Guest Editorial

Nursing Intervention Research

Nancy Feeley and José Côté

This is the first time that CJNR has devoted an issue to the topic of nursing intervention research. Nursing intervention research is essential not only to determine whether existing care practices in Canada are efficacious, but also to develop and evaluate novel interventions. Researchers, clinicians, and administrators need to work in concert to pursue intervention research that will produce evidence for and develop clinical practice. This special issue of the Journal addresses some of the challenges and issues surrounding the development and evaluation of nursing interventions as well as the application of these interventions in clinical practice.

The development of nursing intervention research is clearly coming into its own. Nurses are exploring the numerous and varied methodological and practical challenges of conducting studies that assess the efficacy of interventions provided by nurses. Sidani and colleagues address the topic of treatment preference, and how participants’ favouring of a particular group assignment can affect the external and internal validity of a study. They describe alternative designs that take participants’ preferences into account. These alternative designs are well suited to the nature and realities of the clinical setting, the needs of participants, and the values and goals of the discipline. Campbell-Yeo and colleagues review possible sources of bias in clinical trials and provide a checklist that students and new investigators can use as a guide when designing such studies.

The articles included in this issue of the Journal shed light on the current state of development in this domain, and point to some of the gaps. Both quantitative and qualitative methods are being used to address research questions. The contribution of Beal and colleagues underscores the value of using mixed methods to evaluate an intervention and to demonstrate how it might bring about change. These authors report on a study that employed qualitative methods to explore participants’ perceptions of their experience in the experimental and control groups of a clinical trial. The findings provide interesting insights concerning the
mechanism of change as well as verification that the intervention functioned as the researchers anticipated it would. Sobieraj and colleagues conducted a quasi-experimental study that tested the effects of a simple, inexpensive music intervention for the parents of children undergoing laceration repair.

We find it noteworthy that we did not receive any submissions related to intervention development research — that is, studies whose purpose is to develop an intervention that will be tested in a clinical trial. This is a relatively new and underdeveloped aspect of intervention research. We do not know the extent to which such work is being conducted in nursing, nor whether funding exists to support this type of study.

Researchers who have developed a program or intervention and determined its efficacy are eager to have it adopted in clinical practice. Several well-established researchers who study different populations in various clinical arenas agreed to share their personal experiences with us. Gina Browne, Francine Ducharme, Ruth O’Brien, and Bonnie Stevens all reaffirm the need for researchers to engage stakeholders, clinicians, and patients in a partnership through all phases of intervention development and evaluation. The reflections of these authors underscore the importance of providing support to clinicians and administrators who seek to adopt efficacious programs and the role of that support in the ability of clinicians and administrators to do so successfully. A critical mass of change agents or adopters appears to be another essential ingredient in success. Finally, researchers must be able to communicate their findings to a variety of audiences, including politicians and patients and their families, effectively and in a multitude of ways.

Robin Whittemore’s Discourse highlights a few of the challenges that we confront at this time. Whittemore discusses the need for balance between intervention fidelity and the adaptability of the intervention to the clinical milieu. Interestingly, the challenge of achieving balance between intervention fidelity and fit in the clinical context is evident in the reflections of Browne, O’Brien, and Stevens, as is the value of program flexibility. Whittemore also discusses the need to achieve balance between internal and external validity when evaluating nursing interventions. She states that practical clinical trials may help to achieve this balance.

In our Happenings contribution, the leaders of a new research group for nurse researchers in Quebec (GRIISIQ) involved in conducting intervention studies describe the development and activities of their unique group. The group provides important opportunities for training the next generation of nurses who possess the knowledge and skills needed to conduct intervention studies. An international conference
dedicated to the topic is currently being planned, and it could be an important forum for researchers to discuss the challenges we face, share their findings, and advance the development of knowledge in this area. We encourage clinicians and researchers involved in this work to come to Montreal in 2011 for this exciting event.

If we look to the future, we will certainly see a number of challenges. Intervention development research is clearly an area that requires our attention. The nursing literature includes very little on this topic. Health promotion and behavioural scientists are clearly ahead of us in this respect. We need to develop methodology for the development of nursing interventions. Researchers will need to enhance their knowledge of a wider range of study designs to evaluate interventions, including the practical clinical trials that Whittemore discusses and the partially randomized trials described by Sidani.

Innovative partnerships between decision-makers, clinicians, researchers, and patients will be essential to the processes of intervention development, evaluation, and adoption, if we are to develop the knowledge needed to enhance health and health care.

We are optimistic about the future of nursing intervention research. The Canadian Institutes of Health Research (2009) has adopted a strategic plan for 2009–14 that identifies enhanced patient-centred care and improved clinical outcomes through scientific innovations as one of five priorities for the next 5 years. Furthermore, the report of this year’s Nursing Research Symposium, submitted by the Canadian Association of Schools of Nursing to the Office of Nursing Policy, Health Canada (Pringle, Rukholm, & Sabourin, 2009), indicates that intervention studies are a priority for the advancement of nursing science. Nurses who conduct intervention research are extremely well positioned at the moment to take advantage of this focus on patient-oriented research and to play a part in developing the knowledge needed to improve health and health care.

References


Acknowledgements

Both authors are supported by a Clinical Research Scholar Award from the Fonds de la recherche en santé du Québec (FRSQ).
Nancy Feeley, RN, PhD, is Assistant Professor, School of Nursing, McGill University, and Researcher, Centre for Nursing Research, Sir Mortimer B. Davis Jewish General Hospital, and Quebec Interuniversity Nursing Intervention Research Group (GRIISIQ), Montreal, Quebec, Canada. José Côté, RN, PhD, is Associate Professor and Chaîre de recherche sur les nouvelles pratiques de soins infirmiers, Faculté des sciences infirmières, Université de Montréal, and Researcher, Centre de recherche du Centre hospitalier de l’Université de Montréal.