

## Happenings

### **Nurses and the Canadian Institutes of Health Research**

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When the Canadian Institutes of Health Research was initiated in June 2000, nurse researchers wanted and expected greater access to research funding than had been awarded through the Medical Research Council but were not convinced that increased funding for health research in Canada would translate into greater access to funding to support nursing research.

The CIHR is now in its second year. Within the first year of its existence, a Governing Council, 13 Institutes, and 13 Institute Advisory Boards were established. Governing Council members, Scientific Directors, and members of Institute Advisory Boards are chosen not on the basis of their specific disciplines but rather on the basis of their expertise and their track record. Therefore, nurses should be proud that at least 17 registered nurses contribute to the decisional and advisory infrastructure of the CIHR. Nurses also serve as CIHR university delegates and on peer-review committees. It is important that nurses maintain a high profile on the CIHR. Nominations for participation on review committees are invited through the research vice-president (or equivalent) of educational or health-research institutions, or through the CIHR university delegate.

Opportunities for research funding and personnel support are greater now than at any time in our history. Innovative initiatives such as CAHRs (Community Alliances in Health Research), IHRTs (Interdisciplinary Health Research Teams), CADRE (Capacity for Applied and Developmental Research and Evaluation in Health Services and Nursing Research), CHSRF/CIHR Chair awards in health

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services and nursing, NETs (New Emerging Teams), and the University Development Fund have all provided nurses with career advancement opportunities in research. Taking all funding sources into consideration, including fellowships, doctoral awards, partnership grants, and strategic funding opportunities, 245 nurses are currently being funded.

Pathways to success include applying for funding within a strategic funding area, being a co-investigator on a multidisciplinary research team whose membership crosses more than one of the CIHR pillars of research, and finding funding partners. Nurse researchers can inform themselves about individual Institute thematic initiatives as well as cross-Institute initiatives by monitoring the Web site for the CIHR and for each Institute. The Institutes are resources for nurses. The challenge for some health professionals is to answer the discipline-specific research questions within interdisciplinary research designs. With Institute cross-cutting research initiatives such as rural and remote health, global health research, and reducing health disparities by promoting the health of vulnerable populations, the fit for nursing research within each initiative is not difficult to discern. Strategic initiatives are prioritized by considering the following criteria: advances science, improves health, encourages innovation, builds research capacity, promotes an integrated approach (pillar and discipline crossing and community engaging), has the potential to improve the effectiveness of health services and products, is ethical and excellent.

By far the greatest share of CIHR funding is dedicated to the open competition for grants and awards. As of February 28, 2002, the CIHR was supporting 6,672 grants and awards, not including the Chairs or NCEs. This is the competition that nurses tell me is most challenging. In the March 2001 operating grants competition, the success rate of nurses was 11.11% and the overall success rate was 32.45%. In the September 2001 competition, the success rate of nurses was 23.33% and the overall success rate was 30.63%. We are moving in the right direction. Critical to success is, as always, the rigour of the proposal. This does not mean that the methodology must be quantitative. It does mean that the proposal must score at or above the cut-off for the particular competition. My nurse colleagues who serve on peer-review committees assure me that proposals are reviewed equitably by the multidisciplinary peer-review committees. Through the office of the CIHR Vice-President, Research, arrangements can be made to provide grantsmanship workshops. The CIHR recognizes the need to capacity-build researchers and research programs. Ask for help. One nurse peer reviewer has noted that researchers with institutions that provide

scientific review in-house prior to grant submission enjoy higher success rates in competitions.

If nurses see themselves in pillar 3 or 4 and note that only 26 candidates in these pillars were awarded doctoral research awards in the last competition, they can be assured that the cut-off for the awards for all pillars was 4.07. The success rate in 2001 was 31% of the 83 applications for pillars 3 and 4 and 28% of the applications for pillars 1 and 2, which resulted in 110 awards from 395 applications. We must advance more applications. It should be noted that only one currently funded CIHR Canada Research Chair is awarded to a nurse.

The CIHR emphasis on knowledge translation, which is also reflected in strategic initiatives, supports mechanisms that increase the uptake of research to influence practice, programs, and policy. Nurses should be particularly attuned to the importance of knowledge translation, and they have the potential to make major contributions to practice, programs, and policy through their research.

Many opportunities and new initiatives appear regularly. Keep informed by monitoring the CIHR Web site, by maintaining contact with your institution's link with CIHR, and by attending the workshops offered in your region by CIHR staff or members of specific Institutes. Institutions also have a responsibility to capacity-build their researchers by offering pre-submission scientific review of grant proposals and grantsmanship workshops. Ask for advice from CIHR staff. Build strong multidisciplinary and intradisciplinary research teams — membership can be national and international. Learn all you can about the various Institutes. Do you have a natural affinity for one Institute, or are you more interested in cross-cutting initiatives? Consider a national nursing research forum that is dedicated to identifying and developing capacity-building strategies for the advancement of nursing research within the context of today's funding opportunities. Make application through the NET initiative or the new investigator awards or other capacity-building initiatives. Put forward your concerns and help translate them into a strategic initiative; nurses did a great deal, for example, to advance the rural and remote health initiative.

The CIHR is preparing for its own evaluation and accountability reporting. It has been incredible to witness the energy and the enthusiasm for positioning Canada as a research leader that will ensure healthier populations. All of us who take an active role in the CIHR see a major movement forward in health research in Canada. What do you see? Please let us know.