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## **Nursing's research problem: A call to action**

Clark, A. M., & Thompson, D. R. (2019). Nursing's research problem: A call to action. *Journal of Advanced Nursing*, 75(12), 3190-3192. <https://doi.org/10.1111/jan.14169>

**Published in:**  
Journal of Advanced Nursing

**Document Version:**  
Peer reviewed version

**Queen's University Belfast - Research Portal:**  
[Link to publication record in Queen's University Belfast Research Portal](#)

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## **Editorial**

### **Nursing's research problem: A call to action**

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Nursing, we have a research problem.

Professions should, by definition, be knowledge-based (Rosenberg, 1998).

The *Journal of Advanced Nursing* and many other national and international professional journals and periodicals for the nursing profession continue to report and debate research about and in contemporary nursing practice. Accordingly, readers of the *Journal of Advanced Nursing* are unlikely to doubt that registered nurses should be able and committed to using research in their daily practice.

This esteem of research in nursing is well justified. Large and robust observational studies (Aiken et al., 2014) and systematic reviews (Liao et al., 2016) attest to the incremental benefits to patient outcomes and care of more highly educated nurses – professionals whose pre-registration curricula incorporates using research in daily practice. Yet, undergraduate nursing curricula widely fail to integrate research skills early or well enough to produce practitioners who can confidently and competently either use or develop research-based knowledge in their practice (McCormack et al., 2019). This harms patients and communities and does little to challenge negative media and public perceptions that nurses do work that is repetitious, lower status, and subordinate to the work of other professional groups, notably physicians (ten Hoeve et al., 2014). It's timely then to consider how serious about research the nursing profession really is: *does nursing aspire truly to be and stay a research-driven profession?*

Indeed, nursing needs to redefine its relationship with research. To reflect seriously on our commitment to being and staying research-based from day one of undergraduate education into and through every nursing practice setting. This requires a village. Accordingly, we reflect here on what can *all* do to improve and strengthen the presence and influence of research in nursing.

## **Registered nurses: the vital bridge**

The degree to which qualified nurses weekly or even daily engage with journal articles to inform their practice. The ability of nurses at professional conferences to critique statistical analyses. The prevalence of research studies led by nurses on units. All these are valid indicators of the presence and influence of research in nursing. Yet, research still too often has a sense of 'otherness' for nursing – appropriate and important for patients and other disciplines, but somehow more foreign or even, astonishingly, an impediment for and of nursing in practice settings.

Nursing's relationship with its professional status is no mere academic debate. With our professional status and pay cheques comes serious research responsibilities. While there is unavoidable self interest for nurses to advocate for our own professional status, the knowledge stakes for patients are literally about life and death.

Nursing students and educational settings remain more supportive of the integrity of research to nursing practice (Ryan 2016). Yet, there remains a prevalent and sometimes toxic anti-intellectualism about research in nursing: that research is somehow less relevant to daily nursing practice and nursing roles. Prominent national newspapers - such as *The Times* - continue to publish public correspondence *bemoaning* that nurses are increasingly highly qualified and taught to use and do research (Richardson 2019). This dated commentary withstands no critical scrutiny (Oliver 2019). Yet, astonishingly, registered nurses not only fail to challenge 'anti-research' arguments directly, but actively perpetuate them, including to: students, newly registered staff and those outside the profession. In the vast majority of cases, nurses will oppose those who deny the positive benefits of

vaccines, bemoan the ethics of inaccessible healthcare and question the health harms of smoking and poverty. Yet, the weak receptivity to research common in nursing practice settings is at odds with such stances.

Nursing's challenging relationship with research has been attributed to a lack in confidence (McCormack et al., 2019) with reviews, editorials and correspondence suggesting that the causes of this malaise extend to nurses' research skills around understanding and applying research (Clark et al., 2012; Clark & Thompson, 2018; Saunders & Vehviläinen-Julkunen 2016). However, the reasons for nursing's curious relationship with research run historically deep - extending across many issues related to establishing and sustaining our professional identity as an emerging profession. Nursing's identity remains fused with paradoxes – from the inescapability of our historical origins functioning around medicine, feminism and concepts of community (identity relative to 'other') to the continued debate on 'the nature of nursing' across all strata of the profession (identity fluidity) to the repeated public perception of nursing and nurses as *the* consistently 'most trusted profession' (Stone 2019) (identity affirmation). From this basis, our fears about solidly having 'our professional place' sometimes provoke unfortunate special pleading – that somehow nurses should be educated and viewed differently. Working hard to justify our existence, such pleading often acts to falsely differentiate nursing from other health professions, inadvertently reinforces nursing as an inferior cousin to medicine (Glerean et al., 2017) and prioritizes 'high activity' in the form of 'busywork' (Cangelosi, 2007) over the 'right activity' in the form of research-informed work.

