Mission Statement
The National Institute of Nursing Research supports clinical and basic research to establish a scientific basis for the care of individuals across the life span—from management of patients during illness and recovery to the reduction of risks for disease and disability, the promotion of healthy lifestyles, promoting quality of life in those with chronic illness, and care for individuals at the end of life. This research may also include families within a community context. According to its broad mandate, the Institute seeks to understand and ease the symptoms of acute and chronic illness, to prevent or delay the onset of disease or disability or slow its progression, to find effective approaches to achieving and sustaining good health, and to improve the clinical settings in which care is provided. Nursing research involves clinical care in a variety of settings including the community and home in addition to more traditional health care sites. The NINR's research extends to problems encountered by patients, families, and caregivers. It also focuses on the special needs of at-risk and under-served populations, with an emphasis on health disparities. These efforts are crucial in the creation of scientific advances and their translation into cost-effective health care that does not compromise quality.
NINR accomplishes its mission by supporting grants to universities and other research organizations as well as by conducting research intramurally at laboratories in Bethesda, Maryland. The research fosters interdisciplinary collaborations to ensure a comprehensive approach to research on health promotion, illness, and disabling conditions. This approach is especially relevant in research such as that aimed at long-term care for the elderly, the special needs of women across the life span, bioethical issues related to genetic testing and counseling, biobehavioral aspects of managing the prevention and treatment of infectious diseases, end of life care, and environmental influences on risk factors related to chronic illnesses. NINR research includes all age groups and is based on adequate gender and minority representation.
NINR's intramural investigations, with an interdisciplinary, patient-focused approach to human health and illness, are particularly suited to the research environment on the NIH campus. The unique clinical research facilities offer diverse opportunities for professional exchange and collaboration on questions related to patient care and quality of life. These studies also provide training opportunities that acquaint scientists with the research issues and clinical strategies employed by investigators in nursing research.
In addition, the Institute supports comprehensive research training and career development programs to prepare individuals with requisite skills to conduct nursing research in an interdisciplinary setting.
January, 2005

Strategic Planning for the 21st Century
Prologue from the NINR Director
THE BEGINNING
The National Institute of Nursing Research was established as a Center at the NIH on April 16, 1986, and as an Institute on June 10, 1993. This placement among the 25 Institutes and Centers within the NIH has added a new scientific perspective a clinical and nursing perspective to enrich the mainstream of the nation's biomedical and behavioral research endeavors. The broad spectrum of nursing research encompasses both clinical and basic investigations. The patient or the individual is the central focus of most studies, which also involve factors such as the family and the community that influence the health of the whole person. People with special health needs receive particular research attention, including women, minorities, the elderly, residents of rural areas, and the economically disadvantaged. The scientific knowledge gained from nursing research is frequently designed to enrich clinical practice and improve the health of the American people.
Since the nursing research capacity must be sufficient and responsive to present and future national health research needs, we must focus on developing the next generation of nurse researchers. To ensure that the cadre of nurse researchers is maintained and expanded, we will continue to support the continuum of research training needs - from attracting nurses to the field of research to providing pre- and post doctoral training and research opportunities.
THE BUDGET
The budget for NINR is specified in annual appropriations laws. NINR's initial budget (as a Center) was $16 million. Today, the budget is nearly $138 million, which is approximately distributed as follows:
- 75% for extramural research project grants
- 8% for pre- and postdoctoral training
- 6% for research management and support
- 5% for the centers program in specialized areas
- 3% for other research including career development
- 1% for the intramural program
- 2% for contracts and other expenses

Most of the NINR budget is allocated to extramural research projects consisting primarily of traditional research grants (R01). NINR's budget support for training reflects a commitment to develop the next generation of researchers. NINR's newly established intramural program is comprised of a wound healing laboratory and a health promotion laboratory. A laboratory on symptom management is also planned for the intramural program. NINR collaborates with other Institutes and Centers in many areas of mutual interest, including joint funding of research project grants and requests for applications. Collaboration extends to other agencies within the Department of Health and Human Services and beyond, including the Health Resources and Services Administration (HRSA), Agency for Healthcare Research and Quality (AHRQ), and the Centers for Disease Control and Prevention (CDC).

