Nursing Knowledge and Theory Innovation: Advancing the Science of Practice

By Pamela G. Reed & Nelma B. Crawford Shearer.

Occasionally, a textbook is written that answers important questions that a discipline has been struggling with for years; this is such a text. From approximately the sixth decade of the 20th century onward (and coinciding with the advent of large numbers of masters programmes within nursing), questions were posed by healthcare agencies and other disciplines, as to the need for graduate-level education within nursing.

Within the discipline of nursing, however, the thrust for a distinct body of knowledge to support this advanced education continued via development of the grand theories (e.g. Rogers, Roy, Orem). But these grand theories were at least initially, or at times, not well accepted (Whall, 1993). While Kuhn’s (1962) early work provided a bit of insight into why/how healthcare professions differed in focus, beliefs, and practices (via differing philosophy of science views), such debates did not really add much clarity and were not generally understood by nurses. Aspects of this quandary remained until Reed’s ground-breaking publication Knowledge Development within Nursing: beyond Postmodernism (Reed, 1995). Her analyses provided an ‘Aha’ for many within nursing, and decreased confusion regarding the need for an advanced body of knowledge for nursing. In particular, Reed provided insight into a philosophy of science known as neomodernism, which provided an explanation to us as to how Carper’s Four Ways of Knowing in Nursing, Benner’s From Novice to Expert, and even the grand theories of nursing were part of an understandable neomodernistic whole (Carper, 1978; Benner, 1984).

This textbook extends and ties together many remaining and related issues, and should be required reading for all levels of nursing education (even though the level of understanding would vary between educational levels). This text provides an important opportunity for nursing students to understand the ‘why’ of nursing practice as conjoined/based upon our theoretic knowledge. . . . ‘lest we forget’ (Whall, 2005).

Kim’s clear discussion in the foreword points out that nursing knowledge has been greatly influenced by the objectification of its subject matter (perhaps via unexamined ‘borrowing’ of theoretic and practices from other healthcare disciplines). There now appears to be a somewhat generally shared agreement within nursing of Kim’s view that DNP programmes today present a new opportunity to address this bifurcation of theory and practice.

To this end (in primarily the preface, chapter 1), Reed describes her newest thinking/approach that addresses integration of practice and theoretical knowledge within nursing. She describes the six elements in her (integrational/translational) Spiral Model, i.e. philosophy of nursing, related philosophy of science, the practice of science, the practice of nursing, and theoretical thinking and theory within nursing. She further describes how a new philosophic perspective termed intermodernism is used in reference to each of these six Spiral elements (intermodernism is understood by this reviewer as a revision of some aspects of neomodernism).

The Spiral Path is really Reed’s raison d’etre, as presented in a wonderful, if lengthy (almost 40 pages), chapter 1 and preface. Reed’s discussion presents a new means of viewing theoretical components that can, do, and should be recognized as essential in/to practice. The Path is an emergent process influenced by many elements including political aspects both
within and external to nursing. Each of the Spiral elements is clearly defined and their usage described. I found Reed’s descriptions of meta-theory, philosophy of nursing (especially philosophic inquiry), ontology, epistemology, and philosophy of science, all integrative, very clear, and an absolutely wonderful series of explanations. If these definitions alone are (and hopefully will be) generally taught regarding the nexus among theory/research/practice, much of the cacophony regarding same might be abated. All nursing students (with adjustments for levels of education) should be exposed to these important understandings and explanations.

Chapter 2 is another strong chapter (Velasquez, McArthur and Johnson) that nicely ties together the essential differences between the DNP and PhD programmes and addresses underlying elements (e.g. evidence-based practice) and their interrelationship to these educational degrees. I especially appreciated the clear discussion as to the ‘why’ of practice-based and practice-generated knowledge. An underlying question as to why in the past that nursing as a practice discipline did not consider its philosophy of science position as essential to understanding its theory and practice is left for the ages to explain. This chapter, if fully understood, will hopefully help avert such future conundrums.

Chapter 3 by Crawford Shearer further explicates and extends discussions to what this reviewer terms ‘instant globalization’. But chapter 4 by Rolfe really helps the reader see the international thrust within nursing, as related to many influences in literature from the western world. Chapter 4 is a wonderfully engaging journey across international boundaries.

Although it would be possible to continue comment upon each of the excellent chapters, I suggest that chapters 7 and 10–12 are absolutely essential reading. Chapter 7 extends Reed’s discussion as to the practices/policies that will recognize and make possible a practitioner theorist. In a journey through several philosophic positions that have affected nursing practices/theories, I found the theory development strategies of ‘Guerrilla theorizing, improvisation, and nets of nursing knowledge’ as wonderful methods to unite and develop practice theorizing. In chapter 10, Reed takes on philosophical and practical considerations of this approach and in chapter 11 she addresses the reformulation of existing nursing knowledge via these views.

In summary, I suggest using this seminal text in virtually all nursing theory courses across the spectrum of nursing programmes. In this way, we hopefully will address the journey that should have been undertaken several decades ago, i.e. development of our full range of nursing knowledge arising from and integrated with nursing practice. Perhaps, in this way will we realize what Drummond termed the Uber-nurse (Drummond, 2000).

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References