

Department of Health and Human Services

National Institutes of Health

National Institute of Nursing Research

Minutes of the National Advisory Council for Nursing Research

January 25, 2022

The 106th meeting of the National Advisory Council for Nursing Research (NACNR) was convened on Tuesday, January 25, 2022, at 11:00 a.m. The open session was held by National Institutes of Health (NIH) videocast, and all observers, including members of the public, attended virtually. The open session adjourned at 2:45 p.m. The closed session of the meeting, which included consideration of grant applications, was convened on Tuesday, January 25, 2022, at 3:55 p.m. and continued until adjournment at 4:05 p.m. Dr. Shannon N. Zenk, Chair, NACNR, presided over both meeting sessions.

OPEN SESSION

I. CALL TO ORDER, OPENING REMARKS, AND COUNCIL PROCEDURES

Dr. Shannon N. Zenk, Director

National Institute of Nursing Research (NINR)

Dr. Zenk called the 106th meeting of the NACNR to order and welcomed all Council members, visitors, and staff. She welcomed *ad hoc* Council members: Dr. Robert L. Atkins (Rutgers University – Camden), Dr. Daniel E. Dawes (Morehouse School of Medicine), Dr. Anne Fitzpatrick (Emory University School of Medicine), Dr. Patricia W. Stone (Columbia University School of Nursing), and Dr. Sarah L. Szanton (Johns Hopkins University School of Nursing). She acknowledged departing Council members: Drs. Nilda (Nena) Peragallo Montano and Ida M. (Ki) Moore.

Dr. Zenk noted that the open session of the meeting was being videocast live and will be archived on the NIH videocast website.

Minutes of the Previous NACNR Meeting

Council members received the minutes of the September 14, 2021, NACNR meeting by email. A motion to accept these minutes was made, seconded, and unanimously approved. The approved minutes of each NACNR meeting become part of the Institute’s official record and are posted on the NINR website (www.ninr.nih.gov).

Dates of Future Council Meetings

Dates for future Council meetings were included in the NIH Electronic Council Book. The next Council meeting (May 24, 2022) will be virtual. Other upcoming Council meetings are scheduled for September 13, 2022, and January 31, 2023.

Conflict of Interest and Confidentiality Statement

Dr. Zenk noted that the conflict of interest and confidentiality statements were included in the Council materials; reminded Council members that as special government employees, they may not engage in lobbying activities; and that Dr. Rasooly, NACNR Executive Secretary, would provide specific instructions about conflict of interest and confidentiality at the beginning of the closed session in the afternoon.

Council Operating Procedures

Dr. Zenk noted that a copy of the Council's Operating Procedures for 2022 was provided to Council members via the Electronic Council Book. NINR modified language about Special Council Review to refer to "the NIH threshold" rather than a specific dollar figure. A motion to accept the revised procedures was made, seconded, and unanimously approved.

II. REPORT OF THE NINR DIRECTOR

Dr. Shannon N. Zenk, Director, NINR

The Director's report focused on activities and news from NIH and NINR since the September 2021 Council meeting. Highlights of Dr. Zenk's report included:

Fiscal Year (FY) 2021 Accomplishments—NINR awarded \$140 million through nearly 400 grants, participated in 57 Funding Opportunity Announcements (FOAs), and engaged in 213 NIH, Department of Health and Human Services (HHS), and Government-wide committees and working groups. Dr. Zenk participated in more than 90 talks, keynote and commencement speeches, congressional briefings, podcasts, and other speaking engagements.

Funding Opportunities—In December, NINR posted notices of intent to publish three FOAs: Advancing Integrated Models (AIM) of Care to Improve Maternal Outcomes Among Women Who Experience Persistent Disparities ([NOT-NR-22-002](#) and [NOT-NR-22-003](#)) and Evaluating the Impact of COVID-19 Pandemic-related Food and Housing Policies and Programs on Health Outcomes in Health Disparity Populations ([NOT-NR-22-004](#)). These announcements were developed from concepts that the Council approved in September 2021 and will be published between January and early February, with an estimated April application due date.

Since September, NINR also has signed on to 18 additional FOAs. These include Notices of Special Interest related to the ongoing COVID-19 pandemic: Research to Address Vaccine Hesitancy, Uptake, and Implementation among Populations that Experience Health Disparities ([NOT-MD-22-006](#)) and Social, Behavioral, and Economic (SBE) Impact of COVID-19 in Underserved and Vulnerable Populations ([NOT-MH-21-330](#)). These FOAs also include those outside of COVID as well such as research on the effectiveness of school-based health centers (PAR-21-287), how social relationships influence health (PAR-21-350), and how to improve care delivery (RFA-AT-22-001).