THE PLANNING PROCESS
The NINR initiated a planning process shortly after its inception. The goal was to facilitate the growth of a relatively new arm of nursing science - one that is dedicated mainly to biomedical and behavioral factors pertinent to health and health care, as distinct from factors related to nursing staffing patterns, organizational structure, or access to care issues, which are other important facets of nursing research. In order to obtain input into the planning process from leaders of nursing science, the Institute convened two meetings five years apart that were entitled "Conference on Research Priorities in Nursing Science," known as CORP. The results of these meetings represented an important part of NINR priority setting for almost a decade. Each CORP was constituted by nursing research experts who recommended five-year agendas, and each five-year agenda included five to seven areas of research emphases to be directed at major national health issues.

By early 1990, partly stimulated by the Federal investment in nursing research, scientific progress was beginning to accelerate more rapidly - providing findings with critical implications for health care. To capitalize on this encouraging trend, NINR made adjustments to the earlier planning process and now uses a more flexible, cost-effective approach. This new method includes a wider variety of participants and permits both a long-range steadiness of purpose and more immediate adaptations to changing needs and opportunities. Our planning now involves more frequent meetings of smaller groups that consist of nursing researchers, representatives of other NIH Institutes, and experts from the larger multidisciplinary community of scientists and health care professionals to identify pressing issues, research opportunities and gaps in knowledge.

The planning process also involves systematic reviews of NINR's research programs, including consideration of proposed initiatives and the results of portfolio reviews by the NINR's National Advisory Council for Nursing Research. Taken into account are variables such as changing demographic and economic trends, scientific breakthroughs, new theories, collaborations, and partnerships. Opportunities to collaborate are identified through staff participation on NIH coordinating committees and special interest groups and through interactions with the research community and other organizations with common research interests. Also factored into the planning mix are emerging health challenges, congressional directives, and NIH/DHHS priorities. In addition, future human and financial resources likely to be available for research activities are estimated.

NURSING RESEARCH: MAKING A DIFFERENCE
Planning future research for the next five years and beyond into the next century is a welcome challenge for NINR and the scientific community. Basic to planning for the nursing future is a review of our current science in order to assess and build upon the progress made so far. Our contributions to the scientific
foundation that nourishes the work of health care practitioners are already making a difference in health care and have an increasingly significant potential to do so. This base of knowledge merits expansion in creative new directions. Below are examples of research contributions of NINR-supported researchers that have propelled scientific progress in some of the key areas of health care - areas that will continue to dominate our Institute's future research portfolio:

- **Chronic Illnesses**
  Cancer patients can improve adherence to chemotherapy treatments, since it is now possible to predict which among them are likely to experience nausea during chemotherapy and to prevent or ease this unpleasant side effect.
  Certain pain relievers for acute pain are more effective in women than in men, which reveals the importance of considering gender in providing analgesics for pain relief.
  When family caregivers of cancer patients are trained and provided with expert support by nurses, the health of both patient and caregiver is improved and phone calls to physicians' offices are cut in half.

- **Quality and Cost Effectiveness of Care**
  The quality of patient care and reduced health care costs result from use of a Transitional Care Model in multiple patient populations that facilitates early hospital discharge and receiving follow-up care in the home by advanced practice nurses.
  Teens that typically have trouble controlling their diabetes are able to improve control after training in coping skills, particularly in difficult social situations.

- **Health Promotion and Disease Prevention**
  An eight-week education and exercise program conducted in elementary schools can significantly reduce risk factors for cardiovascular disease in young children.
  Home visits by nurses to disadvantaged young mothers and their children can improve physical and mental health, reduce child injuries and abuse, and lower the numbers of arrests of mothers and of families that are dependent on welfare.

- **Management of Symptoms**
  Gender differences exist that modify patient's response to therapeutics.
  Animal research indicates that providing morphine before and after surgery decreases the metastatic-enhancing effects of surgery and prevents a cycle of pain from developing.
  Patients at higher risk for pressure sores can be identified within a few days of admission to a health care institution so that early preventive action can be taken.

- **Adaptation to New Technologies**
  Lung transplant patients can be helped using modern telehealth techniques that include a spirometer-monitoring device to transmit daily information on pulmonary function, vital signs and symptoms to health care professionals at a remote location. This telehealth technology permits early identification of problems, such as incipient rejection or infection.
  Patients or nursing home residents fed by a tube are benefiting from a recent, scientifically tested procedure that helps assure correct insertion of the tube. An incorrect insertion could route food to the respiratory system, which can be fatal. The new technique is as accurate and is much cheaper than the usual method of using X-rays.

