



Editorial

Avoiding Isomorphism: A Call for a Different View

The *Journal of Family Nursing* is a validation of the specialized knowledge and skill we call *the nursing of families*. A sizable group of nurses has begun to identify the family as its primary focus. With a history of three international conferences, numerous regional meetings, and no formal infrastructure, nurses specializing in families have been waiting for a journal of their own. The growing body of family nursing literature has been scattered across a number of periodicals. This new journal offers an unprecedented opportunity for the scholarly work related to the nursing of families to come home under one roof.

Several colleagues must be applauded for their vision. Catherine Gilliss of the Department of Family Health Care Nursing, University of California, San Francisco, submitted a journal prospectus to Sage Publications in 1991 following the Second International Family Nursing Conference in Portland, Oregon. Through intensive lobbying, Gilliss and many colleagues received support from Christine Smedley, an acquisitions editor at Sage. The vision for a journal about family nursing became a reality.

What is unusual about this publication? The focus of *JFN* is to move beyond the reporting of research only and include theory practice, education, and policy issues related to families in health and illness. A major objective of the journal is to establish a forum in which clinicians, educators, researchers, theorists, and policymakers in various clinical specialties and disciplines can extend the lively debate and critical dialogue about family health.

Here are some questions that may invite such dialogue. Even as we acknowledge families across the life span, what conversations are family nurses developmentally ready to participate in and contribute to? Where are the voices from practice who can describe innovative family nursing assessment and intervention? Where are the educators who use a variety of strategies and curricula to teach the importance of families in health care? What conceptual and methodological advances can family nurse researchers offer? Recognizing the multidisciplinary nature of family scholarship, how can we invite the perspectives of other professionals to inform our work with families? Are the distinctions *between family as unit* and *family as context* valid or useful for research and practice? How can we move beyond our ethnocentric views to understand the cultural diversity of families?

The term *isomorphism* has been used to describe the processes that can occur between interacting systems such that the processes in one system influence the other system and both systems begin to function in similar ways (Botelho, Seaburn, & Harp, 1991; Liddle, 1988). Similar patterns of interaction across

generations, between family and clinician, or between teacher and student may occur. For example, isomorphism can be seen in clinical work, where the power of a family's beliefs and behaviors may strongly influence the nurse to adopt the family's viewpoint. The nurse may become constrained by behaving or thinking like the family and, in this locked, repeated pattern of interaction, become incapable of providing new or different perspectives to assist the family in its problem-solving efforts.

Isomorphism describes the suction we fight when it is easiest to simply repeat the pattern of dialogue that maintains *more of the same* in family nursing. More descriptions of family responses to health and illness at the expense of describing and testing interventions are *more of the same*. More descriptive studies of questionable rigor that fail to address the research issues that are unique to the study of families are *more of the same*. More research reports at the risk of undervaluing clinical practice issues, teaching strategies, or discussions of family theory and policy are *more of the same*. More bland and safe discussions at the risk of raising controversial issues for critical debate and scholarly inquiry are *more of the same*.

The hope for the interruption of isomorphic patterns is the introduction of new information. Bateson (1972), the noted anthropologist and theoretician, has offered the idea that we learn through differences: "Information is difference which makes a difference" (p. 453). The mission of this journal is to call for a different view. Within the guidelines for scientific merit and creative treatment of significant issues in the field of family nursing, we can create news of difference.

We can communicate about alternate ways of viewing the family in health and illness, just as we can propose alternate ways to intervene, to research, to educate, and to influence family policy. I eagerly invite you to break the isomorphic pattern and propose a different view.

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Editor

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