTION

Nurses play an important role in promotion of health and disease prevention as well as the management of illness states, and this is reflected in research priorities. The importance of primary prevention and promotion of healthy communities is of a global concern, with the following countries nominating this as a health priority: USA⁴, Australia^{3,5}, UK⁶, Thailand⁷, Nordic countries², Canada⁸, Republic of China (ROC)^{9,10}. Examples of focus areas include infectious, chronic, respiratory and sexually transmitted diseases; health service access; and maternal, infant and child health. Research in the prevention, management and treatment of infectious diseases is a high priority globally, particularly in Africa where human health is suffering greatly from HIV/AIDS and other infectious diseases¹¹. African nursing priorities based on research are related to prevention, care and epidemiological studies of HIV/AIDS; ROC^{9,10}, International Council of Nurses (ICN)¹², Canada⁸, Thailand⁷. The recent SARS outbreak is an example of the impact of globalization on the health of communities and the need to consider emerging infectious diseases and their mode of transmission.

2. ADVOCACY AND PROMOTION OF HEALTH OF VULNERABLE AND MARGINALISED COMMUNITIES

An overarching concern of key groups internationally is the development of strategies to improve health outcomes in socially disadvantaged and marginalized communities, such as indigenous people. This includes not only developing countries, but also the poorest of all societies, infants, children, older people, ethnic groups and communities in rural areas. Countries expressing these needs include Canada⁸, ROC¹⁰, USA⁴ and Australia³. Clearly, health and well-being is dependent on a complex interplay of social, political and economic factors as well as physiological determinants. Consideration of military conflict and social unrest are also important considerations in formulating global health research priorities.

3. QUALITY OF HEALTH CARE AND PATIENT SAFETY

An increasing emphasis on the need to ensure the quality and effectiveness of health care has created a research agenda for nurses and other health professionals. The following countries expressed these needs for nursing research: USA^{4,13}, Thailand⁷, UK¹⁴, Korea¹⁵, Spain¹⁶, Hong Kong¹⁷ and Australia. There is a growing understanding of the importance of ensuring access to evidence-based therapies given with attention to quality, safety and risk minimization. Internationally there is a focus on the development of nursing-sensitive outcome measures and patient safety²⁴. The USA has specified the need to focus on therapeutic nursing actions and outcomes and on developing nursing-sensitive outcome measures.²⁵ The strain on our health system is increasingly felt as the population continues to age and requires greater medical resources for chronic disease management. Focus has turned to finding more efficient, cost-effective ways of providing care. Nordic countries have expressed the need for cost-effectiveness evaluation in health care, particularly in terms of quality of care balanced with cost outcomes²⁰. One of the priorities of the USA is to identify and support future areas of opportunity to advance research in high quality, cost-effective care¹³.

4. DEVELOPMENT OF EVIDENCE-BASED PRACTICE AND TRANSLATIONAL RESEARCH

Evidence-based practice involves the integration of evidence, clinical expertise and patient values¹⁸. The following countries/regions have expressed the need for research to focus on evidence-based practice through action and evaluation of research related to the science of nursing: USA⁴, Australia³, Hong Kong¹⁷, Thailand⁷, Pakistan, Europe (include UK)¹². Korea specified the need for research into the utilization of nursing research in practice. Developing and evaluating models of

care for nursing practice is also a growing area of nursing research priority for many countries as well as ensuring practice based upon the best available evidence.

5. PROMOTION OF THE HEALTH AND WELL-BEING OF THE OLDER PERSON

In developing countries, people are living longer, which means that more people will experience diseases and disabilities that affect older adults. It has been identified that research needs to focus on the promotion of health of older people as well as addressing areas of disability, which includes identification of older adults at high risk of loss of independence, dementia research and creating environmental contexts to support older adults². Regions expressing this specific priority include Europe (including the UK and Nordic regions)^{19,20}, Australia³, Spain¹⁶, and ROC⁹. The increasing global burden of chronic disease is also an important consideration in the care of the older person.

6. PATIENT-CENTERED CARE AND CARE COORDINATION

The escalating burden of chronic disease means that in many countries there is an emphasis on secondary prevention chronic disease management strategies. Tailoring interventions responsive to the needs of patients and their families is a key priority. Also quality of life in both the general population and of older people with chronic diseases is listed as priority research^{4,12,16}. This includes analysis of the coordination between hospital and primary care settings for the continuity of care, expressed by Spain as a priority¹⁶. Continuity of care in terms of patient-centered information is also a priority, which requires the use of information technology and communication strategies for the transfer of information between service areas, seen as a priority by the UK¹⁴. Several countries specified the need for research into patients' perspectives of care and how they are assessed^{14,3}. Prioritization of education needs of consumers was expressed by Spain¹⁶. Research into the needs and quality of life of caregivers, including education and training needs, has been identified in Spain¹⁶ and the UK⁶ as discrete priority areas of research.