- **Health Disparities**
  High blood pressure in inner city young African-American men can be controlled and use of the emergency room significantly reduced when a multidisciplinary health care team provides intensive interventions that include home visits, counseling, employment information, and transportation.
  Hispanic people, for whom there is insufficient health-related material in their language, are the beneficiaries of an Arthritis Self Management Program in Spanish that has been developed and tested for cultural sensitivity and effectiveness in easing the symptoms of this disabling disorder. This project is being expanded nationally and extended to include a number of other chronic disorders.

- **Palliative Care at the End of Life**
Families are often ready to minimize or eliminate aggressive treatments of their ill relatives in favor of high quality comfort care if the families understand that the conditions are terminal. Improvement of caloric intake in animals with cancerous tumors does not reverse cachexia, or wasting, a disturbing symptom at the end of life, which may have significance for humans.

THE FUTURE

The next century challenges nursing research with many critical imperatives for improving health and health care. Changes in our nation's population and their needs and expectations will impact the direction of nursing research. More people will live longer and be subject to diseases and disabilities that affect older adults. More will be members of minority populations - who frequently experience disparities in the incidence, prevalence and seriousness of disease and in access to care. Individuals are becoming increasingly demanding about participating in health decisions and managing their care. And although more people are aware of the importance of prevention, there is still the need to engage in healthier lifestyles. Many will spend less time in the hospital and will rely on home care from either professional or family caregivers. More individuals will become caregivers and face balancing work and personal time with providing home care for ill relatives. Virtually everyone would want assurance that when we reach the end of life, we can die with dignity, free from pain. Nursing research, already addressing these issues, must expand significantly to meet these urgent national needs.

Changes in technology and hospital systems and staffing also impel new scientific emphases on such issues as integrating new findings in genetics into our society's health care system while preparing the public to understand and accept what promise to be considerable alterations to how people live their lives and experience illness. How configurations of hospital systems and staffing influences optimum healthy outcomes for patients must be better understood. Despite numerous, impressive scientific advances, the nation's healthcare system's use of new findings is uneven, which can result in suboptimal treatment and care. Thus the pace of diffusion and adoption of new technologies and methodologies needs to be quickened. It is imperative to concentrate on making certain that our valuable scientific findings are incorporated into widespread practice.

Greater emphasis must therefore be placed on reporting nursing research activities and findings to other researchers, clinicians, the media, and the public. An increase in timely publication of nursing research in multidisciplinary and nursing peer-reviewed journals and appropriate web sites is critical. Furthermore, since taxpayers support much of nursing research, they have interest in the outcomes and the right to be able to follow its progress in a variety of lay language media.

The NINR's first five-year strategic plan for the next century is a distillation of many voices representing a variety of perspectives - from nursing science leaders and members of other scientific disciplines and institutions to policymakers and users of the healthcare system. This document continues an ongoing priority-setting process that will influence the nation's future health and health care in the 21st century.

Vision for the Future

NINRs vision for the future is to reshape not only health research and health care, but also the way Americans view the importance of good health in their lives.

Mission of the National Institute of Nursing Research

The National Institute of Nursing Research supports clinical and basic research to establish a scientific basis for the care of individuals across the life span from management of patients during illness and recovery to the reduction of risks for disease and disability, the promotion of healthy lifestyles, promoting quality of life in those with chronic illness, and care for individuals at the end of life. This research may also include families within a community context. According to its broad mandate, the Institute seeks to understand and ease the symptoms of acute and chronic illness, to prevent or delay the onset of disease or disability or slow its progression, to find effective approaches to achieving and sustaining good health, and to improve the clinical settings in which care is provided. Nursing research involves clinical care in a variety of settings including the community and home in addition to more traditional health care sites. The NINR's research extends to problems encountered by patients, families, and caregivers. It also emphasizes the special needs of at-risk and under-served populations. These efforts are crucial in the creation of scientific advances and their translation into cost-effective health care that does not compromise quality.
STRATEGIES TO ACHIEVE THE MISSION
NINR accomplishes its mission by supporting grants to universities and other research organizations as well as by conducting research intramurally at laboratories in Bethesda, Maryland. The research fosters interdisciplinary collaborations to ensure a comprehensive approach to research on health promotion, illness, and disabling conditions. This approach is especially relevant in research such as that aimed at long-term care for the elderly, the special needs of women across the life span, bioethical issues related to genetic testing and counseling, biobehavioral aspects of managing the prevention and treatment of infectious diseases, end of life care, and environmental influences on risk factors related to chronic illnesses. NINR research includes all age groups and is based on adequate gender and minority representation.

