

## Improving Cancer Care Through Nursing Research

Nursing research and nurse researchers have been an integral and significant part of the Oncology Nursing Society's (ONS's) history, as evidenced by the development of the Nursing Research Committee within a few years of ONS's establishment. Ruth McCorkle, PhD, RN, FAAN, was the committee's first chairperson in 1979. This was followed by the creation of the Advanced Nursing Research Special Interest Group in 1989 under the leadership of Jean Brown, PhD, RN, FAAN. ONS also began to recognize nurse researchers in 1994 by creating the annual ONS Distinguished Researcher Award to recognize the contributions of a member who has conducted or promoted research that has enhanced the science and practice of oncology nursing. The list of recipients and of their work is impressive and reflects the wide range of our practice areas (see <http://bit.ly/1MTC5cp> for the recipient list). In addition, the ONS Foundation began funding research in 1981 and has distributed more than \$24 million in research grants, research fellowships, and other scholarships, lectures, public education projects, and career development awards (ONS Foundation, 2015). And, in 2006, the Putting Evidence Into Practice resource was unveiled, which provides evidence-based intervention reviews for the 20 most common problems experienced by patients with cancer and their caregivers ([www.ons.org/practice-resources/pep](http://www.ons.org/practice-resources/pep)).

Throughout this time, ONS established research priorities to direct efforts on high-priority areas to improve patient care. Oberst (1978) published the first Delphi survey of research topics to affect patient welfare; relieving nausea and vomiting and pain were the top two selected, followed by patient education, grief management, stomatitis management, IV access techniques, care of the dying, psychosocial support for patients and families, and patients'

decision making. Studies at that time were mostly descriptive of the characteristics of patients, nurses, and oncology as a nursing specialty but were wanting in a number of methodologic areas (Fernsler, Holcombe, & Pulliam, 1984; Grant & Padilla, 1983).

ONS initiated a regular cycle of determining research interests and priorities. The first was conducted in 1984 (McGuire, Frank-Stromborg, & Varricchio, 1985) and repeated in regular intervals through to the current issue where the 2014–2018 version is available (Knobf et al., 2015). The ONS Research Agenda has been shared, historically, with funders, such as the National Institute of Nursing Research and the National Cancer Institute, and provides an agenda for oncology nurse researchers.

Consistent research topics were identified across the ONS Research Agendas. These topics included cancer symptoms and side effects, including successful relief strategies and identification of symptom clusters and their associated outcomes; psychosocial and behavioral research, health promotion, and risk reduction; health system issues; policy, quality of care, and clinical outcomes; and late effects of long-term survivorship. Although many of these topics have remained, the priorities within the topics have shifted over time. For example, pain, depression, neutropenia, anorexia, and cognitive impairment were priorities in 2001, whereas, in 2014, fatigue, pain, sleep disturbances, symptom clusters, cognitive impairment, peripheral neuropathy, and psychological distress were identified. Cross-cutting themes included populations in need (by age, cultural aspects, and health disparities), research design, and methodologic issues.

What struck me in reviewing past ONS Research Agendas was the consistency of priorities related to symptom management in a variety of populations and across the cancer continuum. What

also struck me in reviewing the history of ONS was how integral research has been to the development of oncology nursing as a specialty. We have our early researchers to thank for having the vision to integrate research into ONS's many activities and for moving the science of oncology nursing forward. Current and future generations must continue this tradition. How will you help?

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