

“Let’s Get Rid of All Nursing Theory”

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In several recent discussions, a variety of persons expressed the belief that nursing conceptual models, also known as nursing conceptual frameworks, are by now well-known primarily because of undergraduate nursing courses. These persons question the need for nursing theory courses at the graduate level. Someone summed up this position by stating, “Let’s get rid of all nursing theory.” As brash and uninformed as such a position appears, this and similar views have been voiced increasingly over the past few years. The thinking seems to represent a reactionary view of the uninformed who do not detect the several fallacies underlying such a view. Unless such thinking is challenged by those who know better, a dangerous outcome may be the retardation of the development of nursing’s theoretic base.

There are several fallacious beliefs upon which such a view is based. Three of them are: that undergraduate level education in nursing theory is sufficient for the discipline; that nursing conceptual models are the only nursing theory; and that by discarding nursing conceptual models, nursing would be freed from a heinous yoke.

The first fallacy assumes that nursing’s theoretic knowledge is taught in all undergraduate programs; it is not. If it is taught at all, it is most often relegated to one course. This fallacy is centered in a belief that if one understands at some minimal level the nature of nursing theory, this is sufficient theoretic knowledge. In the past, this view led to the non-critical acceptance of the perspectives, theories, and methods of other disciplines, rather than the development of nursing’s own. Further, this view fostered a certain naiveté resulting in acceptance of logical positivism by nursing as a philosophic position of choice. Two consequences of this latter choice have been: overlooking the cultural needs of clients and acceptance of an ethic and values which historically have been contrary to nursing’s. Moreover, a central struggle within nursing has not been with

“over-education of nurses”; rather, it has been the need to develop its own knowledge base. Such a base includes well-developed and analyzed theory as well as meta-theoretical knowledge. Without this base, nursing would be dependent upon apprentice-like rote learning and would not be of equal stature with other disciplines, thus unable to carry out its societal mandate. Education as to the nature of scientific knowledge, and ways to develop same, continues to be needed beyond undergraduate levels. One might even argue that this knowledge is needed more today, as advanced practice nursing takes its place in major health care reform for the 21st century and beyond.

A second fallacy is that nursing models constitute all of nursing theory. While it is true that they can be categorized in a broad sense as a type of theory and that the models constitute the major systematically analyzed and examined knowledge in nursing, there are other levels of theory within nursing. Ellis (Algase & Whall, 1993) argued that middle range and practice theory, whether derived from a nursing model or developed and tested in research and practice (if situated within the historic perspective of nursing), should be seen as nursing theory. Epistemology, or that portion thereof which deals with the structure of knowledge, describes theoretic knowledge in terms of levels of abstraction. Nursing models compose much of nursing’s knowledge at the most abstract level and, therefore, are an important element in nursing’s knowledge base. The view presented above manifests a lack of advanced knowledge of theoretic issues. This type of knowledge is imparted as an essential portion of graduate level theoretic education within nursing, as well as other disciplines.

The third fallacy, that by discarding nursing conceptual models nursing would somehow be freed from a terrible restriction, totally overlooks the advances that have taken place essentially because of these models. In a sense, the nursing conceptual models, or frameworks, forced nursing to become sophisticated in theoretic understanding, that is, in theory analysis, theory development processes, and philosophy of science. Moreover, analysis across models has allowed nursing to explicate its historic and current perspective and to

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Nursing Science Quarterly
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examine truth criteria used to evaluate such knowledge. Thus, in and of themselves, the nursing models, perhaps more than any other element, have propelled nursing toward becoming a fully developed discipline. Such development has led to the recognition of nursing as a major discipline in academic and health care arenas.

Someone once said that those who do not understand the past are bound to repeat its mistakes. The "let's get rid of all nursing theory" position would lead to a repetition within nursing of several great mistakes of the past. These mistakes led to much confusion and wasted time and effort. Further, mistakes such as eschewing all theoretic knowledge almost led nursing to a trade-like status, not to that of a scientific discipline. Those who understand where nursing has come

from, how far nursing has advanced, and what is needed now must address such fallacies. If born out of ignorance, information should suffice; if born out of other concerns, these must be openly addressed. The important point not to be missed is that as nursing advances in all areas, its theoretic knowledge must also continue to advance. One way this is best done is via graduate level courses in nursing theory, courses that will enable the next generation of nursing leaders to continue the evolution of nursing as a major discipline.

Reference

- Algase, D., & Whall, A. (1993). Rosemary Ellis' views on the substantive structure of nursing. *IMAGE: Journal of Nursing Scholarship*, 25(1), 69-72.

The Correct Sequence of Epithets — According to Bartholomew (1948, p. 80) the following order should be used in placing epithets after one's name. Abbreviations for licensure in an area are the first to follow immediately after the name. A semicolon follows to separate these abbreviations from those of the educational degrees. Educational degrees appear in order of their issue. Abbreviations for professional societies are always the last of the epithets and are separated from the educational degrees with a semicolon. Example: Helen Doe, RN; BSN, MSN, PhD; FAAN.

Bartholomew, C. A. (1948). *Epithetology*. Red Bank, NJ: Commercial Press.



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