Chapter one: Introduction
Doing Sociology... [T]here is no neat linear sequence of events as the idealised research report format would have us believe (i.e. theoretical background, hypothesis, design of research, instrument, data collection, test of hypothesis, findings, implications for theory). However much the idealised form of research design and presentation might be imposed on other forms of research, dialectical critical social research is not conductive to such manipulation. (Harvey 1990:208)

With the above in mind the following is an account of the lived experience of doing research in the critical paradigm in the context of the discipline of social ecology. It is a story with actors, a plot, and actions over time and requires the subjective voice, the 'I'. 'The telling of the research story requires another voice of researcher, another 'I'. (Connelly and Clandinin 1990:10)

In the first attempt at understanding the nature of this lived experience I felt uncomfortable with what appeared at times a natural and at other times an unnatural association of ideas and actions. I kept wanting to tell it the way it was, to set our experiences in narrative form to authentically record the research praxis. The idea that the data should be able to stand alone and clearly indicate the conceptual nature, outcomes and lived experience of the research was furthermore in my mind.

The discovery of the words of Lee Harvey (1990) quoted above was both inspirational and freeing from the pressure to 'do' the usual type of thesis. The worldview of social ecology has embedded within its epistemology the scope for the creative act of narrative. This thesis is also a critical conversation. As Janice Raymond suggests, 'when I discover, through thinking, that I can converse with my real self, I have to realise that such a conversation is possible with others.' (1986:222)

This story therefore is told in four voices. The character and nature of these voices have evolved and changed as I struggled to find a structure which would reflect my deep love of, and interest in story telling. It also reflects my commitment to presenting research which is demystified and 'available' to multiple audiences. In answer to the problem that academic critical social science may become disconnected from the very groups it seeks to help, Orlando Flas-Border (personal conversation), a Colombian Professor of Sociology jailed for his action research work which sought to gain land rights for Colombian peasants, revealed to me
that he writes his work in two voices. On one page is his writing for the academic world and on the other page he writes for all the people of Colombia. This approach was also important in developing an appropriate method to represent 'data' within critical social science research which avoids the positivist's reliance on the objective presentation of facts. This research does not aim to develop grand theory or generalisable 'data', rather it tells a story which is personal, localised and situated in the subjective voice. The question of rigour is an important one but will be dealt with in the chapter entitled 'Final Reflections'.

The structure of the thesis is also a form of engagement with the 'self' and the 'not self', the audience or reader/s. The voices which tell the story of this research are the aspects of the 'self' which converse with each other. They were uncovered in the process of writing. And, with the assistance of creative insights and guidance from members of the Social Ecology Centre at UWS-H their birth and subsequent development was encouraged and nurtured.
The Structure of the Thesis.
The voice of the theoriser-conceptualiser is the theoriser weaving together the epistemology and ontology of research in social ecology. To some extent it is the scientist self. What is often perceived in positivist terms as the academic. It is written in New York font and set at the left hand margin.

Example:- Voice of the Theoriser-Conceptualiser New York Font

Academic life in the tertiary sector is contextualised in a patriarchal positivist reality. It is hierarchical and competitive to the point of being brutally aggressive.

The conceptual-reflector is the voice of critique, sometimes questioning and at other times putting forward possible answers to epistemological and ontological knowledge understanding and uncovering. It too, is the other side of the scientific self, whose conversation is with its other side the theoriser-conceptualiser. It is recorded in Helvetica font, bolded and set one inch in from the left hand margin.

Example:- Voice of the Conceptual-Reflector Helvetica Font

There are many who would disagree with this statement and see academic life as value and theory free and certainly without a political context especially in the disciplines of science.

The participant-observer is in a way the narrator who has been deeply embedded in the total process of both the research and the writing of the thesis, and is now standing back and in that dual role setting the story in time, connecting the characters, events and outcomes, thoughts and feeling within the lived experience of this research. This voice is the self who converses with all the other selves. It is recorded in Zapf Chancery font and set half way across the page from the left hand margin.
Example: Voice of Participant Observer

Zapf Chancery Font

When the group of self nominated women, clinical tutors, from within the organisation met together to discuss the broad topic of women, nurses and change, what eventuated from the first meeting was a totally un-expected event.

And, the participant is the voice of individual collaborators who tell their own story. This voice is, what might be described in positivistic frames, as the data. It is recorded in Palintino font, bolded, set at the left hand margin and place in inverted commas.

Example: Voice of Participant Palintino Font

‘...you can be really effective in creating some change... I guess it happens informally a lot of the time- it was just for me being able to do it was an acknowledgment of the process of taking to teaching the first time.’

The critical conversation between the voices vary. They converse appropriately, which means that they are not all present in each chapter. The extent of their conversation also varies with the substantive content of the chapter. Within the first two chapters, these being, Worldviews and Paradigms and Towards an Ethic of Inquiry in Critical Social Science the predominate conversation is between the conceptual-theoriser and the conceptualiser-reflector. In the third chapter, Action Research as the Ontology of Social Ecology, these two voices are joined by the participant-observer. In the remaining chapters, Women's Voices in the Academy, Speaking the Unspeakable, Social Ecology as transformation of practice and social relations, Language, Discourse and Ways of Knowing, and Un-learning not to speak: the Process of Empowerment, the participant voice is heard more frequently and all four voices converse more equally. The chapter entitled Final Reflections,
like the Introduction, is the 'real self', in that all four voices come together as one, and for that reason is signified by a different font.

Methodology and Problem.
This research, embedded in critical social science methodology and method, endeavours to understand and transform the problematics concerning the social relations, practice, language and discourse which were uncovered when five novice nurse academics engaged in teaching a problem-orientated curriculum in the practice setting. Several critical social theories, Ecofeminism, Social Ecology and Critical Education Science, are presented and critiqued as a means to establish more fully the epistemology and ontology of social ecology. Therefore a decision was made to site this research within feminist and critical action research. The Kemmis and McTaggart Model (1988) of action research utilising feminist research principles became the framework for the thesis. Three discreet action research cycles were conducted each of which coincided with an academic semester.
In the writing of this thesis the subjective 'I' is introduced in relevant parts of the thesis as the participant-observer or participant and adds to the debate and understanding of the nature of participative, collaborative action research undertaken in the context of gaining an educational qualification. Relevant to this point, two other contexts of the research were uncovered. The lived experience of 'doing' critical action research with colleagues and friends in the context of gaining an educational qualification revealed both the praxic nature of ethical research and the reclaiming of an authoritative women's voice in the academy. The ethical nature of research in critical social science and the degree to which it is argued that critical action research is by its very nature more ethical than any other paradigm concerned much of my thinking. As I struggled with the nature and role of human identity especially as situated in the academy I also struggled to conceptualise both a methodology and a self identity which was embedded in a context of mutual growth. Hence the natural evolution of transitory states of 'becoming' what we wished to become in the academy. I have named this becoming 'Finding a Women's Voice and Being Heard.' Although to some extent 'finding voice' is situated in the personal, 'being heard' involves the 'not I' together with structural features of institutions. And, although on one hand organisations can be defined as only existing in the form of human relations, there is no doubt that we also put into
action strategies which attempted to deal with the structural limitations to our 'becoming'.

As suggested by the above, the problem was complex and multilayered. A point that many scholars of critical social science make about action research is the ease with which it enlarges to the point of creating difficulties in managing the volume of information. It is also well established that the information which is eventually included or excluded, and its interpretation, is associated with the nature of the question/s asked in reference to the methodology in which the question/s are situated. Critical action research is aimed at dealing realistically and responsively with problematic situations in their social and political contexts (I am taking the feminist view that the personal is political). At first the problems were hidden and it took some time for them to be revealed. Curriculum was a main concern. In an effort to understand the nature of this problem-orientated curriculum, we uncovered along with the social and political issues, features of the intention, process and product of the curriculum (Smith and Lovett 1991). These have been included in the thesis as part of the context of finding voice and being heard. They are utilised as 'data' to support our increased understanding which motivated the implementation of strategies aimed at growth and development in academic life. For example, this is represented by our opportunity to use knowledge gained about the process and product of curriculum to influence the design and development of a new curriculum. And, although this is important work in curriculum, it is also simultaneously providing opportunities and developing skills which is rarely experienced by academics at tutor level. Figure 1 demonstrates the relationships between the substantive themes in the research.

Narrative is embedded in time and in western society time is viewed as linear. In an effort to convey the synchronicity of these events, 'Women's Voices in the Academy: Finding Voice and Being Heard' is introduced and discussed as a substantive issue in a chapter of that name. The strategies and outcome which contributed to finding voice are presented within the chapter of substantive relevance except for the chapter concerning empowerment which represents the last meeting of the research.