NINR's intramural investigations, with an interdisciplinary, patient-focused approach to human health and illness, are particularly suited to the research environment on the NIH campus. The unique clinical research facilities offer diverse opportunities for professional exchange and collaboration on questions related to patient care and quality of life, such as the management of chronic wounds that often accompany periods of long-term illness and immobility. These studies also provide training opportunities that acquaint scientists with the research issues and clinical strategies employed by investigators in nursing research. In addition, the Institute supports comprehensive research training and career development programs to prepare individuals with requisite skills to conduct nursing research in an interdisciplinary setting.

Scientific Goals and Objectives
The following scientific goals and objectives are established for the five-year period of 2000-2004. The specific bullets noted under selected objectives are meant to provide examples of activities or topics that would help us achieve our goals. These items may be supplemented by others during the life of this plan.

Goal 1: Identify and support research opportunities that will achieve scientific distinction and produce significant contributions to health.

Objectives:
1.1 Provide leadership in selected areas of science such as:

- **Chronic illness experiences**, such as managing symptoms, avoiding complications of disease and disability, supporting family caregivers, promoting adherence and self-management activities, and promoting healthy behaviors within the context of the chronic condition.
- **Cultural and ethnic considerations** in health and illness, including culturally sensitive interventions to decrease health disparities among groups by focusing upon health promotion activities and chronic illness management strategies.
- **End of life/palliative care research**. NINR is currently the lead institute at NIH for this area of research and is focusing on clinical management of physical and psychological symptom management, communication, ethics and clinical decision-making, caregiver support, and care delivery issues.
- **Health promotion and disease prevention research**, particularly as it relates to lifestyle changes and healthy behavior maintenance across the lifespan.
- **Implications of genetic advances**, including reducing factors that increase risk of disease, issues related to genetic screening, and subsequent gene therapy techniques.
- **Quality of life and quality of care**, to include cost savings for the patient, health care system, and society.
- **Symptom management** of illness and treatment, such as pain, cognitive impairment, fatigue, nausea and vomiting, and sleep problems.
- **Telehealth interventions and monitoring** or other emerging technologies to promote patient education and treatment.
1.2 Promote collaboration and leadership within NIH in interdisciplinary research activities that address issues such as ethical dimensions of research and biobehavioral research that underlies clinical practice.

1.3 Capitalize on opportunities for nurse researchers to serve on trans-NIH committees that influence research directions.

1.4 Forge partnerships with key agencies, associations, consumers and others to promote nursing research. These collaborations would include other federal research agencies, such as AHCPR, NIOSH, and would seek opportunities to address research issues of mutual interest that cross agency boundaries, such as ongoing development of outcome indicators and evaluation of intervention effectiveness.

**Goal 2: Identify and support future areas of opportunity to advance research on high quality, cost-effective care and to contribute to the scientific base for nursing practice.**

**Objectives:**

2.1 Evaluate scientific advances and opportunities to identify promising avenues of investigation and emphasis, including the NINR portfolios for:

- **Research in chronic illness and long term care,** including care of individuals with arthritis, diabetes, and urinary incontinence. This area also encompasses family caregiving and long-term care.

- **Research in health promotion and risk behaviors,** including studies of women's health; developmental transitions, such as adolescence and menopause; environmental health; and health and behavior research, such as studies of exercise, nutrition, and smoking cessation.

- **Research in cardiopulmonary health and critical care,** including prevention and care of individuals with cardiac or respiratory conditions. This area also includes research in critical care, trauma, wound healing, and organ transplantation.

- **Research in neurofunction and sensory conditions,** including pain management, sleep disorders, and symptom management in persons with cognitive impairment or chronic neurological conditions. This area also includes research on patient care in acute care settings.

- **Research in immune responses and oncology,** including symptoms primarily associated with cancer and AIDS, such as fatigue, nausea and vomiting, and cachexia. Prevention research on specific risk factors is also included as is a special focus on research at the end of life.

- **Research in reproductive and infant health,** including prevention of premature labor and low birth weight, reduction of health-risk factors during pregnancy, normal physiologic processes of pregnancy, labor and delivery and the postpartum period, delivery of prenatal care, care of neonates, infant growth and development, and fertility.

