

An Emancipatory Study of Nursing Practice
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Introduction

The health care industry in the United States has undergone massive change. All health care workers are affected by the climate of unpredictability and uncertainty in the face of change. Nurses are particularly affected because of their worker/employee status in health care institutions, and their history of a subordinate relationship within the traditionally patriarchal health care culture. Changes in the health care industry have created the necessity for individual nurses to change -- to change jobs, to prepare for the loss of jobs, to pursue additional education, to become practitioners of alternative therapies, or to take any number of other alternative paths. Nurses are caught in a crevice between despair and hope -- despair engendered by the concrete realities that prevent nurses from practicing nursing, and hope engendered by speculations that nurses will play key roles in health care in the future.

The general purposes of this study are to 1) elicit significant stories that reveal what it is like to practice nursing today, and 2) to awaken an emancipatory response that can shape the future of nursing.

The specific research purposes are to:

1. Explore nurses perceptions of the circumstances of their work life through stories that reveal deep meanings concerning the practice of nursing in today's context; and
2. Describe the processes by which nurses conceive of and create change in these circumstances.

Background and Significance

Feminist critical scholarship in nursing has provided theoretic analysis and interpretation of the oppressive conditions of patriarchal structures, and in so doing identify specific and reachable goals and approaches for righting the wrongs of oppression. Widely cited as an analysis of nursing as an oppressed group, Roberts (1983) presented a model to identify elements in patterns of oppression and behaviors that arise from that oppression. Roberts argued that once nurses recognize dynamics of oppression, liberating actions are possible, including grass-roots leadership, reclaiming nursing's culture and heritage, and engaging in dialogue with other nurses to develop consensus on values and priorities in nursing practice. Feminist critical methods have developed extensively since Roberts' early analysis, primarily to explore the potential for social change among specific disadvantaged client groups (Boutain, 1999; Drevdahl, 1995; Henderson, 1995; Kendall, 1992; Rafael, 1995). The present study, which draws on recent emancipatory methods, reflects the fundamental features of critical scholarship, namely: 1) participants are involved in all phases of the research, 2) experiential knowledge is valued as essential to understand the phenomena of interest; 3) the research focuses on power relations and empowerment; 4)

consciousness raising is central to the participatory research process, and 5) a goal of the research is political and social action to change unequal power distributions in society (Henderson, 1995).

The persistent problems that plague nursing have been explored in the literature throughout the period of the 2nd wave of 20th century feminism. Greenleaf (1980), in her critical social analysis of nursing's sex-segregated occupational status, called for health policy change. Rather than advocating the superficial remedy of more men in nursing, Greenleaf's analysis showed the potential for broad social policy change that values work typically relegated to women. More recently, Rutnam (1991) challenged the adequacy of equity as a principle for developing health policy, and argued that policy needs to be developed from broad feminist criteria that bridge ethical, political and scientific concerns for the benefit of women. The image of the nurse in both the general public and in the women's movement was analyzed by Hughes (1980), Baer (1991), Gordon (1991) and Reverby (1993). These analyses offered broad suggestions for change in health policy and social relationships. They emphasize the need for public and self-education. However, as compelling as these analyses seem, they have not offered substantial guidance for nurses to use in creating change in their work lives.

Several authors reported philosophic and critical social analyses that identified fundamental links in the ideologies of nursing and feminism, despite a persistent shroud of resistance to feminist ideas in nursing. These authors proposed specific ways in which nursing practice and nursing knowledge could be transformed by embracing feminist tenets more fully (Bunting & Campbell, 1990; Chinn, 1989; Chinn & Wheeler, 1985; Keddy, 1993; Mason, Backer, & Georges, 1991; Sohler, 1992; Valentine, 1992). Lovell (1980; 1981) traced the historical relationships between medicine and nursing, concluding that nurses need to question the nature of their ties with physicians, acknowledge exploitation and sexism in these ties, and move to what she called the most political act of seeing through deceptions and becoming free to think and act on behalf of ourselves and clients. Doering (1992) used a feminist post-structuralist analysis to reach similar conclusions concerning the power relations between medicine and nursing.