The Outcome.

Social ecology is concerned with human and 'natural communities' (Bookchin 1982), a problematic concept which will be taken up in
Chapter 2. Inherent within the epistemology is an 'ecological sensibility' (Fay 1987) which considers the interrelatedness between the social as well as organic, in which change in one part of the system is reverberated throughout the biosphere. Social ecology's challenge is to develop relationships with human and nonhuman nature which are non-hierarchical and antidualistic. The aim of social ecology is to transform relations and structures which obstruct freedom and autonomy. Nursing possesses an historical divisiveness characterised by hierarchical and dualistic relationships. This is especially so of the relationship between those who 'do nursing' (clinicians) and those who 'talk nursing' (teachers).

Within this research process we deconstructed the dualistic relationships, practice and knowledge embedded in the hospital and university culture and sought to transform the context of our practice. We established a satisfying and ongoing relationship where working together rather than control over is of primary importance. On the other hand the outcomes of our transformative strategies were tentative and unstable but validating of the dialectic.

The finding of a woman's voice in the academy was a process of empowerment rather than a point of arrival. It is difficult to know if it is a process which can be sustained within the context of being women nurse academics in Australian Higher Education.

If nurses/nursing is to have a sustainable future it is important to move away from value-hierarchical thinking, dualistic relationships, domination and authoritarianism, all dissociative 'goods' which are often characteristic of professionalisation. The creation of an organic community of nursing committed to emancipatory change, appropriate trust, validation of diversity and its dialectic, is fundamental to a sustainable contribution to what is ultimately our prime concern, our relationship with human and nonhuman nature. I would extend the main tenets of social ecology by proposing that, fundamentally our relationship with nonhuman nature will depend on our relationships with each other. And, until we begin the process of deconstructing our dualistic relationships with each other, living within the contradictory tension this process brings, then our relationship with nonhuman nature is doomed to repeat the divisive patterns we form with each other.
Figure 1. The Relationship between the Substantive Issues.

Research as Ethical Praxis

Women's Voices in the Academy

Action Research Cycles
Social Relations Practice
Language, Discourse and Ways of Knowing
Chapter two: Worldviews and paradigms.
'In sum, my first basic assumption is that a definitive critique of positivism has been established and that our challenge is to pursue the possibilities offered by a post positivist/postmodern era.' (Lather 1988:572)

I am concerned with conceptual relationships, how things fit together, how are things similar, dissimilar? What are the epistemological and ontological connections? Can congruence and coherence be established within the methodology that frames the reality of ‘doing’ research in social ecology?

Critical Social Science
There seems to be some confusion between the conceptualisation of critical social science and critical theory. An early decision was made to situate this research in critical social science given the historical roots of social ecology. Brian Fay’s (1987) convincing conceptualisation of critical social science is considered along with those of Ewert (1991) and Carr and Kemmis (1986).

Feminist theory and Social Ecology will be explored in terms of both their relationship to each other, critical social science, and this particular research.

Fay(1987:4) considers:
In the broadest terms, critical social science is an attempt to understand in a rationally responsible manner the oppressive features of a society such that this understanding stimulates its audience to transform their society and thereby liberate themselves.
Critical social science is a social process that combines participation in the process of critique with the political determination to act to overcome contradictions in the rationality of social actions.

Understanding reality in order to transform it.

Fay (1987:4) points out quite clearly that some of the confusion surrounding terminology has arisen out of the way the term critical theory has been used in social inquiry. He indicates that although critical theory can refer to neo-Marxist theory it can also be used to refer to a metatheory of social science. Therefore, on one hand critical theory is a theory of society, and in the other sense it refers to a theory of science. By way of example Fay (1987:4) points to the idea that:
[O]ne can without contradiction subscribe to a critical theory understood as a theory of the nature of social science and at the same time believe that the critical theory of modern society given by Habermas et al is false.

Therefore, as Fay (1987) suggests one may believe the above statement but identify a different explanation for causality and the processes that contextualise the political framework of the contradictions. Given this view of social life it is possible to see that there are many theories of society that could be termed critical.

Further to this Fay (1987:26) qualifies his earlier conceptualisation of critical social science by suggesting, somewhat abstractly, that it seeks ‘to explain social life ... in a way that is scientific, critical, practical and non-idealistic.’ Outlining a scheme of critical social science Fay (1987) puts forward four major theories and ten sub-theories which may be utilised to identify genuine critical theories. The major theories of his scheme include a theory of, false consciousness, crises, education and transformative action. In a
discussion of these two concepts (critical social science and critical theory) he clearly goes on to demonstrate how Marx’s theory of capitalism is a critical theory of society as well as a model of critical social science by its ability to fit into this scheme. He is critical of Habermas’ critical theory as not meeting the criteria for critical social science in that it fails to demonstrate a comprehensive theory of education or transformative action. It is this, according to Fay (1987), which accounts for the sustained criticism concerning the unrealistic non activist stance of Habermas’ theory of late capitalism.

On the other hand, Habermas’ clearly distinguishes between critical theory and critical social science (Carr and Kemmis 1986). When critical theory informs a critical practice then critical social science is born. It could be said that transformative actions arising from a transformed consciousness are fundamental to the definition of a critical social science. Given this though, Patti Lather ‘s (1984) critique of Habermasian critical theory notes its non activist and non realistic ontology.

According to Carr and Kemmis (1986) it was Habermas' response to criticism like Lather’s (1984) that prompted the articulation of his conceptualisation of critical social science. In the same way that Fay (1987) has utilised Marxist theory as a case study in the relationship between critical social science and critical theory so Carr and Kemmis (1986) have done the same with Habermas. They suggest that in Habermasian terms a ‘critical social science’ ..is a science in which...’a social process ... combines collaboration in the process of critique with the political determination to act to overcome contradictions in the rationality and justice of social actions and social institutions’ (Carr and Kemmis 1986:145). It is not enough to critique oppressive social institutions, this critique must develop a theory which informs practice. This critical praxis must also transform the oppressive structures. Therefore a critical social science requires a political theory, a process in which praxis occurs and a mechanism for informed political action.
I have chosen to do as Fay (1987) has, that is, to use the term 'critical theory' or 'critical social theory' when discussing a theory of society (notions of causality and processes) and 'critical social science' when discussing the nature of social science.

Feminism as Critical Theory and Critical Social Science. In one sense Fay (1987:113), by discussing feminism in the context of the Women's Liberation Movement draws out clearly his conceptualisation of the nature of critical social science as practical and directed towards social change. Women's Liberation as a broad based movement has within it many competing critical theories of society.

Although this may be so, Lather 's (1984:54) point is relevant in that 'while feminism is by no means monolithic, the hallmark of the contemporary movement is the increased radicalisation of its dominant ideology.'

It is not intended at this point to discuss the various types of feminist theory, only to state that although they differ in terms of causality and ontological solutions they generally all accept three basic principles. Women are oppressed, the personal is political, and that consciousness raising processes are fundamental to an understanding of their reality and the epistemological underpinning's of that reality (Speedy 1991). Further to the role of consciousness-raising Fay (1987:114) points out that:

This movement is centred on the existence of critical theories which attempt to explain the social existence of women in terms of self consciousness and social crisis; it has insisted on the importance of reflective enlightenment as the driving force behind the changes in self understanding it has sought to foster; and it sees social change as the result of its audience, armed with a new self-understanding, asserting itself by changing the basic structures of social existence.
The above comment clearly indicates that Fay (1987) views feminist theory as meeting his criteria for a critical social science in that it articulates theories of false consciousness, crises, education and transformative change.

On the other hand Campbell and Bunting (1991) warn against viewing feminism as a strand of critical theory as this tends to encourage the historically patriarchal centred discourse of academia.

Many nursing scholars have applied feminist frameworks to nursing, they are well documented and a selection only are cited here (Chinn 1989, Chinn and Wheeler 1985). In a literature review examining nursings' feminist ideology over a twenty eight year period, Karen Miller (1988) identifies eight conceptual themes in a total of two hundred articles. These include; the personal is political, invisibility, marginality, feminist consciousness, diversity of representation, paradoxical goals, theory building and dualistic relationships between those who are involved in service, administration and education. She concludes the study articulating that ‘[I]n our historical, intellectual traditions of wholism and conservatism, nurses have not formally integrated the positive, enhancing aspects of feminist ideology’ (Miller 1988:66).

Nursing has been conceptualised as reflecting women’s place in the world with changes in nursing paralleling changes for women in society generally. With this has been the suggestion that feminist frameworks have much to offer nursing in terms of a paradigm shift both in the area of service and education. But nursing on the other hand, out of fear, lack of understanding or rejection of academic rhetoric has overall failed to extensively identify with this framework. Again this tends to reflect the reaction of women in society generally.

