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Research interest groups: Creating the foundation for professional nursing education, mentorship, and collaboration

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Abbreviations:

RIG: Research Interest Group TSNRP: TriService Nursing Research Program

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ABSTRACT

Background: Research Interest Groups have been used to enhance collaboration within specialty health care areas.

Purpose: This article was to demonstrate the impact of an organic model created by the TriService Nursing Research Program which became a conduit for collaboration across the three branches of Military Nursing Services to answer relevant research questions and support evidence-based practice.

Methods: Groups were organized around different specialty topics with a focus on education, mentorship, and collaboration. Modest funding, together with the development of an annual plan and report of scholarly activities allowed the groups to capture their impact and to strategically align efforts to support the National Defense Strategy and excellence in Military Nursing.

Findings: From 2018 to 2021, overall publications and funded grants for these groups increased each year despite multiple competing priorities.

Discussion: TriService Nursing Research Program Research Interest Groups demonstrate a successful, and easily replicable model to generate and disseminate research to inform clinical practice and health policy, both in the public and private sectors.

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Introduction

Military Nursing

In an environment where nurse scientists, practitioners, and bedside nurses are located across the globe, the need for a collaborative model to support military nursing research became evident as an important way to reduce costs, increase efficiency, and reduce duplication of research already in progress. The responsibility and benefits of nursing scholarship and advancing the practice of nursing is not limited to the academic setting, rather the entire nursing

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profession at large. The importance of expanding the traditional roles of nursing has been highlighted in The Future of Nursing 2020 to 2030: Charting a Path to Achieve Health Equity (National Academy of Medicine, 2021). The U.S. military health system has long recognized the importance of supporting nursing-specific research, particularly for topics and settings unique to the military (Hatzfeld & Jennings, 2017). Through the development of Research Interest Groups (RIGs), silos among defense agencies were addressed head-on by creating a TriService approach. This approach also allowed for nurses throughout the world to establish an interagency approach to address and answer important clinical questions.

Traditionally, an essential measure of the success of scholarly activity has almost exclusively focused on whether the findings have been published in a highquality, peer-reviewed journal, or presented at various conferences among the specialties of nursing. In the non-academic setting, however, incorporating critical recommendations into policy and practice is viewed as even more valuable, especially by more pragmatic health care leaders as it provides the science and evidence to support policy changes and practice updates. However, active participation by nurses at all levels is just as critical, but rarely viewed as a measure of success. Diversity, equity, and inclusion in scholarly activities are necessary to the success of those efforts, and essential for the professional development of nurses at both the personal and corporate levels. The value of collaboration between nurses of various backgrounds, ethnicities, and cultures, together with the diversity of those with a practice-focused doctoral degree (DNP) and a research-focused doctoral degree (Ph.D.) has also been underscored by the American Nurses Association Nursing Scope and Standards of Practice (2021). Indeed, these partnerships are essential for translating research findings and theoretical frameworks into evidence-based nursing practice.

While measures of success are valuable and essential to track, the more difficult challenge for nursing leaders has been how to support these efforts strategically. One or two well-qualified nursing scholars can ensure data are gathered and analyzed appropriately for individual projects but may have limited impact on the larger organization or the broader nursing profession. Collaboration across organizations can be complex, especially when organizational cultures and priorities differ. The military health system is no different, as it consists of three separate Services, the Army, Navy, and Air Force, each with a distinct culture. Although the Defense Health Agency recently consolidated medical care from all services into a regional construct (Melton & Quick, 2020), military nurses' underlying culture and Servicespecific priorities remain.

One approach to enhance collaboration has been the development of individual interest groups, usually sponsored by a specific professional organization such as the Society of Behavioral Medicine (Hoerger et al., 2019) or the National Association of School Nurses

(Blake et al., 2019). Different interest groups have also been formed as part of an existing research consortium (Perry, 2021), regional nursing organizations (Lopez et al, 2018; Smith-Blair & Davis, 2016), or within medical schools (Som, Lang, Di Capua, Chonde, & Cochran, 2021; Tinterri, Bisoglio, Bossi, & Zaed, 2020). Although essential efforts, access to these interest groups for military nurses that frequently move between facilities worldwide was limited. This has been a frequent challenge military nurses face as they work to create a sustained portfolio of scholarship.

