

Gary Rolfe

## Faking a difference

I welcome the opportunity to respond to some of the points made by Thompson and Watson, since I believe that they both misunderstand and misrepresent the basic premise of my paper. Since Watson's fundamental charge against me is that I base my arguments on a wrong premise, it is important that I attempt to show that it is he and not me who is confused over my premise. Watson and Thompson both offer essentially the same critique, so I hope that they will forgive me for considering their papers together.

I will begin with what I believe to be their most unfounded and potentially damaging point. Watson claims that I made 'personal and unwarranted attacks on distinguished figures in UK nursing', whilst Thompson adds that I 'criticise Kevin Gournay, Nicky Cullum and me amongst others'. I have looked long and hard at what I wrote, and as far as I am aware, I make no personal attacks (warranted or otherwise) and criticise no one, although I do attack and critique views advocated by a number of 'distinguished figures' (not my terminology!). Thompson, at least, is aware that the only personal reference I make to him is that he holds a position 'of power and influence in the dominant discourse' and that he has 'close links with the DoH'. Thus, whilst Watson points out that these 'distinguished figures in UK nursing' (including Thompson) are 'more than capable of defending themselves' from my 'personal and unwarranted attacks', Thompson is happy to 'plead guilty to both counts', albeit with mitigating circumstances.

I have rather laboured this point because nursing as an academic discourse appears to have a longstanding problem with critique, particularly when that critique (as in this case) is founded in a discipline outside nursing, and (as in this case again) where it questions the views of 'distinguished figures'. Since my original paper was arguing that part of the brief of the dominant discourse in nursing is to maintain discipline (in both senses of the

word) power and control, perhaps I should not be surprised.

Watson continues with what can only be described as a wilful misreading of my paper. Thus:

Rolfe sees the current developments in healthcare as the result of the centralising and 'phobic' attitudes of Right leaning politicians, with the Left representing the decentralising and diversifying force in politics. Try telling that to the average former Eastern Block citizen. . .

What I actually said was that those in power face a conflict between espousing a philosophy of diversity and attempting to manage and control a diverse group of empowered individuals. My point was that whereas 'Right leaning' politicians and managers openly acknowledge this problem, the political Left takes a more underhand approach by outwardly acknowledging libertarian views whilst secretly acting to counter them. And Watson unwittingly provides an ideal example of my point in the Eastern Block citizen, since Stalinism outwardly proclaimed to be socialist and even democratic (witness the former Eastern Bloc 'German Democratic Republic') whilst actually repressing all forms of dissent and individuality. I suspect, then, that if I *did* try telling it to the average former Eastern Block citizen, she would understand my point better than Watson appears to.

Both Thompson and Watson also miss the point in a far broader and more general way. Each sees my paper as an attack on evidence-based practice (EBP) and quantitative research, so perhaps I might restate its basic premise here. My paper was concerned with the way in which the dominant discourse (which in nursing I take to be the Government sponsored discourse of EBP) appears to promote diversity whilst *at the same time* acting to close it down. All this is spelt out quite clearly in the abstract. My point in relation to EBP was not that it is bad or ineffective, but that it *appears* to

encourage and accept a wide range of different forms of evidence as of equal worth, whereas its hidden agenda is to promote a strict hierarchy with the RCT at the top. Again, my point is not that the RCT is bad or ineffective, but that a certain deceit is involved in the way that it is presented within the framework of EBP. I therefore attempted to 'deconstruct' the discourse of EBP by pointing out these inconsistencies in the work of Watson's 'distinguished figures', which often exist side-by-side in the same text.

Watson is therefore clearly missing the point (and the premise) when he accuses me of arguing against 'systematic quantitative research' in particular and science in general. Similarly, Thompson suggests that I am promoting an unhelpful division between qualitative and quantitative research, whereas I am not concerned to promote or denigrate either. What I actually said was that whilst EBP appears to be advocating a diverse approach to research design, this belies 'a barely disguised contempt for methodologies from competing discourses as weaker forms of evidence'.

In my original paper, I cited Kevin Gournay in support of this 'barely disguised contempt', but Watson's response to my paper will do just as well. Thus:

Without in any way denigrating qualitative investigations... precisely what [has] qualitative research contributed to patient care? I am not saying that it has contributed nothing, but the list would not be very long.

And just to doubly reassure us that he is not 'in any way denigrating qualitative investigations', he continues: 'however, methodological mudslinging will get us nowhere'. Quite.

And so, with a weary inevitability, to postmodernism, always considered fair game and a soft target, especially by those who have themselves only read critiques of it. Thompson tells us that 'Obviously, Rolfe is peddling his own views. He appears eager to establish his credentials by demonstrating that he is well read, with liberal references to, for example, postmodernism, Derrida and deconstruction'. First, whose views would he prefer that I

'peddle'? Second, as to my 'liberal references to postmodernism', I use the term only once in the entire paper, when I refer to the 'postmodern architect Charles Jencks'. And third, as to Derrida and deconstruction, I refer liberally to both, not in order to demonstrate that I am well read, but because my entire argument is based on Derrida's methodology of deconstruction. Incidentally, I *am* well-read in Derrida's work, but I fail to see why this might be a problem. Would Thompson prefer that, instead of using the original source material, I do as he did and refer only to two rather dubious secondary and highly biased critiques of deconstruction? And while we are on the subject of these secondary sources, I would suggest that Thompson comes much closer to personal attack than I ever do when he cites E.O. Wilson and Roger Scruton in their rants (I'm afraid that this is the only word that does justice to what they write) against Derridian deconstruction. Thus, whilst Watson calls for arguments 'which do not attack individuals', Derrida seems to be fair game, possibly because he is not one of Watson's 'distinguished figures in nursing'.

However, Scruton's rant against deconstruction does, inadvertently, make a valid point. 'Deconstruction deconstructs itself' he helpfully points out, in the mistaken belief that he is making a devastating critique. Well, of course it does, and if Scruton understood what deconstruction was about, he would see that this strengthens its case rather than negating it. Why, after all, should deconstruction be exempt from its own method of critique? But can we say the same about EBP? Where are the RCTs and systematic reviews that provide the evidence for the effectiveness of EBP? Thompson says that I invoke deconstruction as if there is universal acceptance of it. I might level the same accusation at both Thompson and Watson in their (almost) unconditional acceptance of EBP. As Thompson argues, EBP is not a panacea, but it is the best we have. My question to Thompson would be: on what evidence is that assumption based?

Thompson concludes by advising me to get out more. I wish to conclude with the observation that it is nursing that needs to get out more. It needs to look beyond the same

tired old authorities and the same tired old arguments (and, I might add, the same tired old rants against postmodernism). Part of my attempt at deconstructing EBP involved challenging the interminable binary oppositions such as quantitative : qualitative, Leftist : Rightist politics and evidence : experience. Perhaps Thompson and Watson have these (and other) dichotomies and oppositions so embedded in their psyche that they read into my deconstruction of them a tacit support for one 'side' over the other. And finally, if writers wish to critique deconstruction, then they should *critique* it (unfortunately, that entails rather a lot of reading of primary sources) rather than simply

citing insults from other writers who probably have not read the primary sources either. I think that this is what Watson refers to as in the title of his paper as 'prejudice-based views and the illusion of scholarship'.

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