Further to this a major part of this thesis is concerned with the nature of the social relations in nursing. A view is taken that ideological constraints embedded in how the dominant culture within the
Feminist Research as Critical Social Research.
Although the intention of this discussion is to conceptualise feminist research, the aim is to also identify its commonalities with critical action research. Interestingly there remains much debate among feminist scholars about the reality of such an entity as feminist research. Some would argue that research is research but what differentiates research is the type of methodology and methods utilised.

Further to this Campbell and Bunting (1991:8) drawing heavily on Harding’s work clarify the issue by stating that ‘[E]pistemology and methodology and the paradigms from which they spring, not the information gathering techniques (ie, methods), give research investigations the characteristics of feminist research, critical theory, or naturalistic or empirical analytical.’ These nursing scholars also outline the commonalities and differences between feminist and critical theory. They have drawn predominantly on the early German critical theorist but do acknowledge that both Freire and Habermas view dialogue which examines ideological constraints as fundamental to emancipation. The fundamental difference is that feminist research concentrates on the emancipation of women.

As it is feminist research which interested me I made a conscious early decision to invite only women to join this collaborative action research group.
Harding (1987) suggests that what characterises feminist research is that the type of methodology utilised is qualitatively different to the 'traditional' positivist form of inquiry. She identifies 3 major characteristics of feminist research; the centrality of women's experiences, authenticity, in that it is concerned with women and their 'real' problems, and finally its intersubjectivity.

Firstly Harding (1987) suggests that the research must be concerned with women's experience. It is also characterised by the fact that any questions that are generated arise out of women's experiences. These experiences are then viewed as ...'a significant indicator of the 'reality' against which hypothesis are tested' (Harding 1987:7). In other words it is the questions that are asked or not asked that determines the totality of the picture of women's experience of the world.

The questions are therefore contextual, subjective and ontological.

The most obvious way to achieve this is for women to be involved in all aspects of the research, from the design through to the final report. Women become co-researchers.

Therefore, as can be seen from the above, feminist research can be viewed as collaborative, participatory and reflexive in terms of critical action research.

Women's experiences are pluralistic and are related to class, race, age, ethnicity and culture. Women are also an oppressed group in society.

Considering both of these statements it can also be realised that not all women experience oppression in the same way or to the same degree. Therefore each women's individual experience is valid.

Therefore feminist research as critical action research is directed at changing the conditions of individual women's experience particularly the power relationships that maintain her second class
status. The identification or development of strategies which can be implemented to effectively change women's experience of their lives is a fundamental characteristic of feminist research. This is transformative change, where, in the process, the personal becomes political.

In critical action research terms Feminist research is therefore collaborative, participatory, democratic, emancipatory and political.

Secondly Harding (1987:8) suggests that feminist research is research for women. Obviously this concept is closely tied to the previous statements and she asserts:

That is, the goal of this inquiry is to provide for women's explanations of social phenomena that they want and need, rather than providing for welfare departments ... psychiatrists, the medical establishment, or the judicial system answers to questions they have.

Or as one might add, for the educational qualification of one particular person. I am reminded of the research on, but hardly ever for, Aboriginal people.

Therefore it must be relevant to women's perceived real problems. It is research which is authentically related to women's lived experience. This authenticity is coherent, in that the purpose, and analysis, are not separable from the origins of the research problem or question (Harding 1987).

Thirdly the inquirer is both the researcher and subject of the research. This is what Harding (1987) refers to as being in the same critical plane. Women's experience is 'studied up' not 'studied down,' there is an effort made to avoid the objectivist position. This is based on the feminist view...’ that the beliefs and behaviours of the researcher are part of the empirical evidence for ‘....or against... 'the claims advanced in the results of research' (Harding 1987:20). This is further elaborated upon by both Klein (1983) and Westcott (1979) who conceptualise the relationship between subject and object as dialectically intersubjective.
It is also suggested, in process terms, that critical self reflection and critical analysis plays a fundamental role in the research process (Harding 1987). Speedy (1991:200) indicates that the "feminist research process must result in the perception of contradictions... inherent... in which... 'is the potential for empowerment.'

Therefore the questions the inquirer asks, her experience, and her worldview cannot help but influence the formulation of the research problem, chosen methodology, final analysis and recommendations (Harding 1987). This then is a critique of the so called 'traditional' scientific worldview. Feminist research therefore challenges what is accepted as 'science' and offers on the other hand an activist or interventionist scientific worldview.

Therefore from the above perspective it can be seen that feminist research is also critically self reflective, the researcher is both the subject of research and the person researching, it is anti-positivist and reflexive. 'Feminism withdraws consent from the patriarchal construction of reality.' (Dubois 1983:112 In Lather 1984:58 )

My own reflection on experiences in feminist consciousness raising groups of the mid 1970's brings to mind pictures of reflecting on the contradictions, and their epistemological and ontological basis, planning strategies to deal with these contradictions, acting to transform our reality, observing actions aimed at transformation and reflecting on their reality. This was a process of transformative change aimed at empowerment and emancipation. This was in fact an action research cycle that generated theory out of practice and practice out of theory. This was PRAXIS.
Lather (1988:574) concludes a discussion of a cited case study on the life histories of the battered women by saying, 'The purpose was to empower the oppressed to come to understand and change their own oppressive realities.'

What Does Feminism Have to Offer Other Forms of Critical Theory?
Both feminist theory and other forms of critical theory are concerned with social transformation. Therefore it would be expected that emancipatory action research and feminist research, as derived from the above theories respectively, would have several commonalities as suggested in the previous discussion. On the other hand Lather (1984) condemns non-feminist Critical Theory, particularly Marxism for its gender blindness as does Nancy Fraser (1987). Both these feminist scholars are critical of the centrality given to the male experience of history, arguing that fundamental social change is possible 'when we put women at the centre of our transformative aspirations' (Lather 1984:52). Critical theory as proposed by Habermas has also been criticised for a lack of revolutionary thought, activist stance and realistic conceptualisation of those seeking emancipation (Fay 1987, Carr and Kemmis 1986, Lather 1984). The ontological basis of feminist epistemology is noted by Lather (1984). She discusses of the role of theory, locating it within practice, and cites Hatsock (1978:65) who clearly articulates our responsibility is to:

[T]o take seriously the idea that all of us [are] theorists...to articulate for us what we know from our practical activity, to bring out and make conscious the philosophy embedded in our lives... to make coherent the problems and principles experienced in our practical activity.

Further to this Lather (1984:58 ) comments:
The feminist project of claiming one's self and one's social institutions is rooted in giving expression and form to our own experiences. It involves resistance to imposed meanings, a self-interpretation of our individual and collective experience as women, and an assertion of our right to rename ourselves and the world.
Those who have critiqued critical theory from a feminist perspective are also concerned about the focus on one form of reasoning as superior to another. Meisenhelder (1989) although citing Habermas’s critique of positivism as instrumental rationality points out that to some extent Habermas has fallen into the same trap of which he is so critical. It is Habermas’ reliance on instrumental reasoning which ignores or marginalises emotionality that is the crux of the problem. Meisenhelder (1989) suggests this reflects a patriarchal view, with reason being situated in the minds of men. The view that all feelings are inappropriate in the context of reasoning encourages a dualistic relationship between emotion and reason, head/heart and mind/body. Examining the work of feminists in such broad areas as moral and ethical development, feminist theory and epistemology, psychology and science, Meisenhelder (1989:126) concludes that ‘[I]t has been left to feminist theory to explain and rectify these patriarchal errors in social theory.’

Meisenhelder (1989:130) also speaks of a feminist critical theory which has at its base the validation of the totality of women’s experience which is expressed as elemental reasoning. Citing Daly (1984:280) Meisenhelder (1989:130) elaborates on this concept suggesting ‘[W]hile instrumental reasoning and even Habermas’s communicative rationality are dispassionate and heartless, elemental rationality is passionate and reunites head and heart.’ This elemental rationality is transformative and dialectical in that it attempts to bring together instrumental, practical and emotional reasoning.

Both Brian Fay (1987) and Murray Bookchin (1990) are also highly critical of other critical theorists over reliance on instrumental reasoning.

Social ecology as critical theory and critical social science. The nature of critical social science according to Fay (1987:203) postulates some fundamental premises about human existence in that:
...humans are typically unfree, dominated by conditions which they neither understand or control, a situation which results in living unsatisfactory lives. The second is that human life need not be this way. The third is that an increase in knowledge is the way the oppressed can liberate themselves and thereby better their lot.

