日本看護科学学会研究活動委員会 平成6年度研究討論会

教育講演

看護研究の推進とネットワーキング

Promoting Nursing Research : Networking Researchers

講師：フランシス・マルカス・ルイス博士

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研究活動委員会では、研究活動をより一層活発にするための方策を探ろうと、昨年2回アンケートを行いました。その結果を踏まえて、平成6年度は研究者のネットワーク作りをめざした研究討論会を開催致しました。午前中は教育講演、午後は分科会を行いました。

教育講演は地域看護学研究会（世話役：金川克子東大地域看護学教室教授，日本看護科学学会理事長）が，日本学術振興会を通して招へいたしたF.M.Lewis博士にお願いしました。

当日の講演は，博士が精力的に研究を続けておられる研究テーマ「乳がんが患者家族に及ぼす衝撃と家族サポートの強化」について，どのように研究ネットワークを作っていたか，その中で研究者がどのように育っていったかを実例を通してわかりやすく話して下さいました。

当日の準備のために，研究ネットワーク創造の主要点をまとめて下さった原稿がございますので，ここに掲載させていただきます。

研究活動委員会委員長 川島みどり

紹介：1967年にLoretto Heights大学でB.S.N.，1968年にWashington大学でM.N.，1977年にStanford大学でPh.D.（教育社会学）を取得されました。

現職の他に，目下，Cancer Clinical Investigation Review CommitteeやNational Cancer InstitutesのCancer Control Review Committeeの委員，また，Office of Cancer Communicationの理事でもあります。さらにNursing Research, Western Journal of Nursing, Public Health Nursing, Social Science and Medicine, Patient Education and Counselingの編集担当理事や査読委員として活躍されています。

看護学，社会学，健康教育学をベースに，ここ10年間は，慢性疾患をもつ患者とその家族の家族機能，サポートの方法に関する研究を組織的に，精力的に続けておられ，60以上の研究論文がこのテーマで発表されています。

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Frances Marcus Lewis, R.N., Ph.d., F.A.A.N.

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◆Introduction and Greetings

Thank you for the opportunity to be with you today to explore ways in which nursing research can be further advanced through networking. It is my privilege and honor to be here. I salute you and the Japan Academy of Nursing Sciences for your long-range vision and current activities in developing a strong research base in nursing science.

I have had the opportunity to study materials sent to me by the Academy. I am excited for you and your future and look forward, over the years ahead, of learning of your increased accomplishments as nursing scientists. Your science will contribute to nursing science everywhere and I will personally gain as a scientist from your contributions.

Promoting Nursing Research: Science or Nursing Science

Nursing research and nursing science is in its adolescence. Not until the 20th century did scientific inquiry in nursing assume a formal existence. It was not until the middle of the 20th century that nurses as a professional collective substantially commit themselves to scholarship and the advancement of the scientific base for nursing practice (McCorkle and Lewis, 1980). This commit-

ment was reflected in the birth of our discipline's first research journal, Nursing Research. Soon after that, the American Nurses Foundation established a national research center. Concurrently, coordinated efforts between the American Nurses Foundation and the Division of Nursing of the Public Health Service coordinated efforts to financially support nursing research.

Early on it may be helpful to ask the question: What is being promoted? Is science being promoted? Is nursing science being promoted? The answers to these two questions frame who and why you would "network". Let me please assume that you want to advance nursing research, not just research. Nursing research has as its goal the development of health-focused strategies that activate, develop, or enhance a person's family's, or community's achievement of well-being (McCorkle and Lewis, 1980). Nursing research focuses on the human condition and the development of science that deals with the human response to health and illness states. As such, nursing research focuses on problems and areas relevant to that goal; conceptualizes phenomena to be studied in ways that complement that goal; and goes well beyond the participation of research that is conceptualized and conducted by others.