Diversity, Equity and Inclusion Efforts—In September, the Council formed two new working groups to focus on important diversity and inclusion issues—Inclusion in NINR-Supported Studies (Dr. Cindy Munro, Co-Chair) and Diversity of the NINR-Supported Scientific Workforce (Dr. Christopher S. Lee, Co-Chair). Initial meetings will take place in mid-February. Also, NINR continues to support supplements to enhance diversity in health-related research ([PA-20-222](#)) and the small business programs ([PA-21-345](#)).

NIH-Wide Initiatives—NINR is expanding its engagement in NIH-wide efforts. The Institute is participating on the Executive Committee for Advancing Basic Behavioral and Social Sciences Research, the [Maternal Morbidity and Mortality Task Force](#) Advisory Cabinet, the Centers for Medicare & Medicaid Services (CMS)-NIH Joint Council, and the All of Us Brain Trust. NINR is helping to lead the following NIH-wide activities: the NIH Common Fund [Transformative Research to Address Health Disparities and Advance Health Equity](#) Program; a new NIH-wide group to advance research on social determinants of health; the [Climate Change and Health Initiative](#), and the [COVID Social, Behavioral and Economic \(COVID-SBE\) Health Impacts Initiative](#). In addition, NINR is represented on the [Helping to End Addiction Long-term[®] Initiative](#) (HEAL Initiative[®]) Executive Committee.

HHS Initiatives—NINR is engaged in several HHS Initiatives, including the HHS Social Determinants of Health Workgroup, the Interagency Working Group for National Healthcare Quality and Disparities Report, the Interdepartmental Health Equity Collaborative, and Climate Change, Food Systems, and Nutrition Security working group of the US Global Change Research Program.

National Nursing Research Roundtable—On March 3–4, NINR and the Emergency Nurses Association are co-hosting the [2022 National Nursing Research Roundtable](#), which will focus on social factors and emergency department care. The meeting will be available for viewing via [NIH videocast](#).

Congressional Briefings—Dr. Zenk shared that since September she met with the co-chairs of the Housing and Senate Nursing Caucuses and the Democratic Women’s Caucus to discuss current and future health challenges and a new vision for nursing science at NINR.

NINR Staff News—Dr. Zenk introduced new NINR staff, including Anita Ambs, NINR Chief of Staff, and Frances Bevington, NINR Director of Communications, as well as Dona Jones, Tim Kerns (on Detail from NIDDK), Alexander Ross, Paula Stonebanks, and David Timpane. NINR is seeking program officers, with the current announcement closing on January 27; see the [NINR website](#) for details. Dr. Zenk acknowledged the following recently retired NINR staff: Ms. Kathy Hall, Mr. Doug Hussey, and Drs. Rebecca Henry, Martha Matocha, and Jeri Miller. Mr. Hussey received the NINR Lifetime Achievement Award after 45 years of government service. She noted that 11 NINR staff received 2021 NIH Director’s Awards.

NIH News—Dr. Francis Collins stepped down as NIH Director at the end of 2021. Dr. Lawrence Tabak is the Acting NIH Director while the Administration selects a nominee for this position. A former NINR Acting Director, Dr. Tara Schwetz, has been named Acting NIH Principal Deputy Director. NIH hosted President Biden on campus in early December for a briefing on the importance of COVID-19 vaccines and booster shots.

Budget—The federal government is operating under a Continuing Resolution that will expire in mid-February. The President’s FY 2022 budget includes an additional \$330 million for health disparities research, including \$20 million allocated to NINR.

Retiring Council member—Dr. Zenk congratulated Dr. Nilda Peragallo-Montano on her retirement at the end of the month.

III. REPORT FROM THE SPECIAL MEETING OF THE NATIONAL ADVISORY ENVIRONMENTAL HEALTH SCIENCES COUNCIL (NAEHSC) ON THE PROPOSED NIH-WIDE CLIMATE CHANGE AND HEALTH (CCH) STRATEGIC FRAMEWORK

Dr. John Lowe, Professor and Joseph Blades Centennial Memorial Professorship Chair, The University of Texas, Austin

Dr. Lowe reported on a [Special Meeting of the NAEHSC on the proposed NIH-wide CCH Strategic Framework](#) held on November 29, 2021. Seven NIH Institute, Center, and Office (ICO) Directors are leading this initiative to reduce health threats caused by climate change and build health resilience in individuals, communities, and nations around the world, especially among those at highest risk. Objectives include identifying health risks and optimizing health benefits while taking action to mitigate or adapt to climate change, developing a diverse research infrastructure and workforce, leveraging partnerships to achieve impactful results, and conducting innovative research that produces credible, data-driven findings that are actionable and accessible to the public.

