



Year: 2024

Setting new priorities for nursing research: The updated Swiss Nursing Research Agenda—a systematic, participative approach

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Abstract: Aim To identify current key areas for nursing research in Switzerland, we revised the Swiss Research Agenda for Nursing (SRAN) initially published in 2008. Background By developing a research agenda, nursing researchers internationally prioritize and cluster relevant topics within the research community. The process should be collaborative and systematic to provide credible information for decisionmakers in health care research, policy, and practice. Sources of Evidence After a participative, systematic, and critical evaluation within and outside of the Swiss Association for Nursing Science, the updated SRAN 2019–2029 defines four research priorities (new models of care, nursing care interventions, work and care environment, and quality of care and patient safety) and four transversal themes (organization of research, research methodologies, research in health care policy and public health perspectives). Conclusion Adding to other national nursing research agendas, the categories are organized in a framework of key research priorities and transversal themes. They relate to the importance of global and local foci of research as well as challenges in health care services and policy systems. The agenda is an important prerequisite for enhancing the influence of nursing research in Switzerland and provides guidance for the next decade. Implications for Nursing Practice The revised agenda ensures that research projects target key knowledge gaps and the discipline’s core questions in respective countries. Implications for Health Policy Nursing research should inform and influence health policy on all institutional and political levels. Therefore, the integration of public health perspectives in research is one of the most important new aspects of SRAN 2019–2029.

DOI: <https://doi.org/10.1111/inr.12937>

Posted at the Zurich Open Repository and Archive, University of Zurich

ZORA URL: <https://doi.org/10.5167/uzh-252792>

Journal Article

Published Version




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Originally published at:

Stadtman, Manuel P; Bischofberger, Iren; Balice-Bourgeois, Colette; Bianchi, Monica; Burr, Christian; Fierz, Katharina; de Goumoëns, Véronique; Kocher, Agnes; Kunz, Stefan; Naef, Rahel; Bachmann, Annie Oulevey;

Schubert, Maria; Schwendimann, René; Simon, Michael; Waldboth, Veronika; Zanon-Di Nardo, Dave; Nicca, Dunja; Zigan, Nicole (2024). Setting new priorities for nursing research: The updated Swiss Nursing Research Agenda—a systematic, participative approach. *International Nursing Review*:Epub ahead of print.
DOI: <https://doi.org/10.1111/inr.12937>

Setting new priorities for nursing research: The updated Swiss Nursing Research Agenda—a systematic, participative approach

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Abstract

Aim: To identify current key areas for nursing research in Switzerland, we revised the Swiss Research Agenda for Nursing (SRAN) initially published in 2008.

Background: By developing a research agenda, nursing researchers internationally prioritize and cluster relevant topics within the research community. The process should be collaborative and systematic to provide credible information for decisionmakers in health care research, policy, and practice.

Sources of Evidence: After a participative, systematic, and critical evaluation within and outside of the Swiss Association for Nursing Science, the updated SRAN 2019–2029 defines four *research priorities* (new models of care, nursing care interventions, work and care environment, and quality of care and patient safety) and four *transversal themes*

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(organization of research, research methodologies, research in health care policy and public health perspectives).

Conclusion: Adding to other national nursing research agendas, the categories are organized in a framework of key research priorities and transversal themes. They relate to the importance of global and local foci of research as well as challenges in health care services and policy systems. The agenda is an important prerequisite for enhancing the influence of nursing research in Switzerland and provides guidance for the next decade.

Implications for Nursing Practice: The revised agenda ensures that research projects target key knowledge gaps and the discipline's core questions in respective countries.

Implications for Health Policy: Nursing research should inform and influence health policy on all institutional and political levels. Therefore, the integration of public health perspectives in research is one of the most important new aspects of SRAN 2019–2029.

KEYWORDS

Health policy, methodology, nursing, nursing research, research agenda

BACKGROUND

Setting priorities for research in nursing has long been an important driver to foster evidence-based nursing practice, policy and education (Lindeman, 1975). It is crucial to identify and prioritize topics in a research agenda that provides guidance for the nursing science community as well as for policymakers. A research agenda can be elaborated for a single country such as Switzerland (Imhof et al., 2008), Uganda (Spies et al., 2015) or Germany (Bartholomeyczik & Schaeffer, 2021). It can focus on particular nursing roles, e.g., oncology nursing (von Ah et al., 2019), nurse practitioners (Poghosyan et al., 2023) or nursing management (Mulvey et al., 2023). Or it relates to a specific area such as public health nursing (Issel et al., 2012) or nursing health service research, which is typically embraced on the state (Buerhaus et al., 2019) or national level (Cohen et al., 2021). Also, on a global scale, healthcare trends shared around the globe are recommended to be the rationale for a nursing research agenda (Meleis, 2015). The aim of this article is to provide insights into the update process and results of the Swiss Research Agenda for Nursing (SRAN).