Establishing Research Priorities: Consensus Panels

Established research priorities help focus the programs of research that need development and advancement. You have already begun to identify your research priorities through a survey of your membership. These surveys are critically important, as are other forms of establishing your research agenda.

Identified research priorities can help nurses reflect on the health-focused concerns in Japan that need and deserve attention in the research agenda. Research priorities help all of us keep honest and attentive to what is really important, rather than focus disjointedly on multiple areas, only some of which may or may not be critical to develop. Research priorities also need to be recycled and reviewed at multiple intervals in order to remain current.

Ideally clinicians, nurse educators, and nurses with doctoral training participate in the establishment of the research priorities. Methods of generating these priorities include Delphi panels, focus groups, consensus panels of experts, large- or small-scale survey research.

Research priorities help establish the research agenda. These may be different from or complementary to practice priorities. Bringing together the leadership in both arenas from which both practice and research priorities are generated can yield very fruitful results.

The formation of consensus panels and dissemination of their reflections is also important. Such panels, unlike survey approaches to establishing priorities, foster networking and dialogue. In face-to-face exchange participants are able to carry out in depth discussion about research directions

that are not part of a mail survey.

Research priorities are disseminated: In national and regional conferences, through professional newsletters, and through staff development and inservice and continuing education offerings. Nurses providing direct services as well as academicians and nurse scientists need to be the recipients of these research priorities.

Linkage with Other Discipline's Scientists

As in nursing practice, nursing science is not generated in a vacuum of nursing. It is generated within an interdisciplinary field. Increasingly, large-scale research conducted in our country is not only interdisciplinary, the RFAs and R01s are scrutinized for their being interdisciplinary. Frankly, health care concerns are so complex and of such a large magnitude that an interdisciplinary team is often needed.

What mechanisms currently exist for your interdisciplinary exchange with other scientists in the health care field? Who of these scientists want to engage with you? Who would benefit from research with you?

Developing a Cadre of Next Generation Nurse Scientists

In the early stages of a science's development, one of the primary goals is the preparation of a significant body of scientists. First generation nurse scientists are trained and educated by others, often non-nurses. Second generation nurse scientists are educated by nurses who were trained/educated by non-nurses. Third generation nurse scientists are educated by nurse scientists who are training/educating other nurse scientists.

Networking includes networking the faculty educators of these nurse scientists. Dia-

logue focuses on mentorship, on advanced research methods, on the content and scope of what constitutes the domain of a nursing science curriculum.

Establishing and Advancing Funding Mechanisms for Research

Research requires resources: research personnel, materials, equipment, travel expenses, and other supplies. Although many of us began our research programs with little or no extramural funds, the reality is that rigorous research is often enhanced and facilitated through funding sources.

What are your sources? Who can successfully compete for these funds? Are there different funding mechanisms available for funding: Foundation support, governmental support, professional associations, charitable organizations, drug companies?

Japanese businesses have an international reputation for supporting and taking care of their employees. What are the current funding mechanisms available from business for nursing research that could help the businesses further take care of their employees? Such research could focus on, for example, stress management in the worksite, reduction of substance abuse, anger management, or other areas in which there is epidemiological evidence of health concerns. If business is “family” in Japan, is the family helping nurses do research to help the family?

Developing Special Interest Groups

In what ways have you organized or developed mechanisms to link nurses who have special interests. These linkages, ideally, occur between clinicians and nurse scientists, not just between nurse scientists. Clinicians as well as nurse scientists can inform the

science to be developed. Often it is the clinician who can formulate the outstanding practice related research question. Often it is the clinician who has a cadre of clinical observations that help focus the research project in the most salient way.

Special Interest Groups (SIGs) are one mechanism within a professional nursing organization to link clinicians and researchers in a shared area of common research interest. Conferences can build in times for these SIGs to meet and to “round table” areas of interest.