Like Feminist theory, social ecology is not monolithic but possesses a diversity in thinking which is clearly situated in ecophilosophy. Murray Bookchin and colleagues at the Institute of Social Ecology in Vermont, USA, and Niklas Luhmann have developed the epistemology, and to a greater or lesser extent have articulated the ontology of social ecology (Tokar 1988:132). Social Ecology in Australia has recognised and validated the diversity of thinking situated in this worldview, and has attempted to articulate both an epistemology and ontology.

Social ecology conceived broadly applies scientific ecological principles to humans in terms of our interactions and the way we structure our society. Luchmann (1989) according to Rothenberg (1992:52) sees this as a way of conceptualising how societies are structured rather than a vision for change.

On the other hand Tokar (1988:133) is clear in his statement that Bookchin as early as 1960 argued for a 'radical social transformation and an evocatively naturalistic vision for how such a transformation could come about.' As I will discuss later the Australian school of social ecology has developed a vision for change situated in the ontology of critical theory and the processes of transformative emancipatory change.

Bookchin is an eco-anarchist (Biehl 1991) and according to Albrecht (1990:238-239) 'identifies the origins of Social Ecology in the 'decentralist' thinkers in the Anarchist tradition, the 'solid organicist tradition in Western philosophy' and 'the critical approach of the famous Frankfurt School'. Hierarchy and domination are critiqued and attention is drawn to the historical embeddedness of ecology and concerns of society. Some
discussion around Bookchin’s conceptualisation of social ecology is important as he has been viewed as one of the most eminent thinkers in ecopolitics and ecophilosophy (Nash 1990, Biehl 1991). A review of his major works indicates that Bookchin’s thinking concerning social ecology has evolved and developed over time in the true organicist sense within which this philosophy is embedded. In his first major work 'The Ecology of Freedom', Bookchin (1982) discusses the fundamental concepts of social ecology and the major themes identified by Albrecht (1990) are clearly articulated. Anarchism is discussed in terms of freedom and domination and the relationship this has to hierarchy. Critical social theory concepts such as historicity, contradiction, logical reasoning, scientific practice and an allusion to praxis and transformative change is put forward. He states quite forcefully, '[T]o use the term social ecology without examining the evolution of social structures is to misuse the term' (Bookchin 1982:61).

Further to this he states the examination of the social structures 'makes social ecology one of the most powerful disciplines from which to draw our critique of the present social order' (Bookchin 1982:61).

The organicist framework is noted in the suggestion that the aim of social ecology is 'wholeness' which is viewed as 'completeness' rather than 'oneness' and is conceptualised as pertaining to natural spontaneity as a function of complexity and diversity, self-actualisation, potentiality and mutual interdependence. Wholeness is also conceptualised as historical with its own internal logic. Although discussing historicity, the seeds of self-actualisation and potentiality are also embedded in the following point.

History, in fact, is as important as form or structure. To a large extent, the history of the phenomena is the phenomena. We are, in a real sense, everything that existed before us and, in turn, we can eventually become vastly more than we are' (Bookchin 1982:62).

Social ecology seeks to reveal the way in which these characteristics are patterned in a web of interdependence. And, Bookchin (1982:62) clearly locates organicity within his concept of
ecology with a definition of social ecology by referring to 'a
distinct human and natural community, the social as well as
organic factors that interrelate to provide the basis for an
ecologically rounded and balanced community.' Bookchin here
clearly links the 'natural community' with the organic and
inorganic. Biehl (1991:117) suggests that the 'inorganic, organic,
and social' are different from each other but at the same time
merge into each other. Further to this Biehl (1991:117) interprets
Bookchin (1990) as referring to the organic and inorganic as 'first
nature'. Second nature, she suggests, which arises out of first
nature, is the social or human society.

This concept of 'naturalism' as a variant of the
organic is seen by Merchant (1980:111) as supporting
change which challenges the fixed hierarchical
structure of both the human and natural world.

Further to this Bookchin views the evolutionary
interconnectedness of the social and organic as underpinning the
lack of separation between human and non-human nature. Thus
an 'ecologically rounded and balanced community' (Bookchin
1982:62) is an adaptive community with the shared
developmental characteristics of 'increasing diversity', 'self-
directiveness', 'self-reflectivity', and active 'participation of all
components' The epistemology of social ecology therefore puts
forward a non-hierarchical, antidualistic view of reality in both
the social and natural context.

Having identified the epistemology of this critical
theory, what then of its ontology? Does Bookchin do as
Fay (1987) suggests other critical theorists do, and
ignore human identity as problematic in social
transformation?

It is interesting to note that Bookchin (1982) is critical of leaders
in the social change movement, suggesting that they are often the
actual enemies of spontaneous human endeavour for change. And
that, reality, is often 'truer' than the ideology as expounded by the theorist. Self-consciousness appears to be the key to a free and stable human social system and he challenges the accepted role of hierarchy as a stabilising social factor. In a discussion of institutionalised dominance and submission in the context of hierarchy Bookchin (1982:70-74) alludes only to 'self-perpetuating' bureaucracies and bureaucrats as the root cause of the problem, suggesting it is social ecology's challenge to this situation that defines it as liberatory. As I have, Mary Mellor (1992:109) also questions this limited conceptualisation of social ecology as liberatory, suggesting that in 'condemning all hierarchies, Bookchin leaves us no means of deciding which is worst, or where to begin our struggles against them.'

Bellett (1990) is also critical of social ecology, (along with deep ecology and ecofeminism), for their belief that cooperation is a natural human state. He (Bellett 1990), takes up the views of the philosopher David Hume arguing that humans are egocentric and that although altruistic behaviour towards family and friends is possible, the larger the group the more difficult this is in reality.

Bookchin (1982:59) in a context of discussing scientific discipline asks, 'Can it integrate critique with reconstruction, theory with practice...?' is, in so doing, alluding to Praxis, indicating his belief in a lack of split between epistemology and ontology.

Bookchin's work, although profound, at this point of its development is reminiscent of biological determinism and fails both epistemologically and ontologically to place our social and natural problems in a context which coherently explains their root causes. Bookchin (1982:315) asks the question 'where have humanity and nature been pitted into antagonism or simply detached from each other?' This 'where' question rather than 'why' has obscured any articulation of the
root causes of our disengagement from human and non-human nature. In a circular argument which fails to examine human identity or human nature Bookchin blames hierarchy and domination but fails to substantially identify why this is the case. Biehl (1991) although critiquing ecofeminism, is helpful in elucidating Bookchin’s views on the origins of domination and hierarchy. Given his anarchist position Bookchin refers to the Marxian idea of the historical and gendered organisation of production/reproduction. And, with a reference to preliterate societies he also cites how age differences evolved into gerontocracies, shamans became organised into powerful priesthoods, people with wealth to give away became chiefs and the public realm evolved from the private especially the establishment of the warrior class (Biehl 1991).

It is obvious in the intervening years Bookchin has attempted to ground his epistemology of social ecology in the tension between human society and the natural world and is critical of various explanations that have been developed in ecophilosophy to account for this. In his book ‘The Philosophy of Social Ecology’, Bookchin (1990) puts forward his argument against what he sees to be the emotional and metaphysical explanations and visions for dealing with modern problems concerning the environment. As indicated earlier Bookchin is a rationalist, but rejects what he terms conventional reason, which he views as instrumental, analytical and manipulative in the ‘true’ positivist sense. He attacks the ‘true or false’ dichotomy of conventional reason suggesting instead that statements may be both ‘true and false’. Putting forward a case for dialectical reasoning he draws on the early Greek scholars and the work of Engels, Hegel and Marx to develop Dialectical naturalism as the philosophical basis of social ecology.

‘I believe that dialectical naturalism forms the underpinning of social ecology’s most fundamental message: our basic ecological problems stem from our social problems’ (Bookchin 1990:47).
It would seem that for Bookchin the gendered nature of social relations is not part of his construction of social problems.

According to Biehl (1991:117) dialectical naturalism views both the organic and social as a developmental phenomena which has as its basis states of transition which arise from a contradiction between 'what is' and 'what-should-be'. The term phenomena refers to identity, causality and stratification in the context of both the human and non human. Dialectical naturalism is Bookchin's (1990) answer to the problems of conventional reasoning with its rights and obligations approach to ethics and moral thinking, and some environmentalists temptation to retreat into intuition, mysticism and theism.