Dr. Lowe mentioned specific strategies for including randomized controlled trials of interventions in the initiative, such as hydration for elderly or pregnant individuals. There is also an emphasis on mitigating

health disparities, health inequities, and mental health issues.

IV. TRIENNIAL INCLUSION REPORT

Dr. Rebekah S. Rasooly, Executive Secretary, NACNR, and
Acting Director Division of Extramural Science Programs (DESP), NINR

Dr. Rasooly presented the NINR Triennial Inclusion Report for 2019–2021 on enrollment of participants in clinical research. The required report provides information about adherence to NIH policy on inclusion of women and minorities in research. Looking over this report, along with the previous Triennial Report (2016-2018), the proportion of female participants has declined substantially (from 83% in 2016 to 59% in 2021) to be closer to the percentage of the U.S. population that is female. Each year, from 2016-2021, enrollment of African Americans (AAs) in NINR-funded studies was higher than the proportion of AAs in the U.S. population (13%). Participation of American Indians and Alaska Natives has risen almost tenfold. Overall, minority enrollment ranged between 26 and 28 percent. Latino participants are underrepresented in NINR-supported research relative to their percentage of the U.S. population.

Discussion

Council members noted that increasing inclusion requires a two-pronged strategy to engage diverse individuals in the nursing research workforce and increase participation of underrepresented groups in research studies.

V. PRESENTATION 1—NIH PRAGMATIC TRIALS COLLABORATORY

Dr. Helene M. Langevin, Director, National Center for Complementary and Integrative Health (NCCIH)

Dr. Langevin provided an update on the [NIH Pragmatic Trials Collaboratory](#) (the Collaboratory) and its alignment with NINR interests in health equity, social determinants of health, population and community health, prevention and health promotion, and systems and models of care. Recently, the Collaboratory completed its transition from NIH Common Fund support to funding by ten ICOs, including NINR. Additional funding from the HEAL Initiative® supports pragmatic and implementation trials aimed at reducing opioid prescribing.

The Collaboratory’s mission is to strengthen capacity to implement cost-effective, large-scale research studies that engage healthcare delivery organizations as research partners. The Collaboratory supports design and rapid execution of Pragmatic Clinical Trial Demonstration Projects that address questions of major public health importance; helps to establish best practices and provide proof of concept for innovative designs in pragmatic clinical research; provides technical support and expertise; produces data, tools, and resources for the greater research community; and disseminates knowledge widely through its Knowledge

Repository, Living Textbook, and Grand Rounds.

Pragmatic Clinical Trial Demonstration Projects are solicited through Requests For Applications for milestone-driven awards. Awards include a 1-year planning phase (UG3) followed by a 4-year implementation phase (UH3). To date, 21 projects have transitioned to UH3.

Embedded pragmatic clinical trials bridge research into clinical care. Studies are designed with input from health system stakeholders, use data collected through electronic health records in healthcare settings, identify outcomes of importance to decision-makers, incorporate interventions into routine clinical workflow, and engage diverse, representative study populations.

NINR provides project scientists for four Collaboratory projects: Advance Care Planning: Promoting Effective and Aligned Communication in the Elderly (ACP-PEACE), Pragmatic Trial of Video Education in Nursing Homes (PROVEN), Nonpharmacologic Pain Management in Federally Qualified Health Centers Primary Care Clinics (BeatPain Utah), and the Fibromyalgia TENS in Physical Therapy Study (FM TIPS). These project scientists provide oversight for the conduct of the trials. The Collaboratory's Living Textbook and Knowledge Repository is a resource developed by the Collaboratory with information about conducting pragmatic clinical trials. More information about this repository may be found at rethinkingclinicaltrials.org.

Discussion

Council members commented on the importance of pragmatic research based on real problems as well as innovative research focused on solving problems efficiently and the need to have an expansive definition of “healthcare systems” that could use the Collaboratory. They also noted the importance of including trainees within research groups to create opportunities for learning.