To actively support scholarly activity by military nurses and address these known barriers to broadbased participation in scholarly efforts, the TriService Nursing Research Program (TSNRP) created six specialty-specific Research Interest Groups (RIGs). This allowed for nurse scientists to collaborate with their fellow researchers among the various military nursing branches to maintain an operational approach to sustaining nursing scholarship. With deliberate and strategic support requiring a modest amount of funding, these multi-disciplinary teams have demonstrated the ability to advance nursing practice within the health care system, across multiple organizations, and the global nursing profession.

Background

The relative scarcity of nurse scientists, both inside the military and in the larger civilian world, dictates the need to create and maintain a supportive scientific network for both professional and personal growth. While many nurse scholars may have opportunities and geographic mobility to align themselves with small pockets of others interested in their topic and work in the same institution, it is far more common for others within a nurse scientists' topical area to be physically apart. It is prudent for all nurses, whether at an academic institution filled with nurse scientists, expert clinicians, and accomplished educators or as a lone nurse scholar at a clinical or nontraditional setting, to align themselves with others interested in their area of inquiry for extended support and connections in their field.

Established in 1992, TSNRP focused on supporting individual and site-based research projects through funding, education, and resources. In 2002, TSNRP established regional research "pods" to support collaboration and innovation, fostering scientific synergy and connections across divisions in role and affiliation within five regional areas (Duong, 2010). In 2010, the TSNRP Executive Director re-directed these efforts to formally establish four RIGs addressing different specialty care areas regardless of geographic location, and added a master's-prepared nurse with research and leadership experience as a dedicated coordinator to support the leaders and emerging teams. The RIG

coordinator offered project and meeting support, managed membership lists and documents, and provided much-needed continuity, as military life frequently brought changes in group composition and leadership (M. DeJong, personal communication, July 13, 2022).

Even in the initial stages of RIG development, TSNRP and RIG leadership acknowledged that RIG efforts must surpass compartmentalized innovations and influence future inquiry, practice, and policy at all levels. Visualizing the nurse scientist in the center of a series of concentric spheres of influence, akin to Brofenbrenner's Social-Ecological Model (1977), early efforts explored how diverse RIG teams could influence the individual nurse scientist both engaging inside of a RIG and the surrounding parent organization, nursing, scholarship, policy, and practice (Figure 1). RIG membership was intended to include nurses serving in the military, retired, private-sector nurses, and additional multi-disciplinary clinicians with a common interest. Education levels vary from nursing staff who have just completed required licensure to those with doctoral degrees and postdoctoral fellowships. The range of different skill sets and backgrounds provided an important foundation for collaboration.

Early Foundational Work

One of the first groups to form, even prior to the formal designation of a RIG was the Military Women's Health group in 2008, with leaders purposefully selected by the members to represent all three branches of service. The initial four-member leadership team began their efforts by strategically and systematically reviewing peer-reviewed literature on women's health issues and health care (Wilson, Trego, Rychnovsky, Steele, & Foradori, 2015), which was used to inform nursing care and a research agenda to support Department of Defense-level decisions (Trego, Wilson, & Steele, 2010). This work shaped practice within the military directly, including the care of women in austere environments (Trego, Steele, & Jordan, 2018), and directly informing policy (Trego, 2021). Nursing leaders interested in the

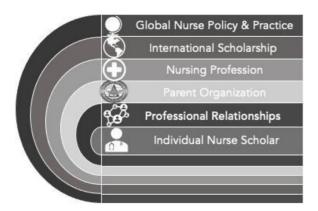


Figure 1 – Spheres of influence of the TSNRP research interest groups.

care and transport of wounded military members in combat also began a collective effort to develop a battlefield pocket guide as a resource for nurses providing en route care (TriService Nursing Research Program, 2009 & 2019), including evidence-based practices and informing both military and civilian critical care (Hatzfeld & Foradori, 2018). A recent paper reported the process of creating and updating this popular clinical resource (Bridges & McNeill, 2020). Later, nurse scientists interested in biobehavioral health approached TSNRP about focusing on novel methodologies relevant to military nursing practice. This new RIG strategically leveraged the social network analysis methodology to better understand military nurse scientists' connections, in an effort to capitalize on the resulting web of colleagues and mentors (Pierce et al., 2021). Anesthesia was the fourth RIG to be established in 2010, with Military Families and Health Systems/Informatics RIGs developing in 2017. The shared vision of TSNRP and the efforts of early leaders laid the foundation for these initial RIGs to grow and thrive, with impacts spanning location and military service branches to inform scientific inquiry, policy, and practice in the military and beyond.

