

## Looking Back at a Research Career Supported by a Kakenhi System Enabling Diversity and Inquiry

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Being asked to contribute an essay on Kakenhi by a person in charge of research aid at the Japan Society for the Promotion of Science caused me to realize again how Kakenhi has supported the foundations of my research career.

Kakenhi applications adopted in recent years show a trend toward larger and more collaborative research projects. There has also been a rapid shift to a results orientation, to interdisciplinary projects, to projects combining the humanities and sciences, as well as to joint research with industry. Making research results visible, returning results to society, and efficiency are without doubt important perspectives. As a result of this shift, however, consolidation of a sort and the exclusion of diversity may paradoxically be occurring.

My first Kakenhi application was adopted in 1986. In the following 21 years, I was able to execute 11 research projects. I fondly recall the time when regional universities could not afford personal computers and I wrote my funding applications out by hand. With Kakenhi grants increasing in number and expanding in scope, my research plans also received support. I believe Kakenhi grants of this period fostered a diversity of research in size and area and cultivated the research perspectives of young researchers.

My research area is nursing science. This is an area whose research theme is providing human care from the perspective of nursing science so people with health issues can live more healthy lives. I have researched the development of human care in nursing, which seeks to understand people with health or life issues, including the situation in which they are placed. In addition, I have researched the education of nurses who can provide such nursing care.

My research career, based on clinical experience, began with the investigation of how to provide nursing care to mentally handicapped persons with weak egos and limited decision-making capabilities as well as to their families. The subject of my first research project funded by Kakenhi was the self-care of

schizophrenics, their families, and nurses. This was followed by such research projects as the development of a model of nursing practice supporting self-determination and the classification of nursing interventions in use in psychiatric nursing. In these projects, I researched modeling nursing practice regarding nursing interventions occurring in the places of nursing practice by carefully identifying the tacit knowledge of certified nurse specialists. This research expanded to the topics of developing an education model for nursing ethics and developing a model for the education of psychiatric nursing skills that supports the transition from education to clinical practice, both models for nursing education that enables novice nursing students to acquire the tacit knowledge of certified nurse specialists.

My second area of research is family nursing science. My interest in family nursing also originates in my clinical experience as a nurse in a psychiatric hospital. I studied the theory and research methods of family nursing science in a doctorate program of the School of Nursing of the University of San Francisco. On returning to Japan, I focused on developing family nursing science as an area of nursing science. In research funded by Kakenhi, I investigated the capacities and power of families by researching the development of measurement tools of the coping behavior of families with chronically ill children and the identification of effective indicators based on multifaceted data of family coping and its efficacy regarding asthmatic children. I also explored methods for incorporating family nursing science in nursing practice by developing and verifying an effective family nursing model through the analysis of nursing involving families with coping difficulties. I developed a family nursing empowerment model as a practical model for family nursing. Then, to investigate its clinical appropriateness, I developed nursing care guidelines supporting the home life of families living with patients with intractable diseases and researched the evaluation of nursing empowerment interventions in families through the collaboration of research and practice. Currently, I am developing a model for supporting the resilience of family nursing while investigating its clinical appropriateness. When I look back on these 21 years, I have worked together with my colleagues in the Japan Association for Research in Family Nursing to position families as the subject of nursing care, to incorporate fundamental knowledge of family nursing and nursing intervention in basic nursing education, to have family nursing science taught at the graduate level, and to foster certified nurse specialists. Reflecting on this academic history, I am thankful for the substantial backup and support I received through the research activities and research results funded by Kakenhi grants.

At the University of Kochi, we have established a university-wide support system and are actively applying for Kakenhi. Given the faculty composition of the university, these applications are not for large-scale research, but we are still achieving a high adoption rate. Many faculty members are engaging in research activities funded by Kakenhi and are reporting their results. I consider this is also the outcome of Kakenhi's ongoing respect for diversity.

For an individual researcher, a career in research is not a sprint but a marathon of discerning the next few steps forward. Similarly, current large-scale research has taken shape by building on several small and diverse research projects. I therefore strongly hope for the establishment of a Kakenhi framework that will make possible the support of diverse research perspectives and project sizes and a diversity of researchers.