The 2014–2018 Oncology Nursing Society Research Agenda

M. Tish Knobf, PhD, RN, AOCN®, FAAN, Mary E. Cooley, PhD, RN, FAAN, Sonia Duffy, PhD, RN, FAAN, Ardith Doorenbos, PhD, RN, FAAN, Linda Eaton, PhD, RN, AOCN®, Barbara Given, PhD, RN, FAAN, Deborah K. Mayer, PhD, RN, AOCN®, FAAN, Ruth McCorkle, PhD, RN, FAAN, Christine Miaskowski, PhD, RN, FAAN, Sandra Mitchell, PhD, CRNP, AOCN®, Paula Sherwood, PhD, CNRN, FAAN, Catherine Bender, PhD, RN, FAAN, Janine Cataldo, PhD, RN, Denise Hershey, PhD, FNP, Maria Katapodi, PhD, RN, FAAN, Usha Menon, PhD, RN, FAAN, Karen Schumacher, PhD, RN, Virginia Sun, PhD, RN, Diane Von Ah, PhD, RN, FAAN, Geri LoBiondo-Wood, PhD, RN, FAAN, and Gail Mallory, PhD, RN, NEA-BC

The Oncology Nursing Society (ONS) developed its first Research Agenda in 2001 and has updated the agenda every four years. The dual purpose of the ONS Research Agenda is to determine priority topics for research consistent with the ONS mission to promote excellence in oncology nursing and quality cancer care and to provide the ONS Foundation with the data needed to support the decision-making process for funding oncology nursing research. ONS identified content leaders and experts from the membership for the 2014–2018 Research Agenda Project Team. This team used a multimethod consensus-building approach that was informed by the results of the 2013 ONS Research Priorities Survey (Lobiondo-Wood et al., 2014), a comprehensive literature review, and a review of the national priorities for cancer and nursing research (see Figure 1). Since 2001, the ONS research priorities have reflected the disciplinary perspective of nursing and the mission of ONS. Management of physical and psychological symptoms, health promotion, patient and caregiver issues, end-of-life care, survivorship, and healthcare delivery systems have consistently shaped the Research Agenda. Dynamic progress in understanding the biology of cancer and identification of targets for therapeutic interventions have resulted in the widespread concept of personalized medicine to treat cancer. An understanding of both inter-patient variability and biologic mechanisms are equally important to interpretation of patient responses and to the development and testing of interventions. The increasing national emphasis on evidence-based practice and patient-centered care, as identified by Institute of Medicine reports related to cancer care and the Patient-Centered Outcomes Research Institute, further support the research areas and cross-cutting themes. The 2014–2018 Research Agenda