



Support for nursing science

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ABSTRACT

Background: The mission of the Department of Health and Human Services is to enhance the health and well-being of the American people. It does this by providing oversight for more than 1,000 grant programs across 26 federal agencies at an annual cost of approximately \$500 billion. The National Institute of Nursing Research (NINR) at the National Institutes of Health (NIH) is one institute originated to support health care research from a nursing perspective. However, funding of nursing research from federal agencies has remained relatively flat for more than a decade, despite increases in total NIH funding.

Purpose: The purpose of this report is to describe the types of funding support provided by federal government agencies (including the NIH) to schools of nursing.

Method: The NIH's Research Portfolio Online Reporting Tool, Expenditures and Results system from 1988 to 2014 was accessed to collect information on the grant recipient institutions as well as the source, number, type, and dollar amounts of grants.

Discussion: The funding level and its implications for the future of nursing science are considered.

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Scientific advances have significantly improved the quality and length of life in the United States and beyond. The goal of the Department of Health and Human Services (DHHS) is to enhance the health and well-being of the American people (<http://www.hhs.gov/secretary/about/introduction.html>), and it does this by providing strategic guidance and oversight for more than 1,000 grant programs across 26 federal agencies at an annual cost of approximately \$500 billion (<http://www.grants.gov/web/grants/about.html>).

The National Institutes of Health (NIH), one agency under DHHS, is the leading supporter of biomedical research in the world (<http://nih.gov/about/impact/index.htm>) and seeks the “fundamental knowledge about the nature and behavior of living systems and

the application of that knowledge to enhance health, lengthen life, and reduce illness and disability” ([National Institutes of Health, n.d.](http://www.nih.gov)). NIH consists of 27 institutes and centers, each with their individual mission, vision, and budget aligned with the objectives of the parent organization.

Support from the NIH, appropriated by Congress and approved by the President, provides the funds to discover cures for human disease and to improve and/or extend the lives and quality of life of our nation's people. NIH also plays a significant role in determining the trajectory of investigators' careers and the reputation of research-intensive universities, but most important, determines the direction of future scientific discoveries ([National Research Council, 2005](http://www.nrc.gov)). It is the

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funding of research that determines the theories and knowledge that eventually influence health policies and clinical practice. This interplay between grant support and scientific inquiry by scientific teams motivates infrastructure support and interprofessional collaborations at academic institutions around the nation.

In 2015, the National Institute of Nursing Research (NINR) will celebrate 30 years since its origin as a center (later designated as an institute in 1993) within the NIH (Cantelon, 2010). Nursing research provides the evidence for maximizing health, improving the quality of life across the life span, and enhancing the death experience. With the designation of NINR within NIH in 1992, NINR became a formal entity within the NIH budget with a goal to “enhance nursing science and health care” (National Institute of Nursing Research, 2011). NINR is the institute most responsible for biomedical and health-related research from a nursing perspective in the United States.

The purpose of this article is to describe the types of funding support for nursing science—including research training, projects, and infrastructure—provided by the U.S. government via the NIH and other DHHS agencies to Schools of Nursing (SONs) since the creation of the NINR. This information will inform scientists and health policy makers about the agencies most supportive of proposals focused on science. It will highlight the scope of research that provides the foundation for nursing practice and the health of the public that is conducted within SONs and will identify the support available to prepare future nurse scientists. In our current environment where the competition for research dollars remains extremely high, support for curing diseases such as cancer or heart research is in the billions of dollars, whereas support for nursing research remains extremely low.

Method

This report provides a description of research proposals that were funded by government agencies of the DHHS, including NIH, that are listed in and available from the NIH’s Research Portfolio Online Reporting Tool, Expenditures and Results (RePORTER) system during the time period of 1988 to 2014. The RePORTER is a publicly available comprehensive online repository that allows anyone to search research titles, abstracts, and funding records using key criteria. In this review, the search criteria included the fiscal year (1988–2014) and the organization type (SONs). The output included the project title, project details (administering Institute/Center (IC), Funding Opportunity Announcement (FOA), project number, project start date, project end date, cost [direct, indirect and total]), principal investigator(s) (PI), organization name and address, and was exported to an Excel file. In situations where an agency’s name and coding changed over time, but the

Center/Institute was basically the same (e.g., National Center of Minority Health and Health Disparities became the National Institute on Minority Health and Health Disparities); data were combined. In the event of subcontracts or projects with multiple PIs and the allocation of funding support was not designated by the PI, the projects were counted as one within the parent project. All data requested were available on grants from 1988 to 2014 except the cost data (direct, indirect and total costs). Cost data were not present in the ProjectReporter data for the years 1988 to 1999; these years are excluded from reports of the direct, indirect, and total costs of grant funding. Descriptive and graphic analyses were conducted using IBM SPSS Statistics.

Findings

There were 8,010 applications that were funded from 39 governmental agencies or institutions via 103 grant mechanisms (types of grants) awarded to 3,570 PIs in SONs from 1988 to 2014. Of these, 135 projects listed multiple PIs, and 622 applications were supplements to the original grant resulting in 7,253 grants included in this report. The 39 governmental agencies were subdivisions within five major divisions within the federal government: Health Resource and Service Administration (HRSA), NIH, Centers for Disease Control and Prevention (CDC), Substance Abuse and Mental Health Services Administration (SAMHSA), and Agency for Healthcare Research and Quality (AHRQ; refer to Table 1).

Grants to SONs were awarded primarily from the Division of Nursing at HRSA ($n = 2,745$; 37.8%) and the NINR at NIH ($n = 2,788$; 38.4%). The other eight agencies are denoted in Table 2 in rank order. The agencies that awarded the least number of projects to SONs included the National Center for Injury Prevention and Control/CDC, National Center on Birth Defects and Development Disabilities/CDC, Office of the National Coordinator for Health Information Technology at DHHS, Centers for Health Promotion/CDC, and Center for Infectious Disease/CDC. The Institutes within NIH that awarded the fewest projects to SONs were the National Institute of Biomedical Imaging and Bioengineering, National Institute of Dental and Craniofacial Research, National Institute of Deafness and Other Communication Disorders, National Institute of Environmental Health Services, and National Institute of Allergy and Infectious Diseases.

The funding support for an individual grant from 2000 to 2014 ranged from \$1 to \$7,479,525. Table 3 illustrates the total number of grants, in rank order, provided to SON by the 10 most frequent grant mechanisms.

The total average annual support for new grants was approximately \$50 million. This includes the one-time additional funding NIH distributed as a result of the

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