February 22, 2019

Office of Behavioral and Social Sciences Research
Office of the Director
National Institutes of Health
31 Center Drive, Building 31, Room B1C19
Bethesda, MD 20892


Dear Director Collins and Director Riley,

The Council for the Advancement of Nursing Science (Council), an open membership council of the American Academy of Nursing (Academy), submits the following comments in response to the Request for Information (RFI) on the revised definition of behavioral and social sciences research (BSR) by the Office of Behavioral and Social Sciences Research (OBSSR). Central to improved health outcomes is the vital role and holistic approaches nurse scientists take to expand knowledge across the continuum of care.

The definitions of “behavioral” and “social” need to be carefully considered. While the Council believes the proposed definitions are broad in nature, in order to ensure aspects of “behavioral” scientific research are not excluded, the Council recommends modifying the definition of behavioral as noted below. Expanding the definition to be more inclusive of the numerous behavioral actions that are observable by researchers will enable OBSSR to conduct broader, wider, and less restrictive studies.

“Behavioral” refers to overt or observable actions and to mental phenomena including but not limited to knowledge, attitudes, beliefs, cognitions, and emotions that are inferred from behavior.

Additionally, the Council believes broadening the definition of “social,” as suggested below, will provide for more comprehensive research within OBSSR.

“Social” refers to the interactions between and among individuals as well as to the activities and/or relationships those individuals have with social groups, institutions, and environments, including but not limited to family, community, school, workplace, economic, cultural, policy, physical, health, and digital environments.”

 Specifically, the Council recommends that the term “environment” be broadly conceptualized, to include physical, healthcare, and digital settings. Physical environments disproportionately impact those with fewer resources and are exposed to at-risk environments. For example, children growing up in homes without lead abatement may be more likely to exhibit certain behavioral phenomena due to their economic but also physical environment. The Council believes it is important to also include health settings as environments that impact health behaviors and that those same environments interact with
patients and families in unique ways. Finally, digital interactions/groups, which are growing and assuming increasing importance within the social space also need to be considered. The Council suggests NIH include “digital” as a type of social activity to ensure important behavioral phenomena resulting from participation in digital social groups can be studied further. All environments are intersecting and having a definition of “environments” that creates opportunity for current and future research and methodology would be beneficial for OBSSR’s portfolio.

Defining BSSR in a way to be more comprehensive will lead to more opportunities for research to be conducted with the end goal of improving outcomes and care delivery for the patients served. The Academy and the Council thank the OBSSR for extending this RFI to stakeholders. Modifications made to the definition of BSSR will promote high-quality research that focuses on patients. Should you have any questions concerning the Council’s recommendations, please contact Rachael James, the Manager of the Council for the Advancement of Nursing Science, at rjames@aannet.org.

Sincerely,

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