
From the editor

"The importance of the problem for the development of nursing knowledge is justified." This statement was one of the criteria set forth for evaluation of a paper to be submitted by graduate students enrolled in my research methodology course this past fall. An additional requirement was to justify the problem in relation to researchability and clinical importance, and we had addressed in class what constituted adequate justification of a research problem along these three dimensions. The classic articles by Carper¹ and Donaldson and Crowley² provided the basis for identifying what can be conceptualized as "nursing knowledge."

With my 12 years of experience teaching graduate-level research, this made perfect sense, and I felt confident in the approach. After reading the papers submitted, however, I began to appreciate the significance of the assignment. I had never before asked a group of students to address the importance of their proposed problems in relation to nursing knowledge explicitly, and I had never attempted such a fundamental task in such explicit fashion. It had been relatively easy for the students to identify the clinical need for the proposed research, and their attempts to justify the significance of the problems in relation to nursing knowledge retained strong clinical implications.

A typical rationale was that the evidence gained from investigation of the problem would help develop more effective nursing interventions. Admittedly, this is a sound motive for pursuing a particular line of investigation but hardly an adequate justification in relation to a search for fundamental nursing knowledge. I asked myself and the students: What do we need to *know* about *x*, *y*, or *z* in order to move to the practical dimension of "effective" intervention?

Feeling somewhat frustrated in my attempts to convey what would constitute a justifica-

tion in relation to the development of nursing knowledge, I left to attend the Nursing Theory Think Tank in Cleveland. Here, I was sure, would be an opportunity to sort out my own hazy thinking and achieve some insight and clarity on the issue among a group of theoreticians. This did happen, but not exactly as I had anticipated. We debated theoretical issues surrounding concepts such as paradigms and metaparadigms, the family as a unit of analysis, and empirical manifestations and measurement of developmental phenomena.

Such issues could be approached from a variety of positions, and the critical question was consistent: What difference does it make which course is taken in relation to the development of nursing knowledge? It became increasingly clear that although there are no "rules" to guide our choices, these choices *do* make a difference. How concepts are conceptualized, which concepts have central value, and how the search for understanding proceeds will drastically affect the nature of the knowledge developed. Simply asking the question seemed to be fundamentally critical.

What is the significance of conceptualizing "patterns of health behavior"? What do these concepts mean? What is the nature of the underlying principles and laws that govern their emergence in empirical reality? Which investigative methods or approaches will adequately generate the knowledge sought? To what extent is there consensus in the discipline in exploring the options relative to each of these questions?

The discussions around the Nursing Theory Think Tank table demonstrated a degree of diversity in addressing these questions that stimulates inquiry, but there is also, paradoxically, a degree of consensus. As the content of this issue demonstrates, we are embarked in a search for "patterns of health behavior." Nursing, as a discipline, is seeking knowledge that is characterized by process, interaction,

and a dynamic exchange between human experience and the environment in time and space. We know, at some level, that these phenomena exist. We are, collectively, developing a discipline based on nursing perspective, and it can be described. All of the possibilities are not yet known, but the problems are being articulated!

REFERENCES

1. Carper BA: Fundamental patterns of knowing in nursing. *Adv Nurs Sci* 1978;1(1):13-23.
2. Donaldson SK, Crowley DM: The discipline of nursing. *Nurs Outlook* 1978;26(2):113-120.

—Peggy L. Chinn, PhD, FAAN
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