Critiquing the principles of identity, efficient causality and stratification he poses a developmental approach to our thinking about the biosphere. Phenomena are seen to be contradictory, existing in a dynamic tension, natural and developmental. Therefore phenomena are in the process of becoming, and the tension producing contradiction is a function of the process of moving from 'what-it-is' to 'what-it-should-be'. In this non-mechanistic approach causation is said to be 'organic'. Utilising the Hegelian concept of causation as 'in-and-for-itself' Bookchin (1990:31,38) argues that Dialectical causality is a 'process of organic self-formation in a graded and increasingly differentiated direction'...towards ...'self-realisation of potentiality.'

There is a certain view of history embedded in Dialectical naturalism, in that, Bookchin (1990:38) suggests that 'dialectical development is cumulative, namely that each level of differentiation rests' on what has gone before and that there is a 'logic' to the development of phenomena.

Therefore, society based on the above thinking would be characterised by community, complementarity, respect, love, reciprocity, cooperation, sharing, sustainability, freedom, fecundity and diversity(Tokar 1988:132,139, Mellor 1992). These characteristics are what Albrecht (1990 :244) refers to as associative 'goods'. He suggests that dissociative qualities such as
selfishness, exploitation, hierarchy and authoritarianism are seen to act against these 'goods'.

Is this an attempt by Albrecht to consider human nature/identity?

The idea of associative qualities is reflected in a document which invites students to study in the discipline of social ecology which:

...reflects a worldview of optimism about the future combined with concern about the developing environmental, community and organisational dilemmas confronting human society... through a process of dialogue and action, we can work together towards a better world ... working with others to improve the situation. (M.Sc. (Social Ecology) Invitations for expressions of interest in enrolment in a research degree 1990)

Bookchin (1982) argues against the dualistic relationships common to our thinking about our relationships both with each other and nature.

Hierarchy, in effect, would be replaced by interdependence, and consociation would imply the existence of an organic core that meets the deeply felt biological needs for care, cooperation, security and love. Freedom would no longer be placed in opposition to nature, individuality to society, choice to necessity, or personality to the needs of social coherence. (Bookchin 1982:318)

And although this thinking hints at just another type of thinly veiled essentialism and functionalist views of humans and society he qualifies these concepts stating: 'External factors, internal arrangements, accidents, even gross irrationalities may distort or foreclose a potentially given development and must be "factored" into it' (Bookchin 1990:39).
For Bookchin (1990) dialectical naturalism as the philosophical basis of social ecology is intrinsically ethical. Ethics is situated within the objective measurement of 'what-should-be' that develops from 'what-is', and is related to a self-realisation which is rational and moral, and situated in the reality of being in the world.

But, his argument concerning ethics is circular. Unfortunately he rejects criticism of the ethical bases of dialectical naturalism by suggesting that the criticism itself is situated in analytical logic. Further to this he adds that the ethics of dialectical naturalism is saved from this because it explores the process of becoming, rather than exploring fixed phenomena. The assumption is that because the process of becoming is a developmental one, which is grounded in and arises from what precedes it, it is therefore logical and rational to assume that the process and outcomes are ethical and moral.

As Fay (1987) comments, the argument is constrained ethically by its excessively rationalist epistemology and failure to come to terms with the concept of human identity. For Bookchin (1982;1990) human identity is located within the process of becoming and that self realisation, by its very nature, is ethical.

Although he does argue that ethics is not something that can be imposed from the outside there is a lack of ethical ontological argument which clearly defines the nature of this process of realising full potential.

This is particularly relevant when one considers that for both Janet Biehl and Murray Bookchin human nature and reason are conceptualised as gender-neutral (Plumwood 1992a). The work of Carol Gilligan (1982) and Nel Noddings (1990) on women's moral development, Belenky, Clinchy, Goldberger and Tarule's (1986) research on women's cognitive development, and Robert's (1983)
work on horizontal violence within oppressed groups point to gender specific development and outcomes.

**Ecofeminism and Social Ecology.**

Why then is feminism and specifically ecofeminism fundamental to a worldview which would apply ecological principles to human interactions and the organisation of human social structures? In other words what can feminism bring to the ecology movement. Ynestra King (1989b:19) answers this by stating, '[F]eminist analysis supplies the theory, program, and process without which the radical potential of social ecology remains blunted.' But, should ecofeminism be considered as just another epistemology alongside other epistemologies of social ecology? Or should it be seen as a platform upon which an ecophilsophy should rest?

Tokar (1988:140) suggests that ecofeminism is able to provide relevant and significant perspectives which would assist social ecologists in achieving their aims. But, Simmons, (1992:3) although suggesting there are many shared views, warns against the move to 'coopt' ecofeminism into social ecology. In a very strong statement she warns, '[T]he attempts to absorb ecofeminism into other ecological theories and to compartmentalise gender issues is an attempt to minimise the possible impact of feminist agitation and preserve the status quo' (Simmons 1992:3).

This is further supported by Mary Mellor (1992:52) who asserts that '[I]n uniting ecology with feminism, however, there is danger that the balance of the partnership may tip towards saving the planet at the expense of the politics of women's liberation.'

On the other hand there is no doubt that there is some convergence of thinking in ecofeminism and social ecology. A major theorist in ecofeminism, Ynestra King, according to Plumwood, (1992b:36) and contrary to Simmons warnings, refers to herself as a social ecologist. King (1989b:19) identifies and validates the contribution social ecology has made to the critique of our relationships with each other and the environment but she
describes social ecology as incomplete. Without a feminist analysis, she comments, social ecology will be unable to achieve its ontological goals of a free and ecological society.

Bookchin (1990) puts forward a rationalist epistemology that is highly critical of some voices in ecofeminism. He, (Bookchin 1990) along with Janet Biehl (1991 in Plumwood 1992b:36, Biehl 1991) condemns what is seen to be the excessive emotionality, spirituality, incoherence and inconsistency of ecofeminism, referring to this as 'mystical ecology.'

But as Plumwood (1992b:36) suggests this appears to be related to a lack of understanding of the diversity of thinking in ecofeminism. So, what are some of these voices in ecofeminism?

Plumwood (1992a:10) commenting on the diversity of thinking in ecofeminism states:

Since the theory of ecofeminism results from the application of feminist perspectives to the problems of ecology, it is as complex and diverse as feminism itself. Ecofeminists have a common vision of society beyond militarism, hierarchy and destruction of nature. But although ecofeminists are broadly in agreement about these goals, they often have different analyses and political strategies in mind for achieving them.

Reading in the area of ecofeminism reveals that poetry, art, literature and music do inspire what Plumwood (1992a:10) refers to as Cultural ecofeminism which 'aims to combine spiritual and political activities, but still see the spiritual ones as central.' Mellor (1992) on the other hand speaks about affinity ecofeminism which she suggests overlaps with cultural ecofeminism.

Contrary to this Social ecofeminists de-emphasise the spiritual aspects and emphasise the social structures and political nature of the struggle(Plumwood 1992a, Mellor 1992). To some extent Salleh (1992) is in agreement with this but extends the point further, indicating that ecofeminist thinking tends to reflect the various forms of thinking situated within the feminisms generally. These being liberal, radical, marxist, socialist, anarchist and post-
structuralist, although, there has been a tendency to move towards the radical end of the spectrum of thinking. In a response to criticisms of ecofeminism by deep ecologists, Salleh (1992) identifies three areas of misunderstanding which contributes to the sometimes volatile attacks on ecofeminism. She suggests there are philosophical difficulties, sociopolitical differences and a 'psychosexual dynamic which runs through the exchange' between ecofeminists and others in the green movement (Salleh 1992:198).

In her reply to deep ecologists she suggests the contested areas of their ecophilosophy include gender, essentialism, normative dualism and eco-centrism.

It is perhaps Bookchin’s lack of awareness of the epistemological and ontological basis of ecofeminism which has resulted in his angst against what he describes as mystical, intuitive thinking in ecology. Also, it would appear that ecofeminists are divided on this issue. Some social and deep ecologists are also overtly antagonistic to ecofeminist thinking.

Ursula King (1989:219-220) cites an adaptation of a poem by an American Indian Chief Settle who in 1854 said:-

'Whatever befalls the earth
befalls the daughters and the sons of the earth.
We did not weave this web of life:
We are merely a strand in it.
Whatever we do to the web, we do to ourselves.'

We are the weavers,
We are the web,
We are the flow,
And we are the ebb.

In plain terms ecofeminism is about the connectedness or interrelatedness of all things on this planet. That, we are all part of an enormous web, and, what happens in one strand is very likely to effect all the strands to a lesser or greater degree. This is similar to the deep ecology view of the connectedness of all organisms in the galaxy (Matthews 1988).