Echoing Brene Brown's (Brown, 2015) recognition that courage requires comfort with our own vulnerability, nursing's sense of itself is often consequential of being a 'young' profession – yet our identity travails are our strength not our

weakness. Nursing's challenges with itself cannot lead to research being left behind. Just as nurses hold patient advocacy to their heart, so too research must be and stay core to how nurses view and act in all situations.

### **Nursing students: the vital foundation**

As the future of the profession, nursing students have a uniquely pivotal role to play in redefining nursing's relationships with research. Research skills for practice established during pre-registration education include: developing search questions, searching for the right research studies, evaluating this evidence and applying evidence to complex situations and settings (Brooke et al., 2015). Supporting these skills develop is vital but developing nursing students commitment and understanding of research's centrality to nursing is vital too.

In our experience, early stage student nurses tend to reflect public perceptions which emphasize the importance of positive emotions and behaviours associated with 'kindness' and empathy over research proficiency. However, reviews indicate that nursing students are generally positive about research but lack opportunities to be and stay involved in research (Ryan, 2016). Consequently, during their early or even mid-stages of nursing education, too often students don't readily connect the worlds of nursing and research. As such the lack of opportunities students have around research reflects a deeper cultural issue in nursing: a lack of organizational and cultural capacity around research.

To promote change both push from students and pull from educators are needed. Departments overseeing nurse education should systematically assess their activities to identify the most ready means to promote research across their formal and informal activities – from promoting staff and student journal clubs to

reassessing the presence of research in the early stages of nursing curricula. Students themselves should feel empowered to demand their education feature more and better research education.

### **Nursing research educators: the vital ingredient**

The Code of Ethics of the International Council of Nurses (2012) stresses that nurses must be aware of and implement research results into their clinical practice. Expected learning outcomes should include skills in finding, evaluating and applying research evidence.

But too often the teaching of nursing students about research fails to spark intellectual and practical curiosity. In today's world of competing distractions, educators need to harness innovative, meaningful and engaging teaching strategies and blended learning approaches. Using the latest technologies is likely to enhance student experiences and teaching outcomes. For example, using online teaching, gaming and simulation of clinical scenarios is more likely to stimulate teaching about research principles, concepts and methods and cultivate an inquiring mind that can identify a research gap, formulate research questions and pose solutions. Of course, to find and use sources of information, plan and conduct research, use and analyse data, disseminate findings and act ethically requires a range of expertise from a range of sources. These include health librarians, statisticians, psychologists, social scientists as well as nurse educators. This can be enriched and made enjoyable using interactive and clinically integrated teaching strategies that are challenging and developing, such as journal clubs, small group work, quizzes, clinical presentations, case studies, vignettes, workshops and problem-based learning scenarios in addition to classroom teaching. Such a variety of dynamic approaches is likely to empower

the learner through grasping their attention and increasing their interaction and participation to make research fun, interesting, and relevant.

### **Nurse leadership: the vital impetus**

Recent reports calling for the preparation of more nurses for the workforce in the UK (The Open University 2019) have even been interpreted by the nursing media as justifying reducing rather than increasing the need for nurses to have degrees (Twycross 2019). Recently, the UK Council of Health Deans (McCormack, et al 2019) expressed disappointment at the lack of integration of research in the UK nursing workforce.

Indeed, the efforts of those doing research in and on nursing over the past 20 years have had positive effects, notably in pushing towards a graduate-entry qualification. However, the status of nursing research in terms of visibility and also quality remains behind other comparably young disciplines. Too often academic titles have been bestowed on nurses without requisite research success (Watson & Thompson, 2010a,b). Too often hollow academic pretensions trump smart and savvy attempts to foster and build vibrant and creative academic cultures in which excellent research is both normalized and incentivized. Working cultures contribute to poor research even when they esteem the volume of research produced over its quality and relevance. Big fish syndromes dominates many of those leading nursing research – who remain content to be prominent in the discipline while barely making a dent outside in the worlds of interdisciplinary research.

Are nursing's research leaders ready to take on the challenges of promoting research? Yes – but trumpeting vague platitudes about 'leadership' or a command and control styles of management will not suffice. Rather, leaders in research need

to foster and build inclusive, risk-taking and accessible research-oriented cultures (Thompson, 2003) – this is particularly important in nursing’s academic departments (Thompson & Watson, 2001; Thompson, 2009). This leadership will require relationship-based working, humility, and culturally responsive actions whose primary aim is to support and empower staff, students and practitioners (Darbyshire et al., 2019). There is much that can be done (McCormack, et al 2019) and the time is now. For the good of the profession, we all must act to address nursing’s research problem.

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