SETTING

The Swiss health care system serves 8.9 million inhabitants who are covered for acute and chronic health conditions by a basic package of mandatory private health insurance. The country is characterized by federal structures of 26 cantons and 2136 municipalities (as of 2023), as well as coverage by 51 certified private health insurance companies and influences by several powerful associations of providers and professions.

As in most countries, nurses are the largest healthcare profession (Merçay et al., 2021). They play a vital role in providing care to the population and in improving health outcomes. As of 2022, there were 1156 graduates with a master degree and 58 with a doctorate (Swiss Federal Statistical Office, 2023). Cantonal health departments license and supervise care providers,

and cantonal educational departments supervise institutions of higher education. Since there is no legislation for advanced nursing roles (except in one canton), care providers are fully responsible for their scope of practice.

Despite the late advent of nursing science in Switzerland around the year 2000, there is a lively discourse of advanced practice, education, and policy (Bryant-Lukosius et al., 2016) as well as research as is presented in the following history of the SRAN.

Project history

The SRAN serves as an example of constant development and updating over the course of approximately 15 years. The process was guided by the Swiss Association for Nursing Science (VFP/APSİ), which has a leading role in developing the profile of nurse scientists in clinical practice, education, research, and management, and it provides a platform for sharing and coordinating research knowledge (Swiss Association for Nursing Science, 2019). In 2006, a project team developed the first SRAN 2007–2017 (*SRAN project I*) (Imhof et al., 2008), which provided a roadmap with seven priorities for the strategic direction of nursing research.

For the SRAN to continue to have an effect, a second project phase was necessary, aiming to make the SRAN widely known in Switzerland and to support research projects. *SRAN Project II 2012–2014* aimed at evaluating the implementation process so far and the need for an update. VFP/APSİ members were invited to a survey to report all their conducted studies from 2007 to 2013. All of the 217 reported studies (Schlüer et al., 2014) related to at least one of the seven SRAN priorities. The top three priorities were the identification of nursing phenomena ($n = 113$, 52%), development of nursing services ($n = 109$, 50%) and effects of nursing interventions ($n = 77$, 35%). Additionally, most participants at a subsequent VFP/APSİ symposium in 2014 considered the SRAN update relevant and suggested including topics such as eHealth and nursing classification systems.

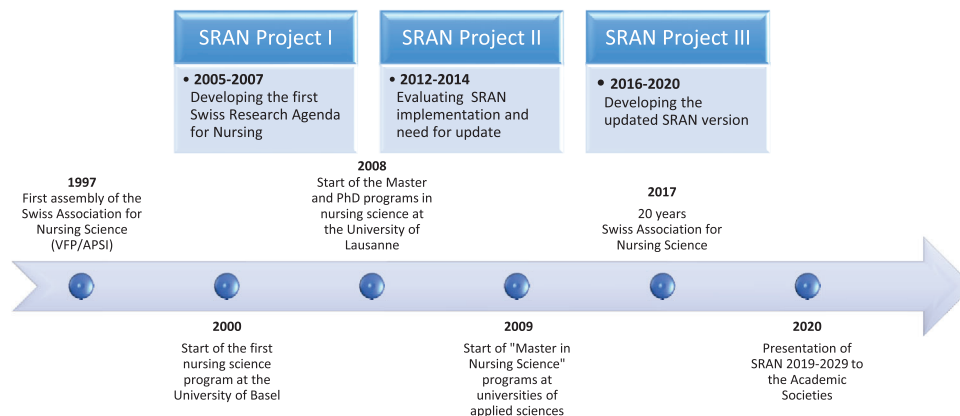


FIGURE 1 Timeline of the three SRAN projects and the development of nursing science in Switzerland.

After 2014, the SRAN update became even more relevant because of the rapidly increasing number of graduate nurses (Figure 1). And coordination between research departments, academia and clinical practice became imperative.