2.2 Obtain broad scientific and public input into future areas of research needs, gaps, and opportunity, including activities such as:

- Meetings with regional research groups, nursing and specialty organizations, and others to promote broad input.

- Encourage submission of proposed topics for consideration from individual researchers, practitioners, and the lay public; encourage identification of either general issues or more specific issues addressing research needs and gaps.

2.3 Expand the intramural program designed to promulgate important independent research and provide a rich training environment on the NIH campus.

**Goal 3: Communicate and disseminate research findings resulting from NINR-funded research.**

**Objectives:**
3.1 Coordinate the sharing of information across NIH, the government, other policy-makers, and the public to enable NINR's research advances to reach a larger, multidisciplinary scientific, clinical, and public/consumer audience.
3.2 Produce a variety of written information products for diverse audiences.
3.3 Maintain an effective media relations program.
3.4 Ensure that the NINR website is current and creative in terms of information and technology.
3.5 Transmit announcements via electronic notification and the website to our researcher, practice, and public/consumer communities.
3.6 Enhance communication and dissemination activities by: tracking publications, media coverage of research results, citations of research results, honors/awards, translation of research results into policy and practice.

Goal 4: Enhance the development of nurse researchers through training and career development opportunities.

Objectives:
4.1 Increase the overall number of training fellowships.
4.2 Increase the proportion of postdoctoral to predoctoral fellowships.
4.3 Determine indicators associated with research-productive careers of those who have been supported by NINR fellowships.
4.4 Promote the career development and other award mechanisms as a means to enhance the research background of faculty at various career stages including postdoctoral, mid-career, and senior faculty stages, with particular attention to minority nurse researchers.
4.5 Expand the Core Centers Program to provide an infrastructure so that independently funded investigators and their teams will have the opportunity to enhance their collective productivity to a greater degree than would be possible from separately funded projects.
4.6 Determine characteristics in NINR-funded centers that most enhance a research-productive environment.
4.7 Maintain activities such as the intramural fellowship opportunities, the Summer Nurse Scientist Training Program, and Summer Genetics Institute for Nurses.

Strategic Planning Process
Input has been sought from a wide audience for this strategic planning process. Comments have been incorporated and are reflected within the context of the overall document. This strategic plan is posted in the NINR website and equipped with electronic mail response. Input is sought from a wide audience for this strategic planning process. This strategic plan is posted in the NINR website and equipped with electronic mail response. The National Advisory Council for Nursing Research, the research community, practicing clinicians, and the consumer community have key roles in the evaluation of science and establishing measures by which its future directions are estimated and facilitated. Concurrent environmental assessment will identify factors that mitigate or otherwise influence the direction of research efforts, including identifying newly emerging areas of research inquiry. The strategic planning process is envisioned to be an ongoing effort. This strategic plan document is expected to be effective for a five-year period. The National Advisory Council for Nursing Research will review it on a biennial basis. This deliberative process of evaluation is in addition to the established annual consideration of research opportunities that is conducted by the advisory council in the January/February meeting each year.

Strategic Planning Assumptions
- Resources for NIH and NINR will continue to grow at least incrementally such that funding of continuing projects and new starts will continue to increase each fiscal year.
- Scientific research advances result from continuity of effort and cumulative progress over time. Results of scientific areas highlighted for emphasis may not appear for several years in order to allow for the development of feasible research ideas, submission of competitive
application, completion of three to five year research projects, analyses of data, and publications in peer reviewed journals.

- Annual issuance of NINR grant awards is quantifiable but does not completely address interim progress toward scientific goals.
- Measures of overall productivity will continue to be developed over the period of this strategic plan.
- NINR and its staff at best influence, rather than control, some of the outcome measures such as numbers of applications and publications. However, NINR can stimulate and advocate for the type and quality of the product, the dissemination of research, and the incorporation of results into the body of nursing science.
- This strategic plan is subject to the allocation of adequate financial resources.