7. PALLIATIVE CARE AND END-OF-LIFE CARE IN BOTH MALIGNANT AND NON-MALIGNANT CONDITIONS

Traditionally, nursing research and inquiry has focused on the needs of the vulnerable. Population ageing, the increasing burden of chronic disease and the complexity of clinical management evoke dilemmas for patients, their families and clinicians. Enhancing the end-of-life experience for patients and their families is a research priority of the USA⁴. Spain listed the need to evaluate the degree of adjustment of nursing activities to the needs of terminally ill patients and their families¹⁶.

8. GENETIC TESTING AND THERAPEUTICS: IMPLICATIONS FOR CARE

Genetic research can involve nurses in areas such as basic biological studies as well as clinical decision-making and behavioral interventions. The USA research priority for genetic research is to evaluate the implications of genetic advances on the quality of care and life of patients⁴. Genetic research concerning predisposing factors to infant/child ill-health is a priority for Australia³ as well as the USA.

8. PROFESSIONAL ISSUES: CAPACITY DEVELOPMENT OF NURSE RESEARCHERS AND NURSING EDUCATION

Several regions, particularly those from developing countries, have identified the need to improve the research skills of nurses and teach nurses about the science of nursing^{21,22}. In Mediterranean countries²³ there was a need seen to develop knowledge of research among nurses and use technology to increase dissemination of research from this region. In order to implement recommendations, the Americas expressed the need for establishment of linkages and networks among disciplines influencing health with the specific countries. In the USA, the National Institute for Nursing Research (NINR) seeks to enhance the development of nurse researchers through training and career development opportunities. Major priorities include developing and increasing evidence-based leadership capacity; education focusing on the design, implementation and evaluation of future patient care delivery models; and education and research initiatives concerning positive work environments^{13,26}. Taiwan has set priorities of nursing research in education to

address advanced role preparation and to bridge nursing education and practice^{9,27}, while Korea has set priorities on research on the advanced practice nursing system and clinical competency¹⁵.

9. PROFESSIONAL ISSUES: NURSES' WORKING ENVIRONMENTS

There is a global shortage of nurses, and working conditions are considered largely responsible. Consequently, issues such as the quality of nurses' work life, creation of positive and healthy work environments, retention and satisfaction with work have been identified as research priorities. This category has been expressed as more of a priority for developed regions of Europe and the USA than for developing regions^{13,12}.

TOWARD A GLOBAL NURSING RESEARCH AGENDA

In spite of the discrete regional differences in nursing research priorities determined by local need, commonalities can be identified as described above. In summary, these include **PROMOTION OF HEALTHY COMMUNITIES THROUGH HEALTH PROMOTION, DISEASE PREVENTION AND RECOGNITION OF SOCIAL, ECONOMIC AND POLITICAL DETERMINANTS; IMPLEMENTATION OF EVIDENCE-BASED PRACTICE; TARGETING THE NEEDS OF VULNERABLE POPULATIONS SUCH AS THE CHRONICALLY ILL AND POOR;** and **CAPACITY DEVELOPMENT FOR RESEARCH BY NURSES**. Analysis of international nursing research priorities reflects that the profession of nursing is responsive to the dynamic global environment. Synthesis and integration of global nursing research priorities as well as promoting international research partnerships and nurturing a collaborative and strategic approach to improve global health are important in informing professional bodies and policy makers.

Resources/references:

1. United Nations. UN Millennium Development Goals. United Nations, The General Assembly. Available at: www.un.org/millenniumgoals. Accessed December 2004, 2004.
2. Hinshaw AS. Nursing knowledge for the 21st century: opportunities and challenges. *Journal of Nursing Scholarship*. 2000;32(2):117-123.
3. National Health and Medical Research Council. Strategic and Priority Driven Research. NHMRC. Available at: www.nhmrc.gov.au/research/apdres.htm. Accessed November 2004, 2004.
4. National Institute of Nursing Research. Mission Statement and Strategic Plan. National Institute of Nursing Research. Available at: <http://ninr.nih.gov/ninr/research/diversity/mission.html>, September 2004.
5. Oliver S, Clarke-Jones L, Rees R, et al. Involving consumers in research and development agenda setting for the NHS: developing an evidence-based approach. *Health Technology Assessment*.8(15):iii-iv.
6. Kitson A, McMahon A, Rafferty AM, Scott E. On developing an agenda to influence policy in health-care research for effective nursing: a description of a national R&D priority-setting exercise. *NT Research*. 1997;2(5):323-334.
7. Mahidol University Faculty of Nursing. *Thailand nursing research priorities, nursing research*. Bangkok: Mahidol University; 1996.
8. Canadian Institute for Health Research. Towards a National Health Research Agenda. Available at: www.cihr-irsc.gc.ca/e/documents/revolution.pdf. Accessed September 2004, 2004.
9. Yin TJC, Hsu N, Tsai SL, et al. Priority-setting for nursing research in the Republic of China. *Journal of Advanced Nursing*. 2000;32(1):19-27.
10. World Health Organization. Country Health Information Profile, People's Republic of China. WHO. Available at: www.wpro.who.int/chip. Accessed September 2004, 2004.
11. Labonte R, Spiegel J. Setting global health research priorities: burden of disease and inherently global health issues should both be considered. *BMJ*. 2003;326(7392):722-723.
12. International Council of Nurses. *ICN Position Statement on Nursing Research*. ICN. 1999.
13. AONE. AONE: 2004 Education and Research Priorities Announced. The American Organization of Nurse Executives. Available at:

- <http://www.aone.org/aone/edandcareer/priorities.html>. Accessed September 2004, 2004.
14. Ross F, Vernon S, Smith E. Mapping research in primary care nursing: current activity and future priorities... including commentary by Pearson P. *NT Research*. 2002;7(1):46-59.
 15. Kim MJ, Oh E, Kim C, Yoo J, Ko I. Priorities for nursing research in Korea. *Journal of Nursing Scholarship*. 2002;34(4):307-312.
 16. Moreno-Casbas T, Martin-Arribas C, Orts-Cortes I, Comet-Cortes P. Identification of priorities for nursing research in Spain: a Delphi study. *Journal of Advanced Nursing*. 2001;35(6):857-863.
 17. French P, Ho Y, Lee L. A Delphi survey of evidence-based nursing priorities in Hong Kong. *Journal of Nursing Management*. 2002;10(5):265-273.
 18. Sackette D, Richardson W, Rosenberg W, Haynes R. *Evidence-based medicine: How to teach and learn EBM*. Edinburgh: Churchill Livingstone; 1997.
 19. Tierney AJ. Nursing research in Europe. *International Nursing Review*. 1998;45(1):15-19.
 20. Hinshaw AS. Research. International nursing research priorities. *Journal of Professional Nursing*. 1997;13(2):68.
 21. Sigma Theta Tau International. *Arista 3 – African/Near East summary*. STTI. Available at: www.nursingsociety.org/programs/arista_Africa.doc.
 22. Sigma Theta Tau International. *Arista 3 Pacific summary*. Indianapolis: STTI; 2002.
 23. Sigma Theta Tau International. *Arista3 – Southern Europe/Mediterranean summary*. STTI. Available at: www.nursingsociety.org/programs/Arista_SouthernEurope.doc. Accessed December 2004.
 24. Ontario Ministry of Health and Long-Term Care. The Nursing and Health Outcomes Project. Ontario Ministry of Health and Long-Term Care. Available at: www.health.gov.on.ca/english/providers/project/nursing/background.html. Accessed September 2004, 2004.
 25. Canberra: NHMRC and ARC; 2004.
 26. National League for Nursing. Priorities for Research in Nursing Education. National League for Nursing. Available at: <http://www.nln.org/aboutnln/research/htm>. Accessed September 2004, 2004.
 27. Adams T. Informal family caregiving to older people with dementia: research priorities for community psychiatric nursing. *Journal of Advanced Nursing*. 1996;24(4):703-710.

Statement of availability of policy/position on Web with link:

Approval date and by whom:

Statement granting permission to reproduce with acknowledgment/reference

information: For reprint permission, contact Honor Society of Nursing, Sigma Theta Tau International, 550 W. North Street, Indianapolis, IN 46202. Source must be credited with the following text: Reprinted with permission. From Sigma Theta Tau International's Resource Paper on Global Health and Nursing Research Priorities published in 2005 by the Honor Society of Nursing, Sigma Theta Tau International.

Copyright statement: Copyright 2005, Sigma Theta Tau International. All rights reserved.

Sigma Theta Tau International mission statement: The Honor Society of Nursing, Sigma Theta Tau International provides leadership and scholarship in practice, education and research to enhance the health of all people. We support the learning and professional development of our members, who strive to improve nursing care worldwide.