The aim of *SRAN Project III* was to re-evaluate and update the research priorities of the original agenda, based on recent societal, professional, and scientific developments. These activities started in 2016. In this article, we will describe our methodological approach and the results of the SRAN Project III.

Source of evidence

SRAN Project III included quantitative and qualitative approaches along a multi-step, strongly consensus-oriented process. Involving as many stakeholders as possible from the nursing science community, who are working in universities and clinical settings with research activities, the development process comprised five work packages, led by the two last authors. They applied specific methods described in Figure 2. The five packages were aligned as an iterative process until mutual agreement was achieved.

Ethical considerations

An ethics committee approval was not required, as the data and forms of the collection were not subject to the Human Research Act (HRA) in Switzerland.

RESULTS

The updated agenda comprises four *key priorities* with *sub-themes* (Figure 3) (part 1) to ensure applicability to all populations and care settings. We also defined *transversal themes* (part 2) relevant to all four priorities serving as a bridge between the four priorities. Together, they provide a framework for planning, conducting, evaluating and disseminating nursing research.

Part 1: SRAN 2019–2029 research priorities

Priority A: New models of care necessary to address challenges in the healthcare system

Subtheme A1: Collaboration within new models of care

Collaborative and interprofessional practice involves communication focusing on the goals and the well-being of the person (World Health Organization, 2010). The coordination of chronic care demands particular attention and investigation, especially in the context of new models of care emphasizing the relationship between evidence-based care and high-quality interprofessional collaboration.

Subtheme A2: Nursing contributions, including advanced practice nursing (APN) and APN roles, have been shown to improve outcomes. A systematic evaluation of new models of care as a contribution to the sustainable implementation of APN roles is required (Serena et al., 2015).

Subtheme A3: Self-management support for patients and informal caregivers

Particularly in the area of chronic illness management, new models of care should integrate self-management support strategies addressing patients and their informal caregivers as partners in the health care team along the illness trajectory. Self-management practices and policies need to be firmly rooted in empirical evidence.

Subtheme A4: Development of a methodology for developing new models of care

Innovative models of care are highly context-dependent and involve complex interventions. Due to potential interactivity with other professionals, their effects are difficult to measure. Accordingly, developing, implementing, evaluating and sustaining models of care requires innovative methodologies and sound theoretical frameworks (Busnel et al., 2020). (Swiss Association for Nursing Science, 2019).

Priority B: Nursing interventions to promote patient-centred care

Subtheme B1: Patient-reported outcomes and experience

Work package	Aim	Participants	Recruitment	Data collection	Procedures and products
1. Survey	1) To assess the content of SRAN 2007-2017: What is relevant for the next ten years? 2) To determine new research priorities	1) All presidents of VFP/APSI academic nursing societies (ANS), members of ANS 2) Key stakeholders of Nursing research centers with a government research mandate at hospitals (e.g. heads of practice development, Advanced Practice Nurses), at universities, or universities of applied sciences with focus on nursing (e.g. heads of research departments) 3) Organizations with direct reference to nursing research but nursing in general (e.g. associations, societies)	Snowballing approach for recruiting (n = 43) Resulted in totally participants n = 89 (from all language regions of Switzerland) Attrition rates (expected no. at minimum): n / % German (93): 53 / 57%, French (27): 27 / 100%, Italian (9): 9 / 100%	Online survey (October-November 2016)	Assessment of the perceived relevance of current and future research priorities and transversal themes; Part I (quantitative): Quantitative, descriptive analysis of ratings on still relevant priorities and transversal themes, as well as future relevant themes resulted in: <ul style="list-style-type: none">• Priorities (top 3): effect of nursing interventions, development of nursing services, impact of the work environment• Transversal themes (top 3): collaboration with patients/family, multidisciplinary, and patient safety Part II (qualitative): Qualitative, summative content analysis of perceived new themes (free text entries) relevant for the future resulted in: (262 statements, of which 207 statements were included for analysis and were grouped in totally nine thematic groups.) <ul style="list-style-type: none">• Priorities (four preliminary themes): new models of care, work environment (more in detail),

FIGURE 2 SRAN revision: methods and procedures.

The patient's point of view is now recognized as essential resulting in the development of numerous PROMs (patient-related outcome measures) and PREMs (patient-related experience measures). PROMs are more concordant with patients' overall health status and results. PREMs are important to elicit patient's narratives on illness, treatment and care experiences in diverse social or healthcare settings.

