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[Vulnerability and Empowerment: Part II: Letters to the Editor]

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Letters to the Editor

Morse, Janice PhD(Nurs), PhD(Anthro), DNurs(Hon), FAAN

▼ Author Information

Director, International Institute for Qualitative Methodology; Professor, Faculty of Nursing; University of Alberta; Edmonton, Alberta, Canada

To the editor:

I am concerned about the minor impact that qualitative inquiry has on the development of nursing science. I feel it is connected to the pseudo-independence of related qualitative studies. Let's look at this problem:

Qualitative researchers, working inductively with effort, insight, and creativity, often produce very nice theories, only to discover that their theories are the same or very, very similar to ones that have already been published. Perhaps this coincidence occurs because researchers have not surveyed the literature before commencing their studies, or alternatively they have been unlucky and have been "scooped" by another research team while their own research was in process.

What happens in these situations? Rather than relabeling their concepts and categories to match the already published theory, researchers publish their own work with their own concept labels. In the discussion section of these articles they explain the commonalities between their theory and the one already published.

This practice results in a plethora of similar concepts with different names; this practice builds a cluttered, confusing, and less-effective literature; and this practice is contrary to the principles of science. In science, once a discovery is "registered" by publishing, theories and concepts are subsequently recognized, and credit is attributed to the original investigators. In quantitative social science this is common practice, but in qualitative inquiry, for whatever reason, the practice is to relabel the theory and to publish it as original findings. I do not want to diminish the importance of replication or get into a discussion about threats to validity that replication raises in qualitative inquiry. Rather my point is that independently generated results do not warrant-or earn-the right to be published as new or different concepts. Constantly erasing established concepts and theories by substituting new concept labels removes rightful credit, denies progress, and muddies the field. We must stop constantly reinventing the wheel.

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In "Hope in the Older Adult with Chronic Illness: A Comparison of Two Research Methods in Theory Building" (ANS 22:2, December 1999) Forbes developed a theory of hoping that replicates a model published by Morse and Doberneck [1](#) and expressed surprise that two research methods resulted in the same findings. While this is nice and confirming for my previous work, it is not surprising or is it adequate reason to replace the already published concept labels. New names do not a new theory make.

Janice Morse

PhD(Nurs), PhD(Anthro), DNurs(Hon), FAAN

Director, International Institute for Qualitative Methodology

Professor, Faculty of Nursing

University of Alberta

Edmonton, Alberta, Canada

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REFERENCE

1. Morse JM, Doberneck B. Delineating the concept of hope. Image. *J Nurs Scholarship*. 1995;27:227-285. [\[Context Link\]](#)

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Section Description

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