Strategic Plan on Reducing Health Disparities
Prologue
The National Institute of Nursing Research (NINR) is pleased to provide a Health Disparities Strategic Plan to highlight our accomplishments and goals. This document was developed by taking those portions of the overall NINR Strategic Planning for the 21st Century that specifically relate to the issues of health disparities. We have expanded this material to highlight the current efforts that are underway and to outline our plans to continue to address these important areas in terms of research, infrastructure, and outreach. In this document, we have used the definitions developed by the National Institutes of Health (NIH) Work Group on Health Disparities. "Health" is defined as "not merely the absence of disease, but an optimal state of physical, mental and social well-being." "Health Disparities" are defined as "differences in the incidence, prevalence, mortality, and burden of diseases and other adverse health conditions that exist among specific population groups in the US." Finally, "Population Groups" are discussed as "Health disparities suffered by persons identified as African-Americans, Asian and Asian Pacific Islanders, Hispanic and Latino, Native American and Native Alaskan have been long recognized by members of these groups and by health professionals. These groups are the principal focus of the NIH Work Group. Further, the Work Group recognizes that ethnicity and race cannot be defined with biologic precision in a diverse society and the problems with classifying Americans into such groups. In addition, other factors - in particular, socio-economic status, age, gender and behavior - affect health and contribute to health disparities and that these factors intersect with ethnicity and race." Issues related to other potential underserved groups such as sexual minorities are included.

This strategic plan was discussed with representatives of 25 nursing organizations who comprise the National Nursing Research Roundtable. The document has also been presented to the National Advisory Council for Nursing Research who will oversee and advise on plans and progress. Finally, we are planning to present it to a special NINR/ORMH invitational meeting to be held in June with the National Coalition of Ethnic Minority Nursing Associations. This group represents the National Black Nurses Association, National Association of Hispanic Nurses, National Association of Asian/Pacific Islander Nurses, Alaskan and Native American Nursing Organization, and Philippine Nurses Association of North America.

We look forward to contributing the overall NIH efforts and to do our part to reduce and eliminate health disparities.

I. Mission Statement
The National Institute of Nursing Research (NINR) supports clinical and basic research to establish a scientific basis for the care of individuals across the life span—from management of patients during illness and recovery to the reduction of risks for disease and disability and the promotion of healthy lifestyles, promoting quality of life in those with chronic illness, and care for individuals at the end of life. According to its broad mandate, the Institute seeks to understand and ease the symptoms of acute and chronic illness, to prevent or delay the onset of disease or disability or slow its progression, to find effective approaches to achieving and sustaining good health, and to improve the clinical settings in which care is provided. The NINR's research extends to problems encountered by patients, families, and caregivers and emphasizes the special needs of at-risk and underserved populations.

II. Areas of Focus
The overall focus is to provide leadership in emphasizing the inclusion of cultural and ethnic considerations throughout the areas of scientific inquiry within NINR's domain. This leadership emphasis will include support for culturally sensitive interventions to decrease health disparities among groups by focusing on health promotion activities and chronic illness management strategies. Interdisciplinary and collaborative efforts will be undertaken with other NIH institutes, centers, and offices as well as with other appropriate federal agencies.

**Background:** Diseases can disproportionately affect racial and ethnic minorities, individuals from lower socioeconomic classes, women and children; and may affect these individuals' ability to attain and maintain health. Minorities may not be able to benefit from health care services because of limited access, low literacy, poverty, language barriers, and cultural differences between themselves and health care providers. Historically, nursing research has had a major focus on minority health. In 1999 NINR utilized nearly 21% of its overall budget to fund 98 projects that address minority health issues at a cost of $14.5 million.

**Goal 1:** To solicit research applications in targeted areas that will address significant questions related to health disparities.

- **Current program announcements and requests for applications targeting at risk populations**
  - 1999 program announcement on *Low Birth Weight in Minority Populations* (PA-99-045)
  - 1999 request for applications for *Centers for Research to Reduce Oral Health Disparities* (RFA DE-99-003) encourages collaboration across health professions and spans racially, ethnically and culturally diverse populations.
  - 2000 Request for Applications for Clinical Trials: Collaborations for Nursing Research (RFA: NR-00-003) promotes supplemental studies linked to existing clinical trials as a cost effective way to stimulate research. Topics could include specific questions related to minority health issues.