Allen (1987) using critical social analysis, and Hughes (1980) using historiography, reached similar conclusions concerning the efforts of nurses to achieve professional status. In each analysis, the ideal of professionalism is shown as failing to address and incorporate values and concerns that are central to the practice of nursing. Glazer (1991) analyzed job segmentation within nursing based on class and race and advocated emancipation as an alternative to equity to support working class women and women of color. In an extensive empirical study using interviews of unionized hospital workers, Sexton (1982) also addressed issues of job segmentation, and advocated networking to overcome class divisiveness in nursing.

Relationships between nurses were addressed by Chinn and colleagues (1988; 1987) using a survey of nurses' experiences of friendship developed from Raymond's (1986) philosophy of female friendship. The results of the survey suggested that positive factors of friendship were related to personal and political empowerment. In a critical feminist examination of existing nursing research on mentoring, DeMarco (1993) addressed mentoring relationships among nurses. Her analysis revealed how existing

research fails to incorporate women's experience, and race, class or age diversity. Using a feminist framework of reciprocity, empowerment and solidarity, DeMarco concluded that emancipative interests need to be incorporated into research on mentoring in order to move toward a model of mentoring that is in the interest of nurses and women.

Philosophic discourse and critical analyses of the concept of caring has generated several approaches to empowerment for nurses and nursing. Some authors view the development of moral and ethical theory that incorporates caring as prerequisite to establishing the right and responsibility to determine how care is delivered (Huggins & Scalzi, 1988; Laing, 1993; Liaschenko, 1993; Rafael, 1998; Reverby, 1987; Sherwin, 1989).

Watson (1990) made an explicit connection between her views on caring and feminism in a critical analysis of the moral failure of the patriarchy to value women and caring. Bevis (1993) and Moccia (1993), in critical philosophic analyses of the problems of giving care to the elderly, focused on nurses working proactively to create a different future for elder care. Bevis (1993) identified barriers to care as bureaucracy and profit, and power, gender and economics in caring. She urged nurses to form a shared vision of the future based on transformative empowerment, praxis, and critical thinking. Moccia (1993) examined risks involved in feeling and expressing anger and power; creating new realities in the future will require refusing to take the given as destiny, empowerment and sharing, health and healing as life projects, and embracing the power of friendship. However, despite the insights from the literature, nurses remain entrenched in practice situations where they feel powerless to practice nursing in ways that have been envisioned as the heart of nursing throughout history.

Despite the general directions that this analytic literature provides concerning empowerment and liberation for nurses, few research studies have been reported that specifically examine nurses' processes of change, or the effects of emancipatory contexts on the change process. The proposed study will attempt to create an emancipatory context in order to describe nurses' change processes.

Design and Method

The proposed study uses an emancipatory design, drawing on the methodology of Freire (1970) the critical social theory of Habermas (1973; 1979), and the essential tenets of feminist research outlined by Webb (1993) and Henderson (Henderson, 1995).

Freire's (1970) methodology, based on his theory of oppression, depends on a design that equalizes the power imbalances between researcher and researched, and eliminates dichotomies of theory and action. The overall goal of Freire's methodology is human liberation. Habermas' (1973; 1979) critical social theory, linked philosophically to Freire's work, posits three fundamental human interests, each demanding its own method. Technical interests require empirical methods, practical (communicative) interests require interpretive/philosophic methods, and emancipatory interest requires critical/reflective methods. The essential elements of feminist research outlined by Webb (1993) include reducing power inequalities, reporting women's experience in their own terms, offering a structural analysis of conditions of women's lives, and that include the role and influence of the researcher.

