

Shared Leadership for Nursing Research

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Nursing research has traditionally been an issue of importance to many national and provincial/territorial nursing organizations and, at the same time, not a central priority for anyone. Opportunities have undoubtedly been lost because of the lack of concerted or coordinated effort to advance the importance of nursing research in addressing quality of care, patient safety, health promotion and a myriad of other topics that affect the health of Canadians and the provision of healthcare.

Over the past few years there has been increasing recognition that advocacy for nursing research is a responsibility that requires a collaborative approach. With the guidance and support of the Office of Nursing Policy (Health Canada) and the substantive assistance of Leslie Degner, RN, PhD, Denise Alcock, RN, PhD and Pat Griffin, RN, PhD, the Canadian Nurses Association (CNA), the Canadian Nurses Foundation (CNF), the Canadian Association of Schools of

Nursing (CASN), the Canadian Association for Nursing Research (CANR) and the Academy of Canadian Executive Nurses (ACEN) determined to work together and share a leadership role in advancing nursing research and innovation in Canada. To this end they have formed the Canadian Consortium for Nursing Research and Innovation. The significance of this initiative may best be seen by putting it within a historical context.

Unlike our colleagues to the south, who have an Institute for Nursing Research within the National Institutes of Health, Canadian nurse researchers have never had a dedicated source of funding for research. We also were slower than the United States and some other countries in establishing doctoral programs in nursing, and hence did not have a critical mass of potential researchers. According to the Canadian Institute for Health Information (2002), there were 671 doctorally prepared nurses in Canada in 2001 (this repre-

sented 0.29% of all registered nurses in Canada); of them, 234 had a doctoral degree in nursing, with the remainder having earned a doctorate in a variety of other disciplines. Today there are 13 nursing doctoral programs in Canada (CASN 2004). A further factor affecting the development of a critical mass of nurse researchers in Canada is the fact that nurses, on average, graduate from doctoral programs at a much older age (over 40 years) than their counterparts in basic science. Thus, nurse researchers have a shorter career to devote to a program of research. As well, a large number of current nurse researchers will retire over the next 10 years.

Despite these challenges, some nurse scientists have seen enormous success both nationally and internationally. Although nursing did not have dedicated funding, funds for health research have been available to nurse researchers nationally through the National Health Research and Development Program (NHRDP) of Health Canada, as well as from several health charities such as the Heart and Stroke Foundation, the Alzheimer's Association, the National Cancer Institute of Canada and others. Also, some provinces have research funding programs in the health field. Traditionally, nurse scientists were not very successful in competing for funding from the Medical Research Council of Canada. However, for a 10-year

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period that ended in the mid 1990s, there was a special MRC/NHRDP program of career and research support for nurse scientists. While there were not a large number of people who benefited, those who did went on to succeed in the regular career support competitions of MRC, NHRDP or both. More recently, the MRC was transformed into the Canadian Institutes for Health Research (CIHR) and given additional funding to address all areas of health research across all health disciplines.

CNA led a lobby of the federal government in 1999 that resulted in a \$25 million investment in nursing research. These funds are administered by the Canadian Health Services

Research Foundation (CHSRF), which at the time was a newly created research funding program of the federal government. These developments provided much-expanded resources for nursing research. Today more than 20 nurses hold research chairs, including three Canada Research Chairs, five CHSRF-funded chairs and several privately endowed chairs in Canadian academic institutions.

Despite the increased availability of research funds, there are continuing challenges for nurse scientists in establishing programs of research and obtaining funding and career awards (Alcock and Arthur 2003). Infrastructure funding for nursing research continues to be insufficient, according to deans and directors of schools of nursing and nurse researchers in both universities and clinical facilities.

Another challenge for nursing is the need to link research to the clinical base of nursing practice. This could best be achieved by increasing the number of “clinician scientists” whose primary appointment is in a clinical agency. At present, most nurse investigators are employed by universities. Even our academic health organizations have not yet embraced the academic mandate of nursing and, as a result, the visibility of nursing research remains poor in many teaching hospitals.

Finally (but not the least of concerns, as expressed by many nursing organizations), the research agenda for nursing is not, for the most part, being driven by nursing. Rather, it is driven by the mandate and agenda of the funding organization.

These issues and challenges emerged from an invitational meeting of nurse scientists, nursing leaders and policy makers entitled *Pathfinding for Nursing Science in the 21st Century*, held in Ottawa at the call of the Office of Nursing Policy, Health Canada, in October 2002. A major recommendation was that an organization was needed to provide a coordinated voice for nursing research in Canada. It was clear that no single national nursing organization could represent the entire community of nurses with a serious interest in research. Collaboration was the most feasible solution, and so the Canadian Consortium for Nursing Research and Innovation (CCNRI) developed.

The Consortium will provide the needed leadership and a coordinated voice for the advancement of nursing research and innovation in support of the health and healthcare of Canadians. It will develop a strategic plan, build partnerships and linkages and advocate for funding of research programs, infrastructure, career awards and other initiatives. The Consortium should provide a powerful voice for nursing science and for the uptake and utilization of evidence.

The Consortium is presently preparing a proposal for start-up funding and will prepare a plan for evaluation and sustainability. Members of the Consortium are preparing a memorandum of understanding to govern their commitment and to describe relationships, responsibilities and obligations inherent in such an initiative. While the founding members are the five national

associations (ACEN, CANR, CASN, CNA and CNF), with the Office of Nursing Policy as an ex officio member, the membership will be reviewed annually and additional stakeholder groups added as required. The members of the Consortium are committed to developing a mechanism by which other nursing and stakeholder groups can provide input. They also wish to include representation from CHSRF/CIHR nursing chairs.

This is an exciting initiative and, if successful, should contribute significantly to building further capacity in nursing research in Canada. Furthermore, the members of the Consortium have extensive experience and networks that could significantly increase the visibility of nursing research and promote the use of evidence in practice, policy and healthcare.

References

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These speakers can change your mind:

Graham Scott, Anthony Fell, Maureen Quigley, Dr. John Frank, Tom Closson, Dr. Mary Ferguson-Paré, Tony Dagnone, Phil Hassen, Dr. Donald Low, Joseph Mapa, Dr. Robert Maunder, Fran McBride, Leslie Vincent, Dr. Matt Morgan, Dr. Ross Baker, Sheila Weatherill, Dr. Sue MacLean, Matthew Anderson, Tom Closson, Hugh MacLeod, Dr. Jim MacLean, Minister George Smitherman, Michael Decter, Dr. Alan Hudson, Dr. Michael Guerriere. They have been our special guests. Before summer we'll hear: Richard Alvarez, Hume Martin, Adalsteinn Brown, Mary Jo Haddad, Gail Paech.

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