Subtheme B2: Person-centred care

Person-centred care puts people and their families at the centre of decisions and considers them as experts working with professionals to achieve the best outcome (McCormack et al., 2021). This approach has recently been implemented in research grant evaluations to some extent.

Subtheme B3: Reduction of suffering and burden among service users

Based on patient or family-reported experiences and outcomes, nursing interventions aiming to reduce illness-related burden or stress, as a result of research are necessary.

Subtheme B4: Health promotion and disease prevention

Research is needed to cohesively develop, adapt, implement and evaluate public health nursing interventions (Swiss Academy of Medical Sciences, 2019).⁷ (Swiss Association for Nursing Science, 2019).

Priority C: Work and care environment for supportive conditions

'Subtheme C1: Nursing leadership and management styles

At each organizational level, the quality and characteristics of nursing leadership styles are associated with patient and nurse outcomes as well as with quality of care (Cummings et al., 2018). To improve the quality of nursing management, interventions should address leadership skills, competencies and abilities at every organizational level.

Subtheme C2: Skill-grade-mix and nursing resource planning

Research studies in Switzerland evaluated the required nurse staffing and skill-grade-mix levels (Renner et al., 2022). Despite these efforts, evidence on explicit skill-grade-mix models for Swiss healthcare institutions is still limited.

Subtheme C3: System-level professional collaboration and teamwork

Practice-based interventions designed to improve interprofessional collaboration can have a positive effect on collaboration and teamwork (Reeves et al., 2017). A lack of precise assessment and evaluation tools in interprofessional teamwork, collaboration and learning poses a major challenge for researchers in this field (Cuff, 2013).

Subtheme C4: Reconciliation of employment and family/informal care

Family caregivers with concurrent employment obligations have limited time to interact with healthcare staff. Therefore, a close collaboration considering that reality is required (Bischofberger & van Holten, 2015). Compared to professionals in other sectors of the labour market, health and particularly nursing professionals are more likely to support ill or frail members of their own family (Jähnke, 2023).⁷ (Swiss Association for Nursing Science, 2019).



Work package	Aim	Participants	Recruitment	Data collection	Procedures and products
					nursing sensitive outcomes, individualized nursing <ul style="list-style-type: none"> Transversal themes (five preliminary themes): interprofessional approaches, methodological approaches, eHealth and technologies, patient/family involvement, and prevention and health promotion
2. First round expert groups	1) To structure the themes derived from survey results 2) To develop a first draft	Three thematically organized expert groups	Theoretical sampling of VFP/APSI members and stakeholders n = 26 Expert group 1) "New Care Models": n = 9 participants Expert group 2) "Work Environment": n = 8 participants Expert group 3) "Nursing-sensitive outcomes": n = 9 participants	Expert consensus meetings during July-September 2017 (4 meetings)	Participants of the expert groups worked on: <ul style="list-style-type: none"> Structure of the agenda Preliminary draft of research priorities Preliminary draft of transversal themes This included a literature-based description of contents by each expert group and coordination meetings to discuss fit of structure, content of priorities transversal themes This resulted in a first agenda draft and a presentation at the Public SRAN conference
3. Public SRAN conference	1) To discuss and reflect on content and structure 2) To allow involvement of nurses willing to participate and support the process	SRAN conference: participants were 1) members of expert groups Members of VFP/APSI and academic nursing societies (ANS) 2) other participants (nurses, nurse researchers, researcher affiliated with nursing research	Theoretical sampling: experts of working groups and additional experts (conference participants) n = 60	Expert consensus (October 2017)	Participatory decision-making process Elaboration of the revised agenda Workshop 1) "New Care Models": <ul style="list-style-type: none"> Fostering strong partnerships with patients and families Collaborating with other disciplines Promoting different methods and research approaches (e.g., translational or implementation research) Being sensitive to marginalized populations and ensuring equality of access to healthcare Workshop 2) "Work Environment": <ul style="list-style-type: none"> Resource allocation Patient safety and staff safety Health policy Workshop 3) "Nursing-sensitive outcomes": <ul style="list-style-type: none"> Considering more qualitative and patient-centered dimensions.

FIGURE 2 Continued

Priority D: Quality of care and patient safety interventions for quality improvement

'Subtheme D1: Nursing quality measures and improvement

In all healthcare settings, meaningful quality measures of processes, structures and outcomes are required. To develop such measures, it is necessary to involve key stakeholders (patients/ clients, clinicians, policymakers). Robust research methodologies are needed to assess the reliability and validity of these measures.

