

Issues up close

Spotlight on three nurse researchers: ANF grants help build expertise to benefit patients and nurses

By Susan Trossman, RN



NURSE RESEARCHERS play a vital role in health care throughout this country. Their work can make a huge difference in determining how care can best be delivered at the bedside, how workplaces can be improved, and how people can live healthier lives.

Like all researchers, they need funding to conduct their work. One crucial source of grants is the American Nurses Foundation (ANF), an ANA subsidiary. ANF has awarded more than 950 nursing research grants since 1955, totaling more than \$3.5 million.

Here's the story of three nurses who became ANF Nursing Research Grant Scholars and have continued to make great strides in their research fields.

Women and heart health

Jean McSweeney, PhD, RN, FAHA, FAAN, has always been interested in the human heart. She worked for many years as a critical care nurse and routinely provided care to cardiac patients in the intensive care unit. So when she was exploring a dissertation topic, it was only natural for her to look to heart attack victims.

"I soon realized that we didn't know enough about women and cardiovascular disease," says McSweeney, an Arkansas Nurses Association member. "Many women were excluded from cardiovascular studies because their fluctuating hormone levels created a cumbersome variable."

Then, for her first post-dissertation research in 1993, she decided to focus on women—specifically what they believed caused their heart attacks and the potentially

risky behaviors they were willing to change. Through that study, she learned that some women attributed their myocardial infarctions (MIs) to smoking, being overweight, or a lifestyle that was either too stressful or too sedentary. One of her key findings was that women were willing to

change whatever they viewed as the primary cause of their MI, such as quitting smoking. However, women also reported having experienced different symptoms than men surrounding their MIs. At the time, researchers and clinicians assumed that women experienced the same MI symptoms that men did.

McSweeney was able to pursue that initial research with an ANF grant, which she applied for at the urging of her mentor. Now, she encourages others to look toward ANF to kick-start their nursing research careers. "Getting that grant led to the whole trajectory of my career," says McSweeney, a professor at the University of Arkansas for Medical Sciences in Little Rock.

McSweeney is now a leader in clinical research on women and coronary heart disease (CHD) and MI symptoms. Because of her work, women no longer are seen as carbon copies of men in terms of cardiac risks and MI symptoms, such as crushing chest pain. Her body of work includes developing and testing an assessment tool to identify women at risk for CHD; examining black, Hispanic, and white women's CHD symptoms; and pinpointing women's early warning symptoms of acute MIs.

Over the years, McSweeney's work has gained both national and international attention. She has been asked to speak at major conferences of nursing and physician groups, and her research has led to changes in practice. For example, board-certified emergency physicians are now expected to know about gender differences in MI symptoms when evaluating women.

Her work also has been featured in mainstream media, including the CBS Evening News and *Good Housekeeping*. CNN interviewed McSweeney about her groundbreaking 2003 study that identified unusual fatigue and sleeplessness as early warning signs of MI in women.

Currently, McSweeney is involved in a 5-year study funded by the National Institute of Nursing Research to predict CHD events in black and white women. She hopes to develop a rapid screening tool. "If we pick up early CHD symptoms and a positive CHD risk score, women could be immediately referred, evaluated, and treated, possibly preventing progression to MI," she says.

McSweeney says she owes a "debt of gratitude" to ANF for believing in her and funding her research. "I like the idea of nurses helping nurses. If everybody gave \$10 to support nursing research, they could help nurses in so many ways—from research to clinical application."



Infant development

In 1983, Barbara Medoff-Cooper, PhD, CRNP, RN, FAAN, used her ANF grant to study what was close to her heart—infant development. At the time, she was a pediatric nurse practitioner and a doctoral student at Temple University in Philadelphia.

“I was seeing a number of preemies in the office,” says Medoff-Cooper, a Pennsylvania State Nurses Association member. “Their parents were having problems taking care of them because the babies were so crabby, so difficult.”

So for her dissertation, she and a colleague went to the parents’ homes and collected a range of data about the infants, including how immature they’d been at birth, how long they’d been in the hospital, and what had happened to them during their stay, such as ventilator-related complications. The goal of her research project was to see how those factors typically influenced the infants’ temperament and development at age 6 months.

The ANF grant led to numerous research projects through other funding sources, such as the Robert Wood Johnson Clinical Scholar grant program and National Institute of Nursing Research. “I think the ANF grant gives



new researchers the track record they need to get established,” Medoff-Cooper says. “It gives your research a ‘stamp of approval’ to gain other funding sources that will support your work.

“Many people don’t realize nurses can be scientists, or don’t realize the breadth of our work. They don’t think of nursing that way.” But for 25 years, Medoff-Cooper has continued to build on the science of infant development, feeding behaviors in high-risk infants, and infant temperament. For the latter, she developed a questionnaire used around the world to assess an infant’s temperament.

“I always was interested in the neurologic development of high-risk infants,” says Medoff-Cooper, a professor at the University of Pennsylvania School of Nursing and director of the Center for Biobehavioral Research. “And I really want to help parents understand their kids.”

Currently, Medoff-Cooper is following infants with congenital heart disease and their families to determine what issues influence the children’s growth and devel-

opment. “We know that about 50% are at risk for failure to thrive, in part because of their poor feeding skills and energy expenditure,” she says. “Through this study, I not only want to look at the physiologic issues, but also the stress placed on the family.

“It’s not just about eating and growing. I want to learn how families are functioning with a child born with a serious health problem, and then develop recommendations that can help both the babies and the parents.”

The science behind caring

When Linda Finch, PhD, RN, first attempted to garner an ANF grant, she was not successful. But because reviewers took the time to offer their advice, she was able to resubmit a stronger research proposal, which led to her becoming a 2004 ANF scholar.

“My whole area of focus has been looking at the nurse-patient relationship and particularly the caring piece of it,” says Finch, a Tennessee Nurses Association member. To approach caring scientifically, she used grounded theory to gain hard data from nurses and patients.

“I wanted to understand how caring is perceived by nurses and patients, what they viewed as caring behaviors, and what it is that moves patients positively toward better outcomes,” Finch says. “What I learned from the patients’ perspective is they really want a nurse who cares for them as a family member would.”

Patients identified those caring behaviors in a nurse as being responsive to all their needs, including physical, emotional and spiritual; being willing to do extra things; and following through on promises.

The data reinforced the continued need to teach students to look at patients multi-dimensionally, according to Finch, an assistant professor at the University of Memphis in Tennessee. From the nurses’ perspective, Finch found that their definition of caring behaviors included being attentive to patients, developing a rapport with patients, and demonstrating competency. Finch notes that today’s workplace environment challenges nurses’ ability to do extra things for patients and follow up on care.

Looking back at being awarded the ANF grant, Finch she says it allowed her to complete her work more quickly and paid for the costly transcription associated with qualitative studies. She also was able to present her findings at a major international nursing conference, which piqued the interest of the nursing community.

Having explored the importance of caring to older adults, Finch now is collecting data from chronically ill pediatric patients and their nurses on the role of caring in patient outcomes. Her overall goal is to develop a formal theory of nurse caring that will inform practice, encourage educational applications, and guide further research. ★

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