As the scope of the RIGs' external influence grew, so did the inward impact on the individual nurse scholars within the RIGs. As a function of military structure, doctorly-prepared nurse scientists are assigned to lead centers of research inquiry alone, or with only one or two other similar scientists. Because researchers must be dispersed equitably among many military installations, nurse scientists - especially research novices were often faced with the challenge of building their networks of support within their roles and areas of research interest. With the advent of RIGs, individual nurse scientists were able to connect to a robust network of similarly-minded nurse scientists representing all military branches, retirees, and civilian nurse researchers. By engaging with the RIG, member scientists are afforded an invaluable network of mentors, collaborators, and professional resources. In this way, the influence of the RIGs flowed naturally both in and out, building in a powerful motivator to stay involved and engaged for personal growth and scientific impact.

Expansion and Development

As the RIGs grew organically, the need for more structure, goal setting, and planning became evident. In 2017, TSNRP began to require an annual report from each RIG, which provided a platform for each team to identify their RIG leadership team, highlight individual and RIG achievements during the year, and set goals for the coming year. Along with the annual report, TSNRP dedicated a modest annual budget for RIG-sponsored projects and travel to support RIG science development and annual dissemination course attendance. The budget became a motivating factor in

achieving the outcomes identified within the annual plan. Upon completion and TSNRP approval of the plan, the RIG leaders had a clear blueprint of short and long term actions to support the forward momentum of every RIG and its members.

The original intention of documenting RIG productivity was to define the team structure and planned activities for the year, but annual plans also became a strategy to understand the scholarly impact of the RIGs. Initially, RIG leaders submitted annual plans in 2018, reflecting 2017 achievements and creating a plan for their future scholarly deliverables. Over the years, this process of data collection has also evolved. Surveys are now distributed to the entire RIG membership list to identify and capture the scholarly impact of each RIG. The self-reporting method enabled a more accurate capture of the number of scholarly activities, including activities that RIG leaders may not have previously known.

Findings

The formative data from the RIGs were collected in 2018, with the RIGs collectively reporting 24 publications and 56 presentations, while working on 14 different funded grant projects, as reflected in Figure 2. In 2021, the RIGs self-reported 80 publications and 48 presentations, while working on 36 different grant-funded projects. Table 1 provides a summary of total productivity by RIG. Although overall productivity decreased, publications and funded grants increased steadily each year, while presentations decreased, as highlighted in Figure 2.

By 2022, there were a total of 661 members in all six RIGs, reflecting remarkable growth from the initial four doctorly-prepared nurse scholars from each branch of the military who formed an initial version of the Military Women's Health RIG to the scholarly body that exists today (Wilson et al., 2015). The exponential

Table 1 – Individual Research Interest Group Scholarly Activities Self-Reported through Annual Reports

Individual RIG	2018	2019	2020	2021
Military Womens Health	13	13	19	32
Expeditionary	34	40	17	42
BioBehavioral Health	11	39	41	29
Anesthesia	11	20	21	15
Health Science/Informatics	0*	12	43	37
Militry Families	17	30	40	15
Total Overall-	86	154	181	170

^{*} Identifies that no activity was self-identified in the RIG Annual Report, which does not necessarily indicate a lack of activity in this period.

growth in membership from four to more than six hundred nurse scientists in six different research interest groups today demonstrates the broader impact and reach of the TSNRP RIGs.

Discussion

The efforts and initiatives of the RIGs are based on the framing principles of education, mentorship, and collaboration. The three-pronged focus aligns with Brofenbrenner's Social-Ecological Model (Figure 1), supporting the individual scholar, facilitating professional relationships and collaborations. TSNRP's RIG Model provides the framework to inform theory, practice, and policy, both inside the military community and beyond. Initially starting in 2008 with a Military Women's Health RIG, the effort formally expanded in 2010 to include researchers focusing on Anesthesia, Bio Behavioral Health, and Expeditionary RIGs, and then Military Family and Health Systems/Informatics RIGs in 2017.

