
From the Editor

TRANSITIONS: A CORE NURSING CONCEPT

Afaf I. Meleis, who has been an active member of the *Advances in Nursing Science (ANS)* Advisory Board for many years, is the originator of theoretical work that focuses on the concept of transitions.¹ In one of our many discussions over the years, she made a very simple statement that has remained in my consciousness as a fundamental insight: everything is transitions! Indeed, I believe that the concept of transitions, along with the central concept of caring, forms a core around which the practice of nursing is constructed. These 2 concepts have not been formally linked in theory, but they are implicit in a number of theoretical models in nursing. For example, Benner and Wrubel,² in their foundational work on caring, write about the fact that when someone is stressed, his or her temporal focus is reduced to the immediacy of the moment—the here and now. The nurse, as a caregiver, ushers the person from the immediate moment to the next moment—the nurse steps in to provide the image of what can be in the next moment (taking a few steps down the hall), assisting the person to move into that reality of the next moment.

The thing about transitions, even in the absence of the stress of illness, is that many “transition processes” are very difficult to perceive because we are in the midst of the shift. Two examples illustrate this dilemma. When one is riding in an airplane at very high speeds, unless you have a visual point of reference outside of the plane (clouds or approaching runway) or hit an atmospheric condition that creates turbulence, it seems as if you are not moving at all and certainly not at the very high speed of several hundred miles an hour. This is a matter of physical sensation, or proprioception, that tricks our perceptive capacity so that we can settle in to enjoying the ride (more or less!).

Another example involves a broader environment-time-space perception—the experience of parenting. As a very indulgent

grandmother, I can perceive the transitions that my granddaughters are experiencing in ways I never could perceive when I was the mother of my son. Parenting tends to be a very “present” experience: the challenges that your child presents today is pretty much all-consuming—it is what is. Even when I “knew” that a certain phase of development would pass with time and a different challenge would emerge, the all-consuming process of dealing with the present challenges of my child today took front and center stage, almost obliterating any other perception. As a grandmother, not only do I have a greater appreciation for the reality of my grandchildren today but, at the same time, I also hold close the fond memories of their earlier months and years and anticipate with gladness the older children that they are about to become.

Indeed, transitions are integral to human experience. But when life brings unexpected changes such as illness, or welcome changes with unexpected consequences such as parenting, nurses can and do play a major role in shaping the next moments in ways that lead to health and well-being. The authors of the articles in this issue of *ANS* have provided examples of nursing scholarship that contribute to a broader and deeper understanding of this phenomenon. I hope you will be inspired to further the discussion around the issues raised! If so, go to our *ANS* blog at <http://ansjournalblog.com/> and share your thoughts. We welcome your participation!

—**Peggy L. Chinn, PhD, RN, FAAN**
Editor

REFERENCES

1. Meleis AI, Sawyer L, Im E, Schumacher K, Messias D. Experiencing transitions: an emerging middle range theory. *Adv Nurs Sci*. 2000;23(1):12-28.
2. Benner PA, Wrubel J. *The Primacy of Caring: Stress and Coping in Health and Illness*. Menlo Park, CA: Addison-Wesley; 1989.

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