- **Future Plans**
  - Continue program announcement on *Low Birth Weight in Minority Population*, to investigate topics such as:
    - Development and testing of interventions to lengthen interpregnancy intervals, improve nutritional status, reduce microbial infections and inflammation, modify behavior, lengthen breastfeeding duration and promote adequate weight gain during pregnancy
    - Investigation of the effects of culture on diet patterns and physical activity during pregnancy and its relationship to pregnancy outcomes
  - Program announcement *Diabetes Self-Management in Minority Populations*, to investigate topics such as:
    - Testing strategies that promote behavior change in sub-populations that have significant difficulties in sustaining effective diabetes self-management
    - Intervention strategies with a defined focus on cultural, ethnic, lifestyle, and age-related factors to improve glycemic control and reduce complications
  - Program announcement *Health Disparities Among Minority Populations: Cancer Prevention*, to investigate topics such as:
    - Develop and test tailored interventions for achieving health changes in cancer prevention, screening, and detection behaviors for ethnic/racial minorities
    - Elucidate sociocultural influences related to the cancer prevention, screening, and detection behaviors of ethnic/racial minorities.
  - Annually, at least one area of opportunity will specifically target the Institute's strategic goals of health promotion and chronic illness management strategies in at risk populations. Priorities will be determined with input from minority communities such as the National Coalition of Ethnic Nursing Associations. This coalition is composed of representatives from the National Black Nurses Association, National Association of Hispanic Nurses, National Association of Asian/Pacific Islander Nurses, Alaskan and Native American Nursing Organization, and Philippine Nurses Association of North America.

**Goal 2:** To support the investigator-initiated research proposals that address significant questions related to health disparities and offer the best prospects for new knowledge and better health.
• Currently funded investigator-initiated research projects encompass a broad range of topics in diverse ethnic groups such as:
  o health promotion in children living in urban and rural areas and in minority elders
  o risk reduction in adolescent mothers and persons of Hispanic descent
  o chronic disease management in Spanish speaking individuals and those of American Indian descent
  o care of frail elderly African American nursing home residents and Asian American women caring for elderly parents
  o cultural variations in end of life care and use of tele-health interventions for caregivers of the terminally ill
  o reducing sexual risk behaviors among economically challenged adolescents of color and strengthening HIV prevention programs among high-risk women

• Future Plans
  o The institute will continue to encourage and fund meritorious investigator-initiated research proposals that address issues identified by individual scientists who focus on health disparities in at risk populations.

III. Infrastructure
The infrastructure goals focus on developing and expanding the research infrastructure in schools of nursing and enhancing the development of nurse researchers through training and career development opportunities.

Background: NINR collaborates with historically black colleges and universities, especially those few that provide nursing education. For example, the Institute consulted with Hampton University to promote faculty research as it moves toward developing a doctoral program in nursing. Similar efforts are being provided to increase the numbers of Hispanic persons pursuing doctoral degrees. The research center core grants mechanism (P30) is used to provide the infrastructure to centralize resources and facilities to support centers of excellence in particular science areas. Currently, NINR supports ten P30 grants, eight of which focus on health disparities in minority populations. Training and career development awards are used to target minority investigators and minority health issues. In FY 99 the Institute supported nine career development awards (KO1) for minority researchers, 1 demonstration project on lead awareness for inner city residents, and 24 training grants for pre- or post doctoral fellowships for individuals interested in minority health topics.

Goal 1: To enhance research infrastructure allowing for an increased emphasis on projects relating to health disparities.

• The Core Centers (P30) that emphasize health disparities in minority populations include:
  o Resource Center on Minority Aging Research develops minority investigators through workshops and funding of pilot studies, supports research studies addressing issues such as culturally based interventions for breast cancer in African American women. Two of the six universities involved are Historically Black Colleges or Universities.
  o Center for Women’s Health Research focuses on methods and measures appropriate for investigation of women of diverse sociocultural environments.
  o Center for Research on Chronic Illness in Vulnerable People addresses prevention and management of chronic illnesses in people with specific vulnerabilities such as poverty, minority status, rural residence and developmental status.
  o Center for Health Promotion and Risk Reduction in Special Populations conducts interdisciplinary research in the science of health promotion and risk reduction in populations who may experience varying degrees of discrimination, subordination and disenfranchisement.
  o Center for Health Promotion and Disease Prevention Research for Underserved Populations aims to reduce disparities in the health status of racial and minority populations such as women and children, people from impoverished backgrounds and those with chronic and disabling conditions.
Center for Enhancing Quality of Life in Chronic Illness will support the development and testing of interventions to increase coping and health behaviors and ultimately quality of life in individuals with chronic conditions such as end stage renal disease and cancer.

Center for Nursing Outcomes Research will provide the infrastructure to investigate variations in patient outcomes, and apply them to the evaluation of the effectiveness of nursing care of at risk populations such as the frail elderly and high-risk infants.