Integrating the clinician Investigators

In what ways do you currently work with, integrate, and engage with the Masters prepared clinician investigators. Is there an appropriate place, too, for the baccalaureate nurses? for the practicing R.N.s who do not have a baccalaureate degree?

What are the policies about research and participation in research that are part of the job descriptions of nurses in your hospitals, in your clinics, in your worksites, in other agencies. Is participation in nursing research part of the job description? Does it need to be?

Networking Nurse Administrators and Nurse Scientists

One of the most powerful two groups to network are the nurse administrators and the nurse scientists. Although often educated and socialized differently, it is really these two groups- IN FULL PARTNERSHIP-that have the most potential to advance practice and to integrate nursing research findings into the practice arena.

Consider Grande Rounds Conferences in topical areas of interest to nurse administrators that are offered by nurse scientists.

These can focus on topic areas of primary interest to the administrators and the presentations by nurse scientists would focus primarily on the service implications, not merely research implications, of the research results.

Advancing Research Methods

There is a growing body of methodological literature that is not only increasingly technical, but also reflects multiple research paradigms, not just a single paradigm. Networking among nurse scientists needs to include formal mechanisms for advancing the research methodology skills of existing nurse scientists. These mechanisms can include invitational conferences on advanced research methods, continuing education offerings in research methodologies, and post-doctoral training grants.

These advanced methods conferences are not remedial; remedial education is important, but these are not intended to be remedial. Rather, advanced training in research methods for nurse scientists is meant to focus on the cutting edge issues in research methodology.

Creating a Clearinghouse of Information on Research Consultants and Speakers

Networking can link beginning nurse researchers with more seasoned investigators. This can be an exhilarating and highly positive exchange. Once again, PARTNERSHIP, not hierarchy, is the key word in which to frame these exchanges.

A first step to this form of networking is the formation of a directory for consultants and for speakers: a Consultant Bureau and a Speakers Bureau. Each nurse scientist in Japan can be given the opportunity to be

listed in one or both of these directories, along with their requested fee (if any), specialty areas, and methods to be contacted.

Disseminating Research Results

Research dissemination is key to the advancement of nursing science. To whom and in what ways are you disseminating? Who is served by this dissemination? If you think about the infrastructure of the nurses in Japan, who is currently being served by the current forms of research dissemination? Who is currently being underserved? In what ways, if any, can those who are underserved be better served?

Collaboration among Nurses and Nurse Scientists

Who is collaborating with whom in Japan? Toward what goals is collaboration occurring? Are there hidden beliefs that some are more worthy collaborators than others? Are their hidden or explicit status hierarchies operating within nursing as a discipline that are mitigating against the development of nursing science?

Linking Research to programs and Health Care Policies

The conduct of nursing research is a sufficient goal, but it is self-limiting. Research needs to be advanced to the development of programs and health care policies that respond to and integrate the research findings. Health programs and policies, as well as the advancement of science, are appropriate goals for the research endeavor.

In the 1960's, when nursing research was still in its infancy, we were content in the U. S. to conduct rigorous research. In the past

20 years, graduate level programs preparing clinicians and scientists are increasingly requiring courses in health care policy and programs.

Dr. Barbara Givens, Ph.D., R.N. is exemplary among the nurse scientists who are actively linking their research with health care policy. Dr. Givens research program has focused on factors affecting long-term adjustment to chronic debilitating illness, including cancer and Alzheimer's disease. Dr. Givens has systematically affected the policy and programs and law of the state of Michigan in these areas. Legislators look to her research for both questions and answers to the state's program needs. Dr. Given is in regular contact with the legislature; her research has substantially affected the types and forms of programs and services available in Michigan for persons and families affected by Alzheimer's disease.

Concluding Remarks

Nursing is a practice discipline that derives its ultimate authority from the people and patients it serves. The mission of nursing science is to advance the science that informs the practice of nursing. Within that spirit, networking brings together nurses, nurse scientists, and resources that advance not only the science and practice of nursing, but the human condition as well.

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