Ecofeminism has been defined in several different ways, although there does tend to be some merging and overlap. Predominantly
this diversity of definition is dependent on an individuals commitment to either a cultural (radical) or socialist-anarchist viewpoint. Ursula King (1989) asserts that ecofeminism is a blending of the political and the spiritual. It has also been described ...'as a social movement that connects the devastation of the earth with the exploitation of women' (Wyman 1987 in Hallebone1989). For Ynestra King (1989b:19) 'Ecofeminism finds misogyny at the root of ...[women's] oppression.' She also believes that there is a relationship between the types of denigration and dehumanisation of certain groups, for example women, people of colour, working class and animals, nature and the environment (King1989a). Ecofeminists assert that ecological perspectives therefore, connect various forms of oppression. Moreover they suggest that the four interlocking pillars which support a patriarchal society are sexism, racism, classism and naturism (specism). Part of the ecofeminist argument is that women are generative, nurturing, caring, inclusive and ecologically sensitive. Furthermore, they suggest that it is social ecological feminism that will save the world from devastation.

As pointed out earlier ecofeminism is not monolithic and American and Australian theorists tend to differ in the degree of emphasis they give to the basis for women's greater ability to save the planet and establish a free and ecological society. One of the main Australian exponents of ecofeminism is Ariel Kay Salleh. Salleh (1984) suggests three conceptual bases for women's ecological sensitivity. These are related to biological differences, psychological constructs and social constructs. The role of oestrogen as opposed to testosterone in producing more gentle behaviour in women is put forward with very little supporting evidence. The act of giving birth is also suggested as encouraging women to be more nurturing and generative. Salleh (1984) also suggests that men are separated from nature by their peripheral role in childbirth. The psychology of gender formation is also proposed as a means by which men are separated from nature. In this situation it is argued that the separation of men from the mother produces a natural/cultural dualism. Lastly Salleh argues the case for a social construction of gender role behaviour that either separates men from or joins women to nature.
Like Bookchin (1984, 1990), Salleh’s ideas have evolved over time. Her later work reveals a greater emphasis on the role of language in maintaining the nature/culture split and the historical embeddedness of this process. For Salleh a patriarchal linguistic construction ensures that culture is dominant within the dualistic relationship of nature and culture. Women are aligned with nature and therefore in a powerless position in that they are seen as acultural (Salleh 1992). She clearly articulates the tasks of ecofeminism as being the establishment of ‘the right of women to a political voice’, ... 'undermining the patriarchal basis of that political validation by dismantling the patriarchal relation of man to nature'... and an ...‘ecological task of demonstrating how women have been able to live differently in relation to nature’ (Salleh 1992:197-198). Her recent work is clearly more critically based, and, although emphasising psychodynamic aspects of gender relationships, she relates this clearly to political processes stating:-

In my understanding of how ideological forces impact on identity formation, however, it is largely women’s historically contrived, or workaday “second nature” that has political relevance in today’s crisis. (Salleh 1992:198)

The American theorists have tended to ignore biology. They believe that emphasising the biological role would be promoting biological determinism which in the past has tended to operate against women. They have alternatively placed heavy emphasis on the social construction of behaviour.

An understanding of this concept requires an exploration of our conceptualisation of non-human nature. Boulding (1981 cited in King 1989) drawing on the earlier work of De Beauvoir as expounded in the second sex, (Biehl 1991) asserts that the worldview of non human nature is, that it is conceptualised as 'Other'. Women have been aligned with nature in western culture and have therefore been viewed as ‘other’ to be dominated. Further to this King (1989) suggests the very basis of ecofeminism is the need to reconceptualise the 'Other', the not 'Us'. Mellor (1992:267) contextualises this idea in terms of human relations and speaks of '[T]ranscending the me-world'. There is a need to transform the worldview of domination, hierarchical relationships, anthropocentrism, scientific objectivity and neutrality and the
mind body split (Wynman 1987). One of the most prominent theorist, Ynesta King (1989a:129) argues that 'W]omen have been cultures sacrifice to nature.'

Misreading the views of both King (1989) and Judith Plant (1989), Biehl (1991) is extremely critical of ecofeminist thinking in relation to the concept of 'otherness'. She suggests that in equating women with nature in a joint concept of 'otherness' ecofeminists construct feminine behaviour as allowing women to then experience life as nonhuman nature, and, that this is valued more than human behaviour.

Examining King's (1989) argument as discussed above and conceptualised in Figure 2 it is clearly demonstrated that Biehl's case has little to support it.

Warren (1987) extends this argument further by identifying what she sees to be the patriarchal worldview which creates the nature/culture dualism. This is characterised by value-hierarchical thinking, normative dualism and the logic of domination. Further to this she asserts that there is an urgent need for a reconceptualisation of how we view ourselves and non human nature. The relationships inherent in Warren's argument is diagrammatically represented in Figure 2.
Figure 2. Patriarchal Worldview.

Value-hierarchical thinking

Logic of domination

Conceptual trap

Creation of normative dualisms
'I' vs 'not I' or 'other'
teacher vs clinician
women vs women

Justifies the dualistic relationship

Perpetuation of the oppression of 'otherness'
the 'not I'
Although Biehl (1991) argues that ecofeminism lacks any coherent theoretical framework, Integrative/ Transformative Feminism as suggested by Warren (1987) and Miles (1981, 1986) is a most appropriate framework. The basic premise of this theory asserts that the liberation of women is fundamental to the elimination of racism, classism and naturism. The removal of all forms of oppression necessitates a fundamental change in worldview which involves the acceptance of several other premises. One of the main theoretical stances is the validation of women's diversity of experience. And, Warren (1987) refers to this as the 'politics of difference'. It also supports the social construction of knowledge. The 'self' is viewed as a co-member of an ecological community which is characterised by values such as caring, friendship, appropriate trust, diversity and reciprocity (Warren 1987).

The argument could be put that ecofeminism is not concerned with liberation. On the other hand it could also be argued that it is more than a liberating politic, it is in fact a transformative politic. It requires a transformation in the way we relate to our inner and outer world. The nature of that relationship is spiritual but it is spirituality in action, in that it attempts to reduce the alienation between the inner and outer, and by so doing, preserve the harmony and integrity of both to the benefit of both.

Hallebone (1989) in discussing environmental attitudes and gender appears at times to present a case against ecofeminism as a theory which attempts to assert that women, because of their behavioural characteristic, are biologically closer to nature than men. This she believes is problematic. Although she does appear to misinterpret the case for ecofeminism, she does conclude by stating:-

Gender, (as femininity or masculinity), is a socioculturally -produced and ideologically-managed construct. So far, psychoanalytically -informed feminists have suggested altering and restructuring child-rearing practices as the key
to changing gender prescription and subordination and oppression of women, plus some fundamental psychocultural re-working of our orientation to death and mortality.' (Hallebone, 1989:17)

What ecofeminists are saying is, if women's gender role behaviour is socially constructed and also the most appropriate to save this planet, then men too can be socialised to reconceptualise their relationship with their inner self and non human nature in a way that prevents the development of the nature/culture dualism. Again Biehl (1991) is highly critical of this concept arguing that in so doing ecofeminism is denying the possibility of behaviour which is ‘human’ rather than feminine or masculine. This, she further suggests is making women again take on the types of responsibilities that in the past have oppressed her.

**Unfortunately what Janet Biehl fails to understand is that ecofeminists are also asking men to be prepared to transform their present worldview to one which demonstrates a procreative rather than destructive relationship with human and nonhuman nature.**

The relationship between eco-feminism, integrative/transformative feminism and social ecology is finally realised in Judy Pinn's (1989:3) explanation of social ecology.

'Social Ecology will be challenged to think and act in a way through:

i understanding the nature of interconnections - within ourselves, between ourselves and others and between ourselves and the natural world.....

ii transforming and so improving our world.'

**Summary**

By its very nature ecofeminism deconstructs ‘otherness’ the ‘not I’ and transforms the alienated social and natural relationships. Therefore, ecofeminism is antihierarchical, nondualistic, celebrates diversity and difference and works against domination and violence. For ecofeminists the 'self' is viewed as a co-member of an
ecological community which is characterised by values such as caring, friendship, appropriate trust, and diversity, reciprocity, connectedness and interrelatedness (Warren 1987). Having established the critical theoretical basis of the epistemologies of social ecology, the epistemological/ontological relationships can be conceptualised in the following way. The praxis of social ecology is demonstrated in any actioned strategy which is aimed at dissolving dualistic relationships embedded in the alienation of human from self, other humans and the biosphere, and, which seeks to ‘enhance the power of people to shape their own history’ (Tokar 1988:140) in a manner which validates human dignity, diversity, freedom and creativity. In a discussion of the strengths and weaknesses of critical social science, and in the putting forward of his amended scheme, Fay (1987) articulates the value of an ‘ecological sense’ or ‘ideal’. By this he is referring to the situation in which individuals or groups become what they should become, combined with a deep consciousness of the concept of interrelatedness. Therefore social ecology as a critical ecopolitical theory fits well with Fay’s (1987) reconceptualisation of a critical social science which is a partial answer to the ontological limitations of his present basic scheme presented earlier.

The substantive content of these epistemologies is echoed in writings by other Australian social ecologists who suggest that as a worldview located in ecophilosophy, social ecology has several important perspectives. Firstly, the worldview is holistic in that the world is metaphorically constructed as a web of interconnecting parts and processes. Congruent with the first perspective action research as method is logically fitted within a critical methodology that is concerned with problematics that can be improved. (M.Sc. (Social Ecology) Invitations for expressions of interest in enrolment in a research degree 1990)
Therefore the praxis of social ecology is action for change. Action research as research for change is contextualised within personal practice which is seen to be problematic. When action research is embedded in the critical paradigm the theoretical framework for possible transformative emancipatory change is articulated. Russell (1989a) suggests that social ecology argues for the deconstruction of metaphors associated with both power and hierarchy and cause and effect.

The theoretical framework for ecofeminism is Integrative/Transformative Feminism (Warren 1987). Therefore I would argue that ecofeminism is a transformative politic which attempts to reduce the alienation between the inner and outer acting to preserve the harmony and integrity of the self, the community, and the self within the community. Therefore, ecofeminist perspectives within the discipline of social ecology, together with transformative emancipatory action research has the potential to create a dynamically stable, organically sustainable human ecological system which provides the basis for ongoing development of both nurses as people and nursing as a community in terms of their relationship with self, others and the biosphere. As Val Plumwood (1992a:10) suggests, '[S]ocial ecofeminism helps articulate an exciting political project which would shake the foundations of systems of domination around the world.'

Critical Social Nursing and Ecophilosophy.

Today the world is confronted with a global ecological crises that has placed humans' fulfilment and even survival in jeopardy. It now seems clear that nursing ... must now view human life and health as a multidimensional unity with the environment (Kleffel 1991:47).

Nursing in the past has consistently borrowed theories from other disciplines and applied them in the nursing context. The use of feminist theory in nursing is such an example. How then is nursing utilising ecopolitical theory and ecophilosophy?

A review of the nurse theorists clearly indicates that overall nursing has failed to look beyond the immediate milieu when considering the nature of the environment. The environment has
been viewed as physical, something to which humans must adapt. And, although the environment is considered as one of the four cornerstones of nursings’ metaparadigm Kleffel (1991:42) suggests that it is conceptually weak in that ‘its definition is ambiguous and vague, and it lacks conceptual unity.’ Chorpoorian (1986) in fact asserts that there is a need to reconceptualise environment as a fundamental concept in nursing.

There is no doubt that the conceptualisation of environment in nursing has been influenced by the prevailing philosophy of science at the time that nursing theories were constructed. The dominant ideology has been situated in Cartesianism. The environment therefore was constructed as machine-like, passively producing resources to be exploited. Individuals were constructed as separate, isolated from themselves, each other, and nature. These individuals lived in a world which was private. Self, others and nature were reduced, abstracted, decontextualised, disembodied and mechanised (Parker 1991).

On the other hand there have been some nursing theorists who have been influenced by other philosophers such as Hegel and Heidigger.

Grouping the nursing theorists after Meleis (1985), Kleffel (1991:42) notes that it is the outcome theorists such as Johnson, Levine, Roy and Rogers who speak about the environment in terms of harmony and balance both internally and externally. Of those not categorised by Meleis, (1985 in Kleffel 1991) Parse does not differentiate between human and nonhuman nature. Instead, she speaks of a context defined by co-creation, interchangeability and freedom of choice. Neuman, a systems theorist views the environment as client focussed but like the outcome theorists also speaks in terms of internal and external balance and harmony. A new concept referred to as ‘upstream thinking’ (Butterfield 1990) has emerged in nursing to ecologise our relationship with the environment and empower people to alter systems of domination that effect their health. This framework includes a consideration of the effect of political, social and economic factors on environmental health. Both Butterfield (1990) and Kleffel (1991:47) cite examples of ecological nursing models as examples of ‘upstream
thinking'. McFarland's (1985) environmental systems model and Milio's (1976) ecological approach are provided as examples of models in which society rather than the individual is the locus of change. Other models of 'upstream' rather than 'down stream' thinking include macro-level and quantum caring, and critical social nursing (Butterfield 1990, Kleffel 1991).

Further to this, in a discussion of caring models of nursing in the context of nursings' relationship to the environment, Schuster (1992) provides some insights about patriarchal constructions of caring. She suggests 'that current human care theory in nursing is anthropocentric and, as such, does a disservice to the discipline by failing to acknowledge adequately human connectedness to all things' (Schuster 1992:7). This is similar to Watson's idea of quantum caring which seeks order and a holistic approach to caring which includes nonhuman nature (Kleffel 1991).

Finally, in a discussion of ecofeminism and critical social nursing Kleffel justifies the application of theories from other disciplines which assist in defining our relationship to nonhuman nature. The justification for this, she believes, is based in the clear theoretical connections ecofeminism makes between environmental ethics and feminism, and critical social theories ability to expose 'hidden power imbalances that inhibit free discourse' (Kleffel 1991: 46).

Allen (1985), Stevens (1989) and Butterfield (1990) see critical theory as providing an adequate framework for challenging the status quo thinking about our relationships with each other and nonhuman nature. Stevens (1989) in particular challenges us to reconceptualise the environment to include the social and natural contexts. This she suggests, would provide a context for nurses' involvement with critiquing and acting to dismantle oppressive structures which effect health and limit our ability to freely and autonomously make choices concerning our health status.

As a nurse and a feminist studying in the discipline of social ecology, how can I research in the discipline without embedding this research within a perspective that authentically represents both my epistemology and ontology?
That is, the only way for me to research is as a feminist social ecologist. Given the debate, I have chosen to take the position that feminism is able to provide ecophilosophy with a fundamentally praxis-orientated framework in which both the process and outcome of transformative change can be envisioned.
Chapter three: Towards an Ethic of Inquiry in Critical Social Science.
Introduction
Collaborative, participatory action research is problematic when situated within the context of gaining an educational qualification. Defining in reality the actual nature of the collaborative, participatory and emancipatory aspects is fundamental to uncovering the taken-for-grantedness about the use of these terms and their ethical implications.

As I struggled with this project I also struggled with the ethical nature of the lived experience of this research. I began to see the ethical implications not as ideas superimposed on the project, but as actually arising out of the research paradigm on one hand and my own moral identity on the other.

Research Ethics and Methodology.
The context of action research in Australia has, to a great extent, been critical social science. Collaboration, participation and emancipation have been conceptual cornerstones of research in this paradigm. Although, a review of the literature does suggest that there is a degree of conceptual conflict.
There are those such as Fals-Border (1992) who speak mainly of participatory action research as reflected by his work with peasant land rights in Colombia. Certainly in Australia, action researchers refer to both the collaborative and participatory features of action research (Kemmis and McTaggart 1988). Other Australian action researchers support this stating:
Action research is distinguished by its adherence to a collaborative ethic. It is a collaborative endeavour in which groups of practitioners work together to understand better their own practice and to increase their awareness of the effects of their own practice and of their control over the situation within which they work. (Brown, Henry, Henry and McTaggart 1988:340)
What became obvious early in the research was that we didn't always agree with each other. But we were able to relate this to different influencing factors embedded in the various clinical practice settings and our own perceptions of the different contexts.

Grundy and Kemmis (1981 in Grundy 1987:145) comment that the theory of action research supports 'its consensual epistemology' .... therefore indicating that ...'it is inherently collaborative.' On the other hand both Winter (1989) and McTaggart (1991) take a different view. McTaggart (1991:45-46) concisely conceptualises collaboration in the following way:

The dialectical relationship of individual and cultural action in the context of the collaborating group ... is concretely manifested in the expression of disagreements and agreements, misunderstandings and shared under-standing, in clashes and agreements over the co-ordination of activities, in the eruption and resolution of conflicts of interest, in the formation and working through of power struggles and patterns of domination and resistance, and the like. These are the concrete face of the processes of contestation and institutionalisation. ... Improvement takes place through the dialectic of interaction between the individual and the group; monitoring the improvement requires collaborative monitoring of the processes of contestation and institutionalisation as they emerge concretely...

Further to this Winter (1989) indicates that for him collaboration means that all participants views will be considered as important. He further states:

To work collaboratively with these viewpoints does not mean that we begin by trying to synthesise them into a consensus, by counting or evaluating them. On the contrary it is the variety of differences between the viewpoints that makes them into a rich resource, and it is by using this
Brown et al (1988) identify the problematic collaborative issues as those concerned with common interests, differing priorities, differing commitments and energy levels, and status differentials. Fay (1987) begins a discussion of the limits of critical social theory by suggesting its basis to be the fundamental belief in the power of human reason. He identifies four limitations, including two types of epistemological constraints. It is within the context of the failure of critical social science to consider the relationship between epistemology and ontology that he discusses the remainder, those being therapeutic, ethical and human power constraints.

As Fay suggests the ethical problem of critical social science lies in its lack of consideration of self identity, suggesting 'T]he failure to take adequate account of the traditional character of human identity has often resulted in violating the ethical limits placed on all revolutionary action' (Fay 1987:163).

The consideration of an ethic of this critical social science research was, both a 'journey' and a discovery of my 'home' (Pinn 1991). The discovery of my self as part of this journey came with the proposal of my own ethic of critical social science research through the naming of my own moral identity. There was with the work of Elizabeth Porter (1991), a sense that for me, the final missing pathway connecting all isolated parts of the landscape had been discovered. Also to some extent it provided an answer to Brian Jay (1989) concerning the ethical limitations of critical social
science particularly as it applied to research in that paradigm. I will begin with myself as a feminist social ecologist by citing the work of Cook and Fonow (1990:89) two feminist researchers who suggest 'To some extent, the focus on ethical dimensions is related to the final epistemological assumption concerning knowledge.' And so my journey had begun.

Guba and Lincoln (1989:117) who work in the area of educational evaluation support the previous statement suggesting that paradigms as worldviews have '...profound implications for how we adjudge activity to be moral or ethical'. The worldview or paradigm therefore determines the epistemology from which the methodology is derived on one hand and the ethical dimensions on the other.

This was, for me, to be a fundamental concept in the birthing of a critical social science ethic.

Positivism
Guba and Lincoln (1989) are helpful in their discussion of the ethical and political failure of the positivist paradigm. They suggest that it is the positivist's realist ontology and epistemological claims of objectivity and value-freedom that provides the basis for unethical practices that has required the setting up professional bodies to ensure that there is no breach of ethics within the research.

As I am presently a representative on a Institutional Ethics Committee this was indeed a challenging postulation.
As educational evaluators they also go on to identify other problems within the positivist worldview. Writing extremely forcefully they suggest a major problematic is the '...warrant to deceive...' based on a search for '...a "higher" order of truth' situated within the interventionist methodology (Guba and Lincoln 1989:122). The idea of deception is related to a need for absolute truths and uncontaminated data by which reality can be controlled and predicted (Guba and Lincoln 1989). This, they further suggest, may lead to practices which deny informed consent, reduce participant autonomy and are punitive of attempts to withdraw from the research.

**Informed consent is a problematic concept in any situation or paradigm.**

The ideas of value freedom/ladeness is linked with the concept of theory ladeness/freedom. Within the positivist paradigm facts are said to exist in themselves unrelated to the context within which they exist. And, being free of theory and value then they are able to be objective. Guba and Lincoln (1989:129) go on to state, '[B]oth the form of discourse and the particular method conventional science employs embody values,...'. Citing Bleier (1986:3) they suggest this in turn:

affect [s] what observations scientists make and ... what questions they ask ... They affect the assumptions scientists make: what language they use to pose questions; what they see and fail to see; how they interpret their data; what they hope, want, need and believe to be true. (Guba and Lincoln 1989:129)

*Now, further to a discussion of the journey, I came to believe that the premise suggested above applies to all epistemologies.*

**Constructivism**

Drawing on Constructivist epistemology, of which Guba and Lincoln are well recognised exponents, a similar critique of the
ethics embedded in the methodology is necessary. The worldview of the constructivist is that we create or construct our own realities. The ontology is relativistic. In other words there are multiple socially constructed realities in which truth is to be found within the ‘...amount and quality of the information’ (Guba and Lincoln 1989:84).

Rather than dualistic, the epistemology is monistic and subjective. The researcher and those being researched into, are related to the extent that, the data and conclusions are created by the research process. In this worldview the distinction between ontology and epistemology disappears. The methodology then becomes as Guba and Lincoln (1989:84) suggest ‘...a continuing dialectic of iteration, analysis, critique, reiteration, reanalysis and so on, leading to the emergence of a joint... construction of a case.’

In a discussion of the ethical problems posed by the constructivist worldview Guba and Lincoln (1989) identify four major problems. Firstly, due to the close contact between all involved in the research process and tools of analysis (direct quoting, natural language) real problems are posed in terms confidentiality and privacy. Secondly, violation of trust can occur and is closely related to the previous statement. Thirdly, a lack of negotiation with participants may result in a lack of participant ‘...dignity, self-esteem, and self-agency’ (Guba and Lincoln 1989:135). Fourthly, problems of selection, inclusion/exclusion may also occur. This is closely related to the previous statement and involves the need for constant consultation with research participants in decision making related to what data supports the constructions/reconstructions within the case study.

'I had begun to realise that to some extent Guba and Lincoln (1989) had begun to link the worldview espoused by the research framework with moral identity.

To further locate this discussion within my own framework, my journey by necessity meant an exploration of the
Feminism

Feminist researchers in social science have also argued the case for the embeddedness of ethics within the worldview or conceptual framework of the research (Driscoll and McFarland 1989). These writers identify the value ladenness of the various paradigms, and moving in the opposite direction, citing Graham (1983 in Driscoll and McFarland 1989:185), they state:

Techniques of data collection and analysis are not neutral. They are shaped by the conceptual framework and they may, in turn, further shape that framework. Each technique embodies decisions concerning appropriate units of study, the important characteristics of the units, and relationship between units.

They also go onto suggest that 'Each technique's usefulness and its limitations are structured by its underlying assumptions. Adopting a research technique means adopting its conceptual framework' (Driscoll and McFarland 1989:186). These researchers clearly identify several concerns arising out of the assumptions built into the research process. Firstly, differential power relationships vested within the authority position and knowledge level. Secondly the lack of validity given to women's experience. The likelihood of this occurring is associated with an excessively inappropriate use of quantitative research to study women (Driscoll and McFarland 1989).

Although, this is more likely to occur when research is seen as research on women rather than research for women.

Cook and Fonow (1989:78) also suggest that many scholars have indicated that feminist methodology is concerned with ethics and have attempted ...'to delineate the central tenets of a feminist ethic.' Drawing on work by The Nebraska Sociological Collective (NFC) (1982) they identify a fundamental tenet of feminism, the oppression of women within society and within academic
disciplines, and place the ethical questions within this context. Elements of oppression, they suggest can be clearly identified in the various research paradigms and cite the following major areas as problematic.

1. language as social control (vocabulary and style which distorts women's experience).
2. 'gatekeeping' ... publication, funding, hiring, promotion and tenure.
3. theory imposition and intervention (participant observation).
4. withholding information (interviewing).

The Nebraska Feminist Collective (1983) also adds to this the issue of women as research objects.

This worldview argues 'that feminist epistemology and methodology arise from a critique of each field's biases and distortions in the study of women' (Fonow and Cook 1991). Feminist research is conducted for women with the aim of informing the community about women's lives. It actively seeks to empower women, liberating them and in turn removing the existence of domination of one group over another. This worldview accepts caring, emotionality, empathy, friendship and individual uniqueness as features of feminist research (NFC 1983 Fonow and Cook 1991).

The libratory stance of feminism is therefore activist and this poses several ethical dilemmas. Empowerment, liberation and action which changes power relationships also has the power to change the nature of intra and interpersonal relations. Quite often intimate relationships are affected with emotional and material consequences. In both these areas responsibility and accountability for the outcomes must be mutually recognised. Caring and friendship involve trust which has the potential to be violated by how the data is eventually utilised. Finch (1984 in Fonow and Cook 1991:9) suggests a feminist has a 'special responsibility to anticipate whether research findings can be interpreted and used in ways quite different from her own intentions.'

_This critique led me to believe that an ethical consideration begins with the very germination of ideas for the project and is fundamental to the methodology._
and method and cannot be separated from it. Harding (1987) suggests that the purpose and analysis are not separable from the origins of the research problem or question.

Given the context of my own project I believe that a critical social science in which feminist action research is conducted has the potential to fulfil the requirements of ethically sound research based on the methodology, which is characterised as being:

Collaborative
Participatory
Democratic
Emancipatory.