The design of this study is built on the foundational idea of an emancipatory context in which all participants seek to know that which is not yet known in order to transform the conditions of their lives. This context is created using a dialectic process of reflection and action that is embodied in dialogue, an essential element of which is critical reflection. In this context, critical reflection is:

- Discerning an indivisible solidarity between social and political conditions and the circumstances of the individual,
- Perceiving reality as process, potential and transformation, rather than as a static entity.
- Moving constantly from reflection to action, action to reflection without fear of the risks involved.
- Testing untested feasibilities to move toward liberating action (Freire, 1970, p. 81)

The study will be conducted on the World Wide Web, through the website located at www.nursemanifest.com. The web site is sponsored by this researcher and two colleagues, Richard Cowling (Virginia Commonwealth University) and Sue Hagedorn (University of Colorado). The purpose of the web site is to publicize concerns about the current state of nursing and health care, and to propose grass roots actions that nurses can take to re-vitalize and empower their potential for meaningfully changing future directions in nursing and health care.

On a specific page of the web site, visitors to the site will be invited to participate in this research study. The opening page will explain the general purposes of the study. Those nurses who wish to consider participating in the study will click to enter a more detailed explanation of the study, including their rights to withdraw, how to maintain complete anonymity (using a pseudonym from a free e-mail service) and what they are being asked to contribute to the study. Participants will be all nurses who respond to the invitation to participate by sending a story that reveals what it is like to practice nursing today; their submission of a story will constitute their informed consent to participate in the study.

No stories will be published on the web. Instead, the researcher and research assistants will analyze the stories for overall themes, and will create metastories that emerge from the specific individual stories. The metastories will represent the various themes, contexts, and situations that appear as common among several stories told by the participants. Stories will continue to be collected until no new metastories emerge.

The metastories will then be posted on the web, and participants will again be invited to participate in discussion, via a bulletin-board type of discussion or a listserv, exploring what the stories reveal about nursing as it is practiced today, and to consider how the stories might unfold in the future. From the unfolding discussion, the researcher will participate in identifying and exploring those actions that begin to emerge as possible – the process that Freire identified as “testing untested feasibilities.” (Freire, 1973). Participation in this discussion will again constitute consent to participate in the study.

The various “feasibilities” will be summarized and analyzed to describe how nurses move toward emancipatory possibilities. The study will conclude with a summary of emancipatory possibilities posted on the web site.

Data Analysis

The initial e-mail stories will be analyzed to develop metastories that reveal what it is like to practice nursing today. Stories will be analyzed for common themes related to context of practice (i.e. acute care, intensive care, home care, etc.); common story lines (i.e. character motivations and actions, beginnings, middle and ending themes); and common tensions (i.e. fear of being fired, institutional restraints, conflict among co-workers). The metastories will be fictionalized accounts that bring together these common elements.

Once the metastories are posted on the web, open discussion begins; the discussion entries will again be analyzed, using a qualitative data analysis program such as Ethnograph. The researcher will contribute to the discussion revealing to all participants the themes and patterns that are emerging in the discussion, and will invite further discussion to refine and revise the themes as needed.

While the principal investigator will assume primary responsibility for data analysis, all participants will engage in the process of critical reflection and will reach consensus concerning the outcomes of the study. As the discussion of the metastories proceeds to a point of saturation, with no new "untested feasibilities" emerging in the discussion, the principal investigator will post a concluding summary on the web.

Anticipated outcomes

The expected outcomes of the emancipatory process upon which this study is based is the emergence of new perception, the development of new knowledge and awareness, which in turn leads to action to change the circumstances of one's situation. The analysis that will emerge from the data of the study will include an explicit description of the process that leads to action and change. While the results of this study are not intended to be generalizable to all nurses, the insights that will emerge from the study will provide evidence of the integrity of the theories of emancipation that underlie the design of the study. The results of this study can provide a basis for further studies that expand knowledge of processes of change in an emancipatory context.

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