

Editorial

Clinical Scholarship in Family Nursing

In an early editorial within the first volume of the *Journal of Family Nursing*, I repeated a call for rich, specific descriptions about the variety of ways that nurses practice with families (Bell, 1995):

I believe that the *Journal of Family Nursing* needs a stronger emphasis on the specifics of helping and healing families by examining, in detail, those caring interventions that alleviate suffering and promote health. We need to be less tentative and more self-assured about our competence to assist families, and we need to talk more about it, study more about it, and write more about it! (p. 35)

It has been 9 years since that editorial was published, and I am still eagerly making the same plea. Where are the voices from practice who can describe innovative family nursing interventions?

An article by Donna Diers (1995) about clinical scholarship argued that whereas clinical research in nursing is a well-known and accepted form of scholarly activity, clinical scholarship offers an alternate way of extending knowledge about nursing practice. She conceptualized clinical scholarship in a practice profession as an intellectual activity that generates knowledge through the examination, analysis, and synthesis of practice, thereby creating new understanding for practice. This is a very different process than traditional forms of knowledge development in nursing research, which assert that one first needs to understand the phenomenon, describe it, and eventually design and test interventions for it. Clinical scholarship examines the practice itself, offers rich and thick descriptions of the practice, synthesizes practice knowledge, and even changes theory in response to this process. This is complicated, demanding scholarly work because it is discovery oriented and strives to account for a process that involves synthesis of a wide range of observations and reactions of the nurse, the family, and even larger systems.

Articles in this issue by Bohn, Wright, and Moules and by Limacher and Wright provide examples of clinical scholarship influenced by Dr. Lorraine Wright of the University of Calgary. The articles offer two approaches for describing the clinical practice of offering commendations to families that differ and yet complement each other. *Commendations* is a term coined by Wright to describe an intervention that focuses on family strengths. Wright's publications and presentations, which span more than 25 years of advanced practice with families, are a wonderful example of clinical scholarship that has challenged established paradigms, opened new fields of inquiry, and offered new nursing theory and practice (for more information, see <http://www.ucalgary.ca/NU/fnu>).

Clinical scholarship requires an immersion in clinical practice while simultaneously finding ways to articulate, describe, and analyze what is occurring within clinical practice. The distinctions between perceptual, conceptual, and executive skills related to the nursing of families identified by Wright and Leahey (2000) provide a useful framework for describing the fundamental building blocks of clinical scholarship. Perceptual skills focus on what the nurse observes; conceptual skills involve how the

nurse makes sense of what is observed, relying on his or her conceptual grounding and personal experience; and executive skills include what the nurse does, that is, how the nurse responds (usually using talking skills) based how she or he conceptually makes sense of what is happening both within the individual, family, and larger systems as well as between herself and the family system. Wright and I have offered a template for leveling family nursing theory, practice, and research across 4 years of undergraduate nursing education (Bell, 1997), and we have extended this model to include criteria for perceptual, conceptual, and executive skill development in family systems nursing at the master's and doctoral levels.

At the Family Nursing Unit of the Faculty of Nursing at the University of Calgary, we have created an educational model of clinical practice with families using a team of graduate nursing students and faculty supervisors. We have noticed a dramatic change in the novice clinician, who usually begins by focusing solely on the family's illness narrative but over time, shifts to observe, identify, and analyze the interaction between the nurse clinician and the family members with increasing sophistication. In postsession team discussions as well as in written assignments, the graduate nursing students experiment with offering their analysis about the clinical work they have been privileged to observe or practice. Clinical scholarship is refined through many hours of observation and participation in therapeutic conversations between nurse clinicians and families suffering with serious illness, written documentation that requires analysis of the therapeutic conversations between the family and the nurse clinician, development of clinical case studies that analyze family systems nursing practice offered to families, sustained attempts to link conceptual frameworks with practice, and pioneering efforts to describe theoretical ideas that emerge from practice. These are among the variety of learning experiences we have found help students develop and refine their perceptual, conceptual, and executive skills in family systems nursing and actively become involved in the process of clinical scholarship.

Clinical scholarship is not a substitute for clinical research (Diers, 1995), but it is a legitimate and complex intellectual activity that requires better understanding and greater valuing within the nursing profession. As Martin Seligman said in a recent interview commenting on the creativity of the clinician, "Before yeoman scientists can go to work and see if things really work, you need the imagination of clinicians to provide something to test" (Wylie & Simon, 2003, p. 53). Family nursing needs more descriptions of practice offered by practitioners themselves using the disciplined and rewarding process of clinical scholarship.

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