VI. STRATEGIC PLAN AND DISCUSSION

Dr. Shannon N. Zenk, Director, NINR

Dr. Zenk provided an update on the [NINR Strategic Plan \(2022–2026\)](#). The Plan is designed to communicate to stakeholders how NINR will advance its mission—leading nursing science in solving pressing health challenges, improving health equity, and fostering research and training in nursing science through the delivery of holistic prevention, treatment, and care focused on the individual rather than their condition or life stage.

Developed with extensive public engagement and feedback, the Plan employs five research “lenses” or broad perspectives with which to examine health challenges. These lenses include health equity, social determinants of health, population and community health, prevention and health promotion, and systems and models of care.

NINR-supported research must be innovative, apply the most rigorous methods, and have the potential for significant impact on individual, community, and population health. The Strategic Plan supports research that advances equity, diversity, and inclusion; addresses today’s health challenges; and is poised to optimize health across settings. Additionally, the Strategic Plan is designed with the intention of setting new strategic imperatives as health challenges and opportunities are identified.

The Plan will be finalized and published within the next few months prior to implementation. NINR also may host seminars and events to highlight the importance of new research in these areas of emphasis.

Discussion

Council members were supportive and encouraged by the new directions in the framework. One noted it aligned with the NIH Strategic Plan, which could facilitate collaborations with other Institutes and Centers at NIH. Another member noted that the research lenses in the framework could be used to examine new areas of science, but also allow investigators to take a different look at longstanding topics of interest. Another member noted that the areas discussed in the framework are consistent with the central principles of nursing and encouraged NINR to clearly state the link between the strategic plan and nursing in the final Plan. Others encouraged NINR to discuss interdisciplinary collaborations, emphasize developing the next generation of nursing scientists, and ensure that NINR continues to welcome applications from non-nurses proposing research in NINR priority areas.

VII. PRESENTATION 2—MULTIPLE CHRONIC DISEASES DISPARITIES INITIATIVE

Dr. Nathan Stinson, Director, Division of Community Health & Population Services, National Institute on Minority Health and Health Disparities (NIMHD)

Dr. Stinson presented the Multiple Chronic Disease Disparities Initiative funded by the Centers for Multiple Chronic Diseases Associated with Health Disparities: Prevention, Treatment, and Management (P50) ([RFA-MD-21-007](#)). The Initiative aims to support regional comprehensive research centers on the prevention, treatment, and management of comorbid chronic diseases that disproportionately affect populations that experience health disparities. Diseases of interest include diabetes, hypertension, and coronary heart disease, among others.

According to Health and Retirement Study data, middle-aged, non-Hispanic Black adults have a higher level of chronic disease burden and develop multimorbidity at an earlier age, on average, than do their non-Hispanic White counterparts. Hispanics accumulate chronic disease at a faster rate relative to non-Hispanic White adults by 4–5 years.

Each Center must address two or more chronic conditions that commonly co-occur and/or share common

social context, etiological pathways, or risk factors and have some similar management strategies. Center components must include an administrative core, an investigator development core, and a community engagement core, as well as research projects. Research projects must address questions relevant to the Center's chronic disease disparities focus.

Dr. Stinson summarized the work of currently funded centers and the populations they serve. Populations include Latino children and families, immigrants, Native American youth, and African Americans in rural and urban areas across the country.

NIMHD is partnering with the National Institute of Diabetes and Digestive and Kidney Diseases, the National Heart, Lung, and Blood Institute, the National Cancer Institute, and the National Center for Advancing Translational Sciences to establish and support these centers and would value a partnership with NINR.

Discussion

Council members emphasized a need for focus on Native American, Alaskan Native, and Pacific Islander populations given their susceptibility to comorbidity of multiple chronic diseases. They recommended a focus on prevention as well as disease management.

Members discussed alleviating the disparities between White and Hispanic and African American populations by focusing on prevention rather than treatment or management of a disease. They also discussed concerns regarding the inclusion of other chronic diseases as well as mental health issues. One suggestion was to consider synergy with investigators from NINR's existing Centers which are sunsetting.

VIII. NINR CONCEPT PRESENTATIONS AND DISCUSSION

Concept 1. Research in NINR Areas of Emphasis

Mr. David Tilley, Program Analyst, DESP, NINR

The proposed concept aims to maximize the number of relevant grant applications NINR receives by issuing a FOA that highlights areas in the strategic plan, broadcasts research interests to the scientific community, and simplifies the application process for investigators. The proposal reflects the five research lenses for examining health challenges established by NINR's Strategic Plan.

Council members noted this is a timely concept and may assist trainees and researchers in determining how their work aligns with the Strategic Plan. They suggested emphasizing increased visibility of underrepresented populations and communities.

