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Gary Rolfe

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Commentary:

While the concept of practitioner research can be interpreted in many ways, all approaches share a common aim, that of closing the practice-theory gap

Gary Rolfe

One of the difficulties with attempting to understand practitioner research (PR) is that no two writers seem to agree on what it is or, more importantly, what it is for. What we have here, then, are three papers that are ostensibly addressing the same topic, but on closer inspection it can be seen that each has its own agenda and its own notion of what practitioner research is.

As with most research methodologies, PR was developed to meet specific needs, so it is not surprising that the definitions vary, depending on the wider aims of the writers. For McCormack, this is essentially an epistemological aim, that of developing an alternative to the propositional knowledge from traditional scientific research, for 'knowledge that informs and is informed by practice itself'. It is not surprising, then, to find McCormack adopting what is essentially a practice-development or action research definition of PR, claiming it to be a formal and systematic attempt made by practitioners, either alone or in partnership with others, to understand their own work and to 'transform' themselves, their colleagues and their work contexts.

Having defined PR in this way, McCormack then goes on to construct an innovative and exciting approach to developing practice and research through critical inquiry. In particular, his call for nursing to embrace a far wider definition of evidence is very timely, and one of the strengths of his agenda for change is a clear understanding of the political implications and constraints of what is essentially a shift in the power base of nursing. As he points out at the end of his paper, 'the creative spirit demands persistence', and it is gratifying to see his persistence beginning to reap benefits.

At first sight, Bryar appears to advocate similar approach, although driven by different aims. Whereas McCormack offers PR as an alternative to 'traditional' research, Bryar could be seen as attempting to integrate scientific research into practice by increasing the numbers of researchers in practice settings. There are suggestions early in Bryar's paper that the practitioner-researcher is

merely a practitioner who has acquired some research skills. Thus, she informs us: 'Clinical staff who are developing or who have developed research skills may be described as practitioner researchers.' This is clearly at odds with McCormack, who appears less interested in the formal research skills of the practitioner than in their willingness to look critically at their own practice through a variety of reflective and patient-centred techniques and, most importantly, to transform it as a result of this new critical awareness.

However, Bryar continues by examining a range of approaches to PR, before settling on Reed and Proctor's (1995) notion of the 'insider researcher'. The problem, however, is that Reed and Proctor identify two types of insider researcher, those who research the practice of others and those who research themselves. Clearly, these two approaches to PR are separated by far more than a difference in focus, since researching others and researching ourselves require very different methodologies, methods and, indeed, concepts of what research is. Bryar claims to be concerned with both, although it is difficult to see in her paper evidence that her project had developed any of the latter type of practitioner-researchers skilled in the reflective/reflexive transformation of self through critical inquiry. Rather, her practitioner researchers appear to have developed traditional research skills, including critical appraisal, writing and presenting research reports, and knowledge and experience in all stages of the research experience. What the project appears to have produced is not practitioner-researchers in McCormack's sense, but rather a cohort of practitioners who have some experience and knowledge of doing research projects.

Both McCormack and Bryar might be seen as attempting to raise the research capacity in nursing, but whereas McCormack has tried to do so by extending the definition of research to include the everyday practice of nurses Bryar has extended the role of nurses to include the practice of formal research. To be fair, this is exactly what she set out to achieve, and she has clearly been

very successful in meeting her goals. The lack of research capacity in nursing continues to be an enormous and, at times, seemingly intractable problem, and it is a great credit to the project that the majority of the participants remain research-active five years after it was initiated.

The two papers therefore offer contrasting and, to some extent, contradictory views of PR. McCormack's vision is of a community of inquiry in which research and practice development are 'everybody's business', whereas Bryar's project has resulted in local experts whose aim is to develop research skills and awareness within a culture that continues to see research and researchers as something remote and specialised. There are, of course, dangers in taking this latter approach to the development of research among practitioners. For example, one of Bryar's practitioner researchers talks of being the trust representative for 'anything to do with research', another notes how research is seen as an addition to her clinical work rather than an integral part of it. While the project has been successful in developing the careers of a number of individual practitioners, Bryar notes that there remains the need for a more explicit career strategy for clinical research in the NHS. Hopefully, her cohort of practitioner researchers are ideally placed to begin to construct such a strategy.

And so to the final paper, in which Titchen and McGinley describe a living example of McCormack's vision of the practitioner researcher. What appears to be presented here is, in its simplest sense, a model of guided reflection or clinical supervision, complete with a strong reliance on the 'parallel process', in which a 'critical companion' works alongside a practitioner 'in a carefully negotiated partnership'. Little attempt is made to define PR beyond the observation that it is 'the investigation of practice by practitioners themselves', through a range of non-traditional reflective and reflexive research methods. The strength of this loose definition lies in its open and inclusive nature, leaving the door ajar for almost anyone to embrace PR.

While I welcome this message with open arms, I was a little concerned that the style and theoretical content of the paper might be slightly off-putting to potential readers. I was left wondering whether the authors were attempting to play down the radical nature of their message by presenting it within an (in my view, unnecessary) academic framework, and this suspicion was strengthened by continual appeals to traditional concepts of valida-

tion. In a paper that, to a large extent, wishes to replace traditional research evidence with 'evidence provided by patients and their carers and evidence derived through the senses, socialisation, professional and life experiences of practitioners', I was surprised to keep coming across reassurances about the rigour of the study. Rigour is defined in my dictionary as rigidity and inflexibility and, while many qualitative research projects make similar appeals to rigour, Titchen and McGinley would appear to be advocating the very opposite qualities of flexibility, reflexivity and human involvement. Indeed, this recognition of the reflexive and interpersonal nature of PR is one of the great strengths of this paper, which makes some very important points about the generation of knowledge from everyday practice.

All in all, this paper is an intense and heartfelt attempt to recover research as a way of caring, and thus as an integral part of nursing, at a time that practice is increasingly being expected to be based solely on the findings from randomised controlled trials. My feeling is that this message is strong enough to stand on its own terms and that perhaps Titchen and McGinley should be advocating a new non-rigorous approach to research rather than appealing to more traditional constructs such as rigour.

Overriding the differences in the 'whats' and the 'whys' of PR, all three papers are united by the aim of bringing theory and practice closer together through PR. The question that remains, however, is how this is to be achieved. First, we could train practitioners to carry out more or less traditional research in their own practice areas. This bridges the theory-practice gap rather than closes it, since research and practice are still regarded as two distinct activities. Second, we could close the gap by stretching the boundaries of research until they met those of practice, for example, by emphasising more reflective and reflexive research methodologies such as action research. And third, we could stretch the borders of practice until they met those of research by emphasising the intrinsic role of critical inquiry in everyday practice. These papers between them offer some excellent examples of all three.

REFERENCE

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Gary Rolfe

PhD MA BSc RMN

Reader in Practice Development, Portsmouth Institute of Medicine, Health and Social Care, University of Portsmouth