



NINR: An Overview

A focus paper on NINR research directions and advances

Established in 1986 as the National Center for Nursing Research and redesignated as an Institute in 1993, the National Institute of Nursing Research (NINR) supports clinical and basic research to establish a scientific basis for the care of individuals across the lifespan. NINR-supported research seeks to improve the management of patients during illness and recovery, reduce the risks for disease and disability, promote healthy lifestyles, and better the clinical settings in which care is provided, including addressing problems encountered by families and caregivers. NINR also emphasizes the special needs of at-risk and underserved populations.

The strength of NINR throughout its history has been the talented and dedicated nurse researchers who have helped develop nursing science. Nurse researchers are the scientific vanguard of the largest profession in the health-care delivery system. NINR interacts with virtually all components of the National Institutes of Health (NIH), contributing both the scientific expertise of nurse researchers and the insights of a clinical profession to the NIH community.

As the 21st century progresses, our nation's population will continue to grow, age, and become more diverse, increasing the challenges facing our health care system. Many diseases that were once acute and life-threatening, such as heart disease, diabetes, and HIV, are now long-term chronic conditions, and new global health threats continue to emerge. At NINR, we are working to make sure that nursing science stands ready to address these challenges and improve the health and well-being of all Americans.

Areas of Research Opportunity

Fiscal Year 2006

Areas of Research Opportunity represent early planning stages for initiatives in which NINR seeks to support research in an understudied and significant area of science.

+ **Improving Cognitive Function in Quality of Life in CNS Disorders.** Disorders of the central nervous system (CNS) that disrupt certain cognitive functions while leaving others intact, such as mild stroke, epilepsy, or multiple sclerosis, may impair decision-making, disrupt psychosocial functioning, reduce productivity and employment, and reduce quality of life (QOL). There is a need for research to describe the extent to which mild to moderate CNS deficits affect functional outcomes, and to develop and test interventions that address the subtle cognitive changes seen in many CNS disorders.

+ **Research in a Multicultural Society: Focus on Preventing and Intervening in HIV and AIDS.** The U.S. is a multicultural society, and issues may arise when members of diverse groups interact in the context of health promotion and disease prevention. Many sectors of society lack access to health care services or information and are not benefiting from health care advances. Cultural values, social connectedness, spirituality, and traditional methods are gaining importance in health care. This initiative will promote culturally sensitive research in a multicultural society and identify current gaps, with a special focus on preventing and intervening in HIV/AIDS.

+ **Increasing Health Promotion through Studies on Parenting Capacities.** Developmental problems and risky health behaviors among youths are more likely to occur in vulnerable families and in response to ineffective parenting practices. Studies have shown that a positive family environment, where parents provide consistent supervision, communicate health and social values, and understand normal development, helps to improve childhood outcomes. NINR will solicit research proposals that target the reduction of family risk factors, build upon protective factors, and promote healthy parenting characteristics and family dynamics.

+ **Biobehavioral Methods to Improve Outcomes Research.** Maintaining positive health outcomes over time and across many populations requires an understanding of several biological, behavioral, and social factors. This initiative is designed to foster biobehavioral research on the impact of biologic and behavioral factors on health outcomes, disease assessment and prevention, and QOL. Research proposals on novel methods or emerging technologies are encouraged.

Examples of Recent NINR-Supported Research

✦ **Reducing risky behaviors among Hispanic teens.** Hispanic teens have a high rate of HIV infection, most often from heterosexual contact. Teens participating in a program called “¡Cuidate! (Take Care of Yourself),” which presented Hispanic cultural values that support positive health behaviors, reported a lower frequency of sexual intercourse, fewer sexual partners, and an increased use of condoms during intercourse for up to 12 months afterward. *Villarruel, 2006.*

✦ **Communication with families on withdrawal of life support.** Clinicians in intensive care units may miss opportunities to address the concerns of family members while discussing decisions on withholding or withdrawing life support from a critically ill patient. Better awareness of family issues can help clinicians improve their communication skills. *Curtis, 2005.*

✦ **Nurse home visit program for at-risk mothers.** Public health nurses made a series of pre- and post-natal home visits to new, at-risk minority mothers to address parenting skills and family issues. The mothers had improved social and financial stability, and the children demonstrated better development, compared to control groups. *Olds, 2004.*

✦ **Care for elderly cardiac patients.** APNs managed discharge planning, coordinated care across different settings, and used an evidence-based care protocol for elders hospitalized with heart failure. These elders had fewer re-hospitalizations and deaths than patients remaining in standard care, and their total health care costs were lower. *Naylor, 2004.*

✦ **Women less likely than men to change lifestyle after a heart attack.** From initial interviews of patients after a heart attack, men were more likely than women to identify stress, poor diet, smoking, or lack of exercise as contributing causes. At a three-month follow-up, only 17% of all participants reported efforts to lower stress, and women were less likely than men to make lifestyle changes to improve diet or increase exercise. *Martin, 2005.*

✦ **A Dietary Program for rural Blacks with Diabetes.** “Soul Food Light,” a program to encourage culturally appropriate healthy eating habits and food choices, helped a group of rural Blacks with diabetes lower their dietary intake of fat, decrease their weight, and improve their blood sugar control and blood cholesterol levels. *Anderson-Loftin, 2005.*

✦ **Reducing hypertension in Black men.** For a group of hypertensive Black men, a health care team led by an advanced practice nurse (APN) provided medications, along with education on diet, exercise, and weight control. This program helped more of the men bring their blood pressure under control. *Hill, 2003.*

✦ **Care of ventilated patients on tube feedings.** Tracheal secretions collected from critically ill patients on ventilators and receiving tube feedings showed that aspiration of stomach contents into the lungs was a common occurrence. Aspiration increased the incidence of pneumonia, which lengthened the time patients spent in intensive care. A related study found that the practice of regular turning of ventilated patients helped reduce the incidence of pneumonia. *Metheny, 2005, 2006.*

New Web Feature – Podcasts

NINR is pleased to announce a new feature on its website – podcasts. Podcasting is a way of publishing audio and video files on the Internet. Visitors to the NINR website may now listen to interviews or view conference sessions and other video presentations while sitting at their computer, or download them to a portable media player. Please visit the Podcasts! link on the NINR homepage, <http://ninr.nih.gov/ninr/>, for more information.

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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. To accomplish its mission, NINR provides grants to universities and other research organizations and conducts intramural research and research training on the campus of the National Institutes of Health. These efforts foster multidisciplinary collaborations to ensure a comprehensive approach to research on illness and disabling conditions. To address the needs of at-risk and underserved populations, NINR emphasizes the implementation of knowledge gained from research toward the reduction of health disparities.

National Institute of Nursing Research
Office of Science Policy and Public Liaison
31 Center Drive – MSC 2178
Building 31, Room 5B10
Bethesda, MD 20892-2178



Phone: 301-496-0207
FAX: 301-480-8845
<http://ninr.nih.gov/ninr>