



Editorial

Transforming Your Conference Presentation Into a Publishable Article

With the fifth International Family Nursing Conference mere weeks away, this editorial is written with a particular group in mind.

I hope to have many of the presentations at the conference submitted for publication in the *Journal of Family Nursing*. As this journal moves through its sixth year of publication, it has no backlog of manuscripts, which means that from the time of submission, a manuscript needing minor revisions can be published within a year. Although the acceptance rate averages about 30%, disappointingly few manuscripts whose authors were encouraged to consider a major revision have been revised and resubmitted for review. Amid increasing international recognition and a growing number of institutional subscriptions, the readership of the *Journal of Family Nursing* represents a key target audience for disseminating research, practice, theory, education, and policy related to the nursing of families; the mission of this journal is to advance understanding about families in health and illness and to improve health care to families based on that understanding.

So, you've prepared a paper for a 15- or 20-minute conference presentation. How do you transform the oral presentation into an article for publication? Public speaking causes butterflies in even the most experienced, but offering one's ideas in a publication can be even more terrifying for some. There is something daunting about giving up your words, which are then subject to others' interpretations, misunderstandings, and applications. Not being there to defend, explain, or clarify is a little like sending your child off to school for the first time. Here are a few guidelines that may be useful as you develop the manuscript.

In the launch issue of a newsletter called *Nurse Author & Editor*, Suzanne Hall Johnson (1991) wrote a compelling article about the importance of developing a unique slant for your manuscript. She advised authors to be clear about the main point of the manuscript, reflect it in the title, state it succinctly in the introduction, and develop it through the use of headings, ensuring that all the parts relate to the slant and build throughout the manuscript. Although it might be easier to achieve congruence between purpose, question, design, results, and discussion in a quantitative research report, manuscripts about practice innovations, educational strategies, theoretical developments, or policy issues in family nursing would benefit from evincing the same link. (Research reports compose the majority of articles submitted to the *Journal of Family Nursing*; however, I strongly welcome manuscripts in these other areas. "Strongly welcome" is perhaps too benign a term. Substitute "desperately want," "am anxiously looking for," or "am dying to publish"!).

Choosing a unique slant for the qualitative research report means selecting and deciding how to tell the story (Sandelowski, 1998). Choosing a unique slant for a clinical or educational manuscript means familiarity with the existing literature and with a potentially timely topic. A well-written, compelling introduction that declares the slant helps to engage the reader. It also convinces the reader that your manuscript offers "news of difference" (see Bateson, 1979). Perhaps a research report could uniquely focus on a methodology that tried to capture more than one family member's point of view. Perhaps an educational strategy might be written more strongly if it emphasized

the evaluation of learning and how this changed students' knowledge and skill in family nursing. Perhaps a practice manuscript would benefit from a detailed description of the family nursing intervention itself. Johnson (1991) cautions about being too broad. If you find yourself able to place the words *all about* in front of the title, your ideas are probably not focused enough. Consider the audience's questions in your oral presentation as guidelines for the refinement of your written manuscript.

Another challenge authors face is the division of large research projects into units that might include both research reports and theoretical or clinical articles. Arguments for and against piecemeal approaches have been advanced in the literature (Becker, 1999; Fine & Kurdek, 1994).

Perhaps referencing involves the greatest difference between the oral paper and the manuscript. Given the brevity of an oral conference presentation, much of the referencing and contextualizing to others' ideas will be sacrificed to get to the main points of your presentation. In the written manuscript, accurate referencing provides critical evidence of manuscript quality. Lack of attention to detail in referencing is evidence of poor scholarship, however well-intended the author. This problem has not gone unnoticed in the nursing literature. A recent review found that 46% of the referencing done in a select sample of nursing research publications was erroneous (Taylor, 1998).

Brooks-Brunn (1998) has identified three problem areas of referencing as needing careful attention: inadequate referencing of a manuscript, incongruity of literature in the text versus in the reference list, and inaccuracies in the listed citations. As editor the past 5 years, I have encountered all these inadequacies and also have been amazed at the frequency with which authors' names are misspelled (the winning entry is Dr. Catherine Gilliss; most authors have spelled her surname G-i-l-l-i-s). Brooks-Brunn offers useful suggestions for correct referencing of a manuscript, and a brief article by Damrosch and Damrosch (1996) provides practical examples of APA style requirements (American Psychological Association, 1994), which is the format used in this journal.

The transformation of an oral presentation to a manuscript requires diligence and creativity. Inspiration to prime your writer's pump can be found in two favorite books, *Bird by Bird* by Anne Lamott (1994) and *The Right to Write* by Julia Cameron (1998). Cameron offers the provocative idea that "the act of writing. . . calls ideas forward, not ideas that call forward writing" (p. 223).

The nursing profession has a long tradition of honoring the written word over the spoken. As family nurses, we need to consider our moral obligation to write, and write well, about our findings and insights in our understanding and support of families in health and illness.

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