Subtheme D2: Communication and safety culture

Safety climate and culture rely on core factors, including staff members' individual and collective performance, attitudes, and communication (Madden et al., 2022). The factors

influencing communication and safety culture need to be better understood.

Subtheme D3: Safety systems—measurement, methodology and monitoring

To improve patient safety, complex system-level interventions are required. With regard to human, technical, and organizational factors, the development of theory-based approaches is essential (Carayon et al., 2020).

Subtheme D4: Safe clinical practices, procedures, and technologies

Safe care depends on the application of reliable, evidence-based interventions and best practices. The implementation of safety-improving interventions needs to be studied in real-life contexts.' (Swiss Association for Nursing Science, 2019).

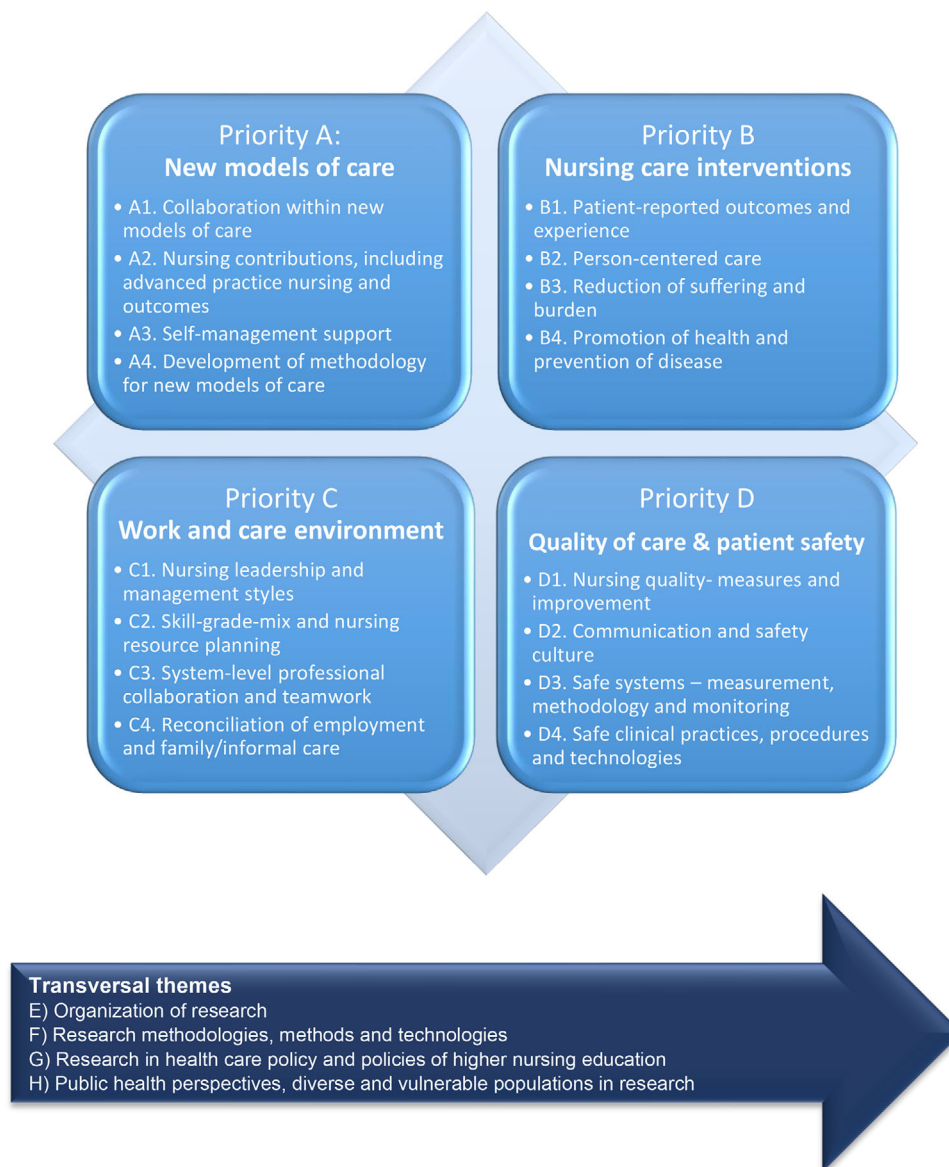


FIGURE 3 Four key priorities and transversal themes.