Concept 2. Addressing Nurse Burnout Amidst the COVID-19 Pandemic

Dr. Shweta Singh, American Association for the Advancement of Science, Science & Technology Policy Fellow, DESP, NINR

The proposed concept aims to address high levels of nurse burnout, which have risen steeply from pre-pandemic rates (35–46%) to the current estimate of 50–63%.

Council members noted that support is needed for research to develop, implement, and evaluate effective system-level interventions rather than placing the burden of harm reduction on individual nurses. They emphasized the need for increased nurse autonomy, improved leadership, supportive management, and improved healthcare operations and staffing.

IX. COUNCIL OPEN DISCUSSION

Council members discussed application of research lenses to areas of nursing research, translation of nursing research into practice and policy, and identification of pressing challenges and other research gaps and opportunities. They noted the importance of addressing inequity and the double vulnerability of nurses and the marginalized populations they serve, focusing on retention of qualified nurses across the healthcare system, and fostering collaborative relationships between nursing and non-nursing scientists.

Adjournment

Dr. Zenk thanked meeting attendees and adjourned the open session of the meeting at 2:45 p.m.

X. CLOSED SESSION

This portion of the meeting was closed to the public in accordance with the determination that this session concerned matters exempt from mandatory disclosure under Sections 552b(c)(4) and 552b(c)(6), Title 5, U.S. Code, and Section 10(d) of the Federal Advisory Committee Act, as amended (5, USC Appendix 2). Members absented themselves from the meeting during discussion of and voting on applications from their own institutions or other applications in which there was a potential conflict of interest, real or apparent. Members were asked to sign a statement to this effect.

Review of Applications

Council members considered 124 research and training grant applications on which NINR was the primary Institute; these applications requested a total of \$30,716,176 (direct costs year 01). The Council also considered 163 applications on which another Institute/Center was primary and NINR was secondary. These applications requested a total of \$69,671,783 (direct costs year 01). The Council concurred with the Institutional Review Group recommendations on these 287 applications.

ADJOURNMENT

The 106th meeting of the NACNR was adjourned at 4:05 p.m. on Tuesday, January 25, 2022.

CERTIFICATION

I hereby certify that the foregoing minutes are accurate and complete.

**Shannon N.
Zenk -S**

Digitally signed by
Shannon N. Zenk -S
Date: 2022.04.26 19:30:37
-05'00'

Shannon N. Zenk, PhD, MPH, RN, FAAN
Chair
National Advisory Council for Nursing Research

**Rebekah S. Rasooly
-S**

Digitally signed by Rebekah S.
Rasooly -S
Date: 2022.04.26 20:15:22 -04'00'

Rebekah S. Rasooly, PhD
Executive Secretary
National Advisory Council for Nursing Research

COUNCIL MEMBERS PRESENT

Dr. Shannon N. Zenk, Council Chair
Dr. Rebekah S. Rasooly, Executive Secretary
Dr. Robert L. Atkins, *ad hoc*
Dr. Daniel E. Dawes, *ad hoc*
Dr. Anne Fitzpatrick, *ad hoc*
Dr. Grayson N. Holmbeck
Dr. Mallory O. Johnson
Dr. Christopher Lee
Dr. Peter A. Lewin
Dr. John Lowe
Dr. Nilda Peragallo Montano
Dr. Ida M. Moore
Dr. Cindy L. Munro, *ad hoc*
Dr. Elias Provencio-Vasquez
Dr. Patricia W. Stone, *ad hoc*
Dr. Sheila Cox Sullivan, *Ex Officio*
Dr. Sarah L. Szanton, *ad hoc*
Dr. Joanne Wolfe

NIH STAFF PRESENT

Anita Ambs
Brian Albertini
Bronte Williams Washington
David Banks
David Tilley
David Timpane
Dionne Godette-Greer
Edmonds Byrnes
Elyse Schauwecker
Frances Bevington
Helene Langevin
Jo-Ann Kriebel
John Grason
Karen Huss

Karen Kehl
Kevin Wilson
Kris Bough
Liz Perruccio
Lois Tully
Lynn Adams
Ming Yan
Nathanial Stinson
Olga Acosta
Rebekah Rasooly
Samantha Sanchez
Samuels Edwards
Sarah Yoon
Shalanda Bynum
Shannon Zenk
Shawn Stocking
Shweta Singh
Susan Old
Weiqun Li
Yvonne Bryan

The entire meeting was held by NIH videocast, and all observers, including members of the public, attended virtually.