Center for Vulnerable Population Research focuses on socially vulnerable individuals, including ethnic populations, women and children, the homeless, the elderly, and those exposed to hazardous conditions.

Future Plans

- Request for applications in 2001 for Exploratory Centers (P20) that will specifically seek applications that focus on health disparities.

Goal 2: To enhance mentorship, training and research opportunities for minority students and researchers.

- Assisted nurse investigators in Mississippi to obtain the mentorship needed to link nursing research questions with the Jackson Heart Study, a large multicenter epidemiological study of heart disease funded by NHLBI. NINR staff facilitated consultation by NINR funded researchers about specific issues such as recruitment and retention of minority subjects, community involvement, and using GCRCs for data collection. NINR program staff provided information about submitting requests for funding that support ancillary studies (supplements).

- Request for applications (RFA: NR-00-002) Mentored Research Scientist Development Award for Minority Investigators to support the research career development of doctorally prepared minority nurse investigators in tenure-earning positions at both majority and traditionally minority institutions. The Institute has supported this initiative annually since FY 1997.

- Research Supplements for Underrepresented Minorities (RSUM) provides supplemental funding to minority students and faculty to work on a project with an NINR funded investigator.

Future Plans

- Institutional Research Training Grant (T32) asking applicants to focus on two particular areas of inquiry: genetics and health disparities in underserved populations.
- The Institute will continue to provide linkages between NINR funded investigators and minority researchers who are interested in linking with large multicenter studies.
- Specific RFAs will be issued to target minority researchers and infrastructure development to support research on health disparities.
- The RSUM mechanism will continue to target minority students and faculty early in their nursing careers to stimulate their interest in research.

IV. Public Information Outreach

The outreach goals focus on the promotion of activities such as research training programs, and enhanced communication and dissemination activities with an emphasis on targeting involvement of minority researchers.

Background: NINR has mechanisms in place that assist in disseminating research findings to various audiences and has plans to enhance its ability to track findings that result from NINR funded studies. Outreach efforts include involvement with minority nursing organizations, sponsorship of various training programs, and participation in NIH initiatives.

Goal 1: To maintain involvement with minority nursing organizations to support identification and dissemination of minority health priorities and strategies and to help minority students and researchers advance their scientific careers.

In cooperation with the NIH Office of Research on Minority Health, NINR is collaborating with the National Coalition of Ethnic Nursing Associations to plan and conduct a workshop to address minority health nursing research and training, specifically providing input to increase the specificity of infrastructure goals.

Workshop goals include:

- develop recommendations for nursing research priorities related to minority health
- strategic planning to address training needs of ethnic minority nurse scientists
strategies for collaboration between NINR, minority nursing organizations, and research institutions
strategies to create and sustain collaborative research relationships between minority communities and nurse scientists

• Future plans
  o The Institute will facilitate dissemination and assist with accomplishing of the recommendations from the workshop.

Goal 2: Enhance communication and dissemination activities by tracking publications, media coverage of research results, citations of research results, honors/awards, translation of research results into policy and practice.
  o Summarize for different audiences research results from NINR funded studies on health disparities.
  • Future Plans
    o Track and highlight contributions of minority investigators through the development of a findings database.

Goal 3: Continue sponsorship of annual training programs and involvement with other NINR and NIH initiatives. The annual program, Research Training: Developing Nurse Scientists, is aimed at doctorally prepared nurse investigators who are interested in applying for grant funds from NINR. Minority investigators are encouraged to apply. Each year 10-15% of the participants are from minority backgrounds.
  • Participate annually in the Hispanic Youth Initiative and the Society for the Advancement of Chicanos and Native Americans.
  • The NINR director and staff present and exhibit at annual meetings of minority nursing organizations such as the National Association of Hispanic Nurses and the National Black Nurses Association.
  • Future Plans
    o Determine feasibility of wider distribution of the Research Training program through the internet.
    o Offer a Summer Genetics Institute yearly within the NINR Division of Intramural Research. The goal of the eight-week program for nurses is to provide a foundation in genetics for biological and clinical research and practice. Graduate credit will be given for the classroom, laboratory, and seminar/tutorial components. Individuals from minority backgrounds are encouraged to apply.
    o Continue involvement in NIH sponsored activities.
    o Continue presentations and exhibits at annual meetings of minority nursing organizations to disseminate information to minority nursing communities.

We welcome your questions and comments about NINR and its research programs. Please send e-mail inquiries to the Office of Science Policy and Public Liaison.
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