Part 2: Transversal themes

The following four transversal themes are relevant across priorities and sub-themes when planning, conducting, evaluating and disseminating research:

(E) Organization of research

To bundle resources and to maximize the value of nurse researchers' output, individual studies should be part of larger research programmes, research institutions and academic-practice partnerships. Given the complexity of current and future socioeconomic, technological, and demographic shifts, the programmes require interprofessional collaborative research at a national and international level. To align care-oriented research with individual and collective

needs, patient participation is required (Swiss Academy of Medical Sciences, 2019).

(F) Research methodologies, methods and technologies

Three methodological approaches are most important: (1) to research the implementation of complex interventions/models of care, (2) to support methodologies using large databases and (3) to foster methodologies allowing sustainable user and patient-centred implementation of innovative technologies. Hence, implementation science is imperative to accelerate the translation and implementation of findings into clinical, educational, managerial or policy practice (De Geest et al., 2020). Digital health has to be increasingly addressed by nurse researchers aiming to improve interventions targeted at persons (users, providers),

health management systems, application types and data services (World Health Organization, 2023).

(G) Research in health care policy and higher nursing education

Evaluation programmes are required to analyse the impact of current graduate programmes on population health outcomes, particularly with a focus on quality and safety of care. This will foster future advanced nursing practice regulations on state and national levels.

(H) Public health perspectives, diverse and vulnerable populations in research

Public health perspectives need to be further integrated in research. Likewise, nurse researchers must account for health care disparities including, e.g., inadequate diagnosis and disease management, augmented morbidity and mortality, avoidable suffering and rising health care costs. For nurses working with increasingly diverse populations, avoiding discrimination, and guaranteeing equal access to health care means to consider the needs of specific minorities and vulnerable patient groups.' (Swiss Association for Nursing Science, 2019).

DISCUSSION

The evolution of nursing science in Switzerland since 2000 has been delayed compared to the international nursing community. However, the development and update of the SRAN have allowed to bundle professional forces over the past 15 years resulting in several phases of the SRAN until achieving the current umbrella of four key research priorities and four transversal themes. This framework adds to nursing research agendas in other countries which each are embedded in the nation's healthcare discourses and history. The Swedish Nursing Society, for instance, defined two main areas, one for improved health of the population and another for enhanced nursing care (Swedish Nursing Society, 2016). These areas are integrated with considerations of preconditions, such as funding and organizational structure for nursing research. In Uganda, the core of the research agenda is a ranked list of topics derived from a Delphi study (Spies et al., 2015). The top three topics are women's health, HIV/AIDS and infant mortality. In Canada, the first of seven topics focuses on indigenous people or equity-seeking communities (CASN, 2018). And in the first research agenda on nurse practitioners, the first category is, not surprisingly, on policy regulation, and implications for care, quality and access (Phogosyan et al., 2023).

Interestingly, none of these research agendas deliberately involved patients or family caregivers in the development of the document. This is also a shortcoming of the SRAN. According to current patient and public involvement (PPI) requirements in Switzerland, this perspective should be integrated into a future update in order to capture better individual and population care needs and subsequent health research priorities.

IMPLICATIONS FOR NURSING PRACTICE AND EDUCATION

The four SRAN priorities ensure that research projects are aligned with research questions relevant to individual and population health outcomes. Therefore, the integration of nursing research in public health is one of the utmost imperative aspects of SRAN 2019–2029. Also, considering diversity, addressing vulnerable groups and taking account of health care disparities are key elements to make an impact on the health outcomes of underserved and at-risk populations.

SRAN provides guidance for research competencies for the next decade of bachelor, master and doctoral curricula in Switzerland. In a future adaptation, competencies to participate in interprofessional healthcare research could be added to the syllabus.

Considerations for health policy

The relationship between health policy and nursing science depends on whether stakeholders perceive the nursing discipline as part of the scientific community. In health policy, stakeholders are primarily federal and state health ministers, health policy spokespersons of political parties, committees, political associations, funding bodies, etc. So far, they have been marginally in touch with nursing science. However, the output of nursing research can inform the direction of health policy towards safer and more patient-centred care. Therefore, the current agenda can support health policymakers to mandate nursing science and to integrate its contributions into the healthcare system. This also implies access to funding schemes based on sound research proposals that are aligned with long-term and interprofessional research programmes.