With established budgets and annual plans, the RIGs were able to strategically plan and conduct team projects. The annual reports also provide a method for capturing

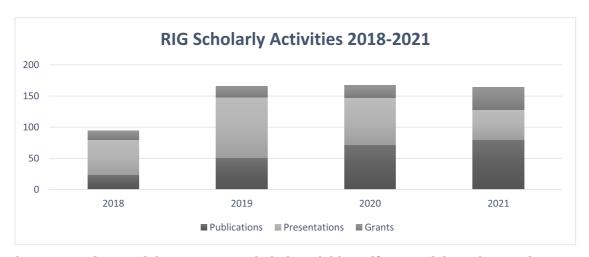


Figure 2 – Total research interest group scholarly activities self-reported through annual reports.

the impact of the RIGs and building an accountability mechanism. The dedicated RIG Coordinator provides needed support to conduct their initiatives and set future goals. This role has been pivotal to the success and growth of deliverables by the RIGs.

Education

For RIGs, the focus on education was vital, and reflected the most inner Sphere of Influence noted in Figure 1. Through presentations at Quarterly Meetings, plenaries at dissemination conferences, or ad hoc briefings requested by government leadership, RIGs have played a vital role in generating and disseminating nursing scholarship. In the military, junior nurses, comparable to the concept of a new graduate in the traditional nursing role, receive educational opportunities to engage in evidence-based practice projects, research studies, and learn the importance of the science that supports the evidence-based practice. The COVID-19 pandemic generated an educational shift in traditional didactic and meeting platforms. It forced TSNRP, like most organizations, to re-think their venues for educational offerings, meetings, and engagement with those they serve, with Zoom ©, Google Meet ©, and Microsoft Teams © now fundamental tools facilitating further growth and development of the program. Fortunately for TSNRP, the RIGs already had embraced this technology out of necessity, because of members' geographic spread, and were well versed in the utilization of such platforms.

Mentorship

TSNRP leaders encouraged the RIGs to place purposeful thought and selection on potential candidates for leadership roles to expand and develop professional relationships (Figure 1). The Military Family RIG mentorship program is an exemplar in this important practice, specifically identifying mentored leaders from each of the three services. Candidates were asked to provide their curriculum vitae, provided an interview, and asked to identify what current initiatives that candidate sees aligning with their own scholarship and interests. An expectation of RIG mentees includes active participation in leadership calls and quarterly meetings, and expected to contribute towards the development of team projects. Among all RIG structures is a mentorship program to support junior nurses, newly or recently graduated nurses, who have interests in a specific RIG and provide the opportunity to be a part of the leadership team, work on a project in collaboration with the nurse scientists on the team, and have the opportunity to gain experience in the dynamics of the RIG's function and leadership compo-

For recent graduates of a doctoral program, TSNRP supports a tailored, 1-year, part-time Post-Doctorate program supporting the development of a body of scholarship for new graduates. The RIGs add an

additional layer of support to this Post-Doctorate program by encouraging mentees who are members of the RIGs to participate, while simultaneously benefitting from the direct support from senior nurse scientists who have established bodies of research. This virtual "post-doc" experience, paired with support from RIG leadership, has been essential for the acclimation of new researchers who recently completed a doctoral degree.

TSNRP continues to be a source for grants to support nursing research that impacts and supports the warfighter. Navigating and managing large-scale grants, such as those offered by TSNRP, can be daunting and require diligence. The RIGs have developed a model to assist novice investigators in growing and developing under the mentorship of experienced nurse scientists, setting up those seeking grant funding for success. Furthermore, the RIGs have created a supportive environment connecting junior nurses with senior nurse scientists for the development of new grant-funded projects.

Senior nursing scientists also embraced the opportunity to mentor more junior scientists by implementing a poster walk at the annual TSNRP Research and Evidence-Based Practice Dissemination Course. The event allows junior nurses to review posters with senior nursing scientists within their clinical specialty or interest, to ask questions and grow their knowledge about what makes a great research poster. This modeling of scholarly behaviors aligns with the American Nurses Association Nursing Scope and Standards of Practice (2021).

Collaboration

The principle of collaboration was an initial focus of the RIGs, which provided an avenue for military nurses at every level to engage with the outer layers of the Spheres of Influence identified in Figure 1. These collaborations established both professional and personal links to national organizations and allowed for networking much more broadly across the profession of nursing. Additional alignments with international organizations, including Sigma Theta Tau and the U.S. Military international health program initiatives, provide military nurses an opportunity to engage with their counterparts (again, at every level) in other countries. These connections lay the foundation for additional impact on global nursing policy and practice, as well as through comprehensive scoping reviews, which provide the ability to consolidate the state of the science and identify critical gaps in nursing knowledge, particularly in military nursing.

As in the private sector, military health has experienced a surge in nurses with a DNP. While scientific research has traditionally been a primary role of nurses with a Ph.D., developing an inclusive, collaborative strategy among doctorly-prepared nurses has been another critical aspect of the RIGs. By defining roles, respecting individual training, and creating a

platform for collaboration, the RIGs have led advances in translational research. This state of collaboration has created opportunities to model successful collaborations between a DNP and a Ph.D. (Cowan, Hartjes, & Munro, 2019). TSNRP RIGs have been able to achieve this collaboration by creating an environment of inclusivity, respect, and understanding the value that each member brings to the RIG.

In addition to providing connection points across multiple layers of global nursing practice, collaboration provides an accessible environment for exchanging thoughts, ideas, and research questions. These collaborations also often provide the opportunity to share resources that can be limited for a single researcher or organization.

Implications

The current framework of the RIGs aligns with the professional growth and scholarship identified by the American Nurses Association (2021). As the health care professionals align with the Future of Nursing: 2020 to 2030 report (National Academy of Medicine, 2021), supporting education, mentorship, and collaboration is vital as the nursing profession continues to see growth, development, new roles, and specialties. Models such as those utilized by the TSNRP RIGs are easily replicated in environments where scholarly inquiry exists, and researchers have a common interest to address key clinical questions.

RIGs, including those described here and those functioning around the globe in universities, professional organizations, and health systems, provide a critical network of colleagues and resources. Through these topical teams, the synergy of group projects that span geographic and systematic barriers are achieved, the meeting of talented minds working in different realities converge to bring about innovations, and novice nurse scientists find both their mentors and their way forward. Although the lessons learned here reflect our experience within the military community, it is evident that such networks can and do have a significant impact on nurse inquiry, policy, and practice beyond the military setting by bringing together minds fueled by shared fires.

Conclusion

The funding and support for TSNRP's RIGs created a pathway for translational research and collaboration among the three military agencies, Air Force, Army, and Navy, with a model easily replicable in other settings, including academia and other health care organizations. The evolution of the six current groups demonstrates the forward progression of the program. The collaboration among members, mentoring, and expanded educational opportunities create a forum to facilitate the advancement of nursing practice. The addition of modest funding, together with an annual plan and report of

scholarly activities allowed these RIGs to capture their impact and to strategically align efforts.

TSNRP RIGs have created a transferable model for other organizations to utilize. This model supports efforts identified in The Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity (National Academy of Medicine, 2021) and the American Nurses Association Nursing Scope and Standards of Practice (2021) through the innovative, collaborative efforts to advance nursing research and practice. The translational research practices of the RIGs create an environment of inclusivity and respect for all. The outcomes demonstrated by the RIGs represent the value of the model created. As the nursing profession continues to evolve, examining and implementing successful practices of nursing research will be essential. TSNRP RIGs have created a model that generates and disseminates a solid body of research to inform clinical practice and health policy.

Author Contributions

Frank Druse III: Conceptualization, Formal Analysis, Data Curation, Project Administration, Writing of Original Draft, Review and Editing Final Draft. Megan Fadori: Conceptualization, Methodology, Validation, Formal Analysis, Project Administration, Writing of Original draft, Review and Editing Final Draft. Jennifer Hatzfeld: Conceptualization, Supervision, Validation, Formal Analysis, Project Administration, Writing of Original Draft, Review and Editing Final Draft.

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Disclaimer

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REFERENCES

- American Nurses Association. (2021). Nursing scope and standards of practice (4th ed.).
- Blake, C., Gordon, S. C., Kimel, L., Minchella, L., Shannon, R. A., & Shepherd, R. (2019). NASN special interest groups: Their growth and development through the years. NASN school nurse (Print), 34(2), 118–123, doi:10.1177/1942602×18823352.
- Bridges, E., & McNeill, M. (2020). Bringing evidence to the point of care: TriService Nursing Research Program battlefield and disaster nursing pocket guide. Military Medicine, 185(Supplement_2), 50–53, doi:10.1093/milmed/usz290.
- Bronfenbrenner, U. (1977). Toward an experimental ecology of human development. *American Psychologist*, 32 (7), 513–531, doi:10.1037/0003-066X.32.7.513.
- Cowan, L., Hartjes, T., & Munro, S. (2019). A model of successful DNP and Ph.D. collaboration. *Journal of the American Association of Nurse Practitioners*, 31(2), 116–123, doi:10.1097/jxx.000000000000105.
- Duong, D. N. (2010). The evidence-based practice concept: Engaging interest and participation. Nursing research, 59 (1), S7–S10, doi:10.1097/NNR.0b013e3181c3be98.
- Hatzfeld, J., & Foradori, M. (2018). The critical link between acute care nursing and military en route care. Critical Care Nurse, 38(2), 13–15, doi:10.4037/ccn2018971.
- Hatzfeld, J. J., & Jennings, B. M. (2017). Twenty-five years of the TriService Nursing Research Program: Standing on the shoulders of giants. Nursing Outlook, 65(5), S1–S3, doi:10.1016/j.outlook.2017.06.013.
- Hoerger, M., Ramos, K., Ellington, L., Perry, L. M., Pollak, K. I., & Porter, L. S. (2019). Organizing psychologists, behavioral scientists, and allied professionals: Formation of the Society of Behavioral Medicine's palliative care special interest group. Journal of Pain and symptom management, 58(4), e10–e11, doi:10.1016/j. jpainsymman.2019.06.002.
- Lopez, K. D., Castner, J., Pruinelli, L., Schoville, R., Piscotty, R. J., Farag, A., Abusalem, S., & Monsen, K. A. (2018). Shared passion at the nexus of nursing informatics, systems, policy, and research: Midwest Nursing Research Society advances the state of the science. Computers, informatics, nursing: CIN, 36(1), 5–7, doi:10.1097/CIN.0000000000000412.

- Melton, J. J., & Quick, J. W. (2020). Leading the Military Health System transformation: From military treatment facility to market construct. Military Medicine, 185 (Supplement 3), 3–11, doi:10.1093/milmed/usaa164.
- National Academy of Medicine. (2021). The future of nursing 2020-2030: Charting a path to achieve health equity. Washington, DC: National Academies of Sciences Engineering and Medicine.
- Perry, M. S. (2021). Better together: The Pediatric Epilepsy Research Consortium epilepsy surgery interest group. Seminars in pediatric neurology, 39, 100911. https://doi.org/10.1016/j.spen.2021.100911.
- Pierce, P., Kabo, F., Killian, J., Huffman, S., Migliore, L., & Braun, L. (2021). Social network analysis: Exploring connections to advance military nursing science. Nursing Outlook, 69(3), 311–321, doi:10.1016/j.outlook.2020.12.013.
- Smith-Blair, N., & Davis, S. P. (2016). Research interest groups are augmenting the mission of SNRS: Message from the president. Research in nursing & health, 39(5), 314–316, doi:10.1002/nur.21747.
- Som, A., Lang, M., Di Capua, J., Chonde, D. B., & Cochran, R. L. (2021). Resident-led medical student radiology research interest group: An engine for recruitment, research, and mentoring-radiology in training. Radiology, 300(1), E290–E292, doi:10.1148/ radiol.2021204518.
- Tinterri, B., Bisoglio, A., Bossi, B., & Zaed, I. (2020). Letter to the editor: A guideline to start a neurosurgery interest group for medical students. World neurosurgery, 141, 573–575, doi:10.1016/j.wneu.2020.06.197.
- Trego, L., Wilson, C., & Steele, N. (2010). A call to action for evidence-based military women's health care: Developing a women's health research agenda that addresses sex and gender in health and illness. Biological research for nursing, 12(2), 171–177, doi:10.1177/1099800410375299.
- Trego, L. L. (2021). Promoting military women's health policy development through the lens of the social-ecological model for military women's health. Women's Health Issues, 31(Suppl 1), S2–S10, doi:10.1016/j. whi.2020.09.005.
- Trego, L. L., Steele, N. M., & Jordan, P. (2018). Using the RE-AIM model of health promotion to implement a military women's health promotion program for austere settings. Military Medicine, 183(Suppl 1), 538–546, doi:10.1093/milmed/usx230.
- TriService Nursing Research Program (2009). Battlefield and Disaster Nursing Pocket Guide. Edited by Bridges, E. J. Sudbury, MA. Jones & Bartlett.
- TriService Nursing Research Program (2019). Battlefield and Disaster Nursing Pocket Guide, (2nd ed.). Edited by Bridges, E. J. & McNeill, M.Burlington, MA. Jones & Bartlett.
- Wilson, C., Trego, L., Rychnovsky, J., Steele, N., & Foradori, M. (2015). Creating and sustaining a military women's Health Research Interest Group. U.S. Army Medical Department Journal, 86–90 PMID: 26101911.