CONCLUSION

The updated SRAN 2019–2029 provides a roadmap for research activities and offers guidance for nurse researchers in all areas. It intends to strengthen coherence within the nursing research community by highlighting current knowledge gaps and providing a foundation for systematic and coordinated nursing research. It contributes to the international nursing science community by adding transversal themes to a set of key research topics. The history of the research agenda may also serve as an example for empowerment in countries, where nursing science has arrived only a few decades ago such as in Switzerland.

SOURCES OF FUNDING STATEMENT

The Swiss Federal Office of Public Health (SFOPH) and the Swiss Nurses' Association (SBK—ASI) were the main sponsors. We would also like to acknowledge the following sponsors: Bern University of Applied Sciences, Department of Health Professions, University of Applied Sciences,

OST—University of Applied Sciences of Eastern, Department of Health, Institute of Nursing Science, University of Basel, University Institute of Higher Education and Research in Healthcare, Faculty of Biology and Medicine, University of Lausanne, Careum School of Health, Part of Kalaidos University of Applied Sciences, Zurich, University of Applied Sciences and Arts Western Switzerland HES-SO, University of Applied Sciences and Arts of Southern Switzerland (SUPSI), Institute of Nursing and Zurich University of Applied Sciences ZHAW.

AUTHORSHIP CONTRIBUTIONS

Study design: DN, NZ and MMS; data collection and data analysis: DN, NZ, MB, MS, RSC, AKO, IB, MSCH, AOB, KF, DZ, ME, LI, RM, KZI, FF, ABJ, KB, AK, MZS, VW, MMS and SK; study supervision: DN, NZ, IB, SK, and MMS; manuscript writing: MST, DN, NZ, VdG, CBB, MS, RSC, CB, IB and RN; critical revisions for important intellectual content: MST, IB, CBB, MB, CB, KF, VdG, AKO, SK, RN, AOB, MSCH, RSC, MS, VW, DZ, DN and NZ.

CONFLICT OF INTEREST STATEMENT

The authors declare no conflict of interest.

ACKNOWLEDGMENTS

We would like to thank Prof. Dr. Maria Müller-Staub who initiated and strongly supported the revision of the SRAN as former president of the Swiss Association for Nursing Science (VFP/ASPI). Based on her engagement, the funding and collaboration with key players allowed this SRAN revision. Under the lead of Nicole Zigan and Dr. Dunja Nicca, former board members of the VFP/ASPI, additional VFP/ASPI members participated in expert groups. These persons are listed below in alphabetical order including their employments at the time of project participation to perform the revision and writing process of the SRAN 2019–2029.

Dr. Alexandra Bernhart-Just († 2018), Bethesda Hospital Basel; Katja Bohner, Hospital Affoltern am Albis; Prof. Dr. Manuela Eicher, University Institute of Higher Education and Research in Healthcare, Lausanne; Dr. Fritz Frauenfelder, Psychiatric University Hospital Zürich; Prof. Dr. Lorenz Imhof, Nursing Science & Care GmbH, Winterthur; Prof. Dr. Andrea Koppitz, Zurich University of Applied Sciences, Winterthur; Prof. Dr. Romy Mahrer Imhof, Nursing Science & Care GmbH, Winterthur; Dr. Karin Zimmermann, Institute of Nursing Science, University of Basel; Prof. Dr. Maya Zumstein-Shaha, Bern University of Applied Sciences, Department of Health Professions.

We also would like to thank Dr. Dalit Jäckel, former managing director of the VFP/ASPI, and Yoshija Walter, former secretary of the VFP/ASPI for their highly appreciated administrative support, as well as VFP/ASPI president Prof. Dr. Sabine Hahn and managing director Dr. Claudia Weiss for their support during the writing and publication process. Further, a thank you goes to the Academic Societies of the VFP/ASPI and all persons who participated in the survey and/or the conference for their important contributions that made the SRAN development possible. We would also like to

thank Dr. Diana Staudacher for her professional editing and proofreading.

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How to cite this article: Stadtmann, M.P., Bischofberger, I., Balice-Bourgeois, C., Bianchi, M., Burr, C., Fierz, K. et al. (2024) Setting new priorities for nursing research: The updated Swiss Nursing Research Agenda—a systematic, participative approach. *International Nursing Review*, e12937. <https://doi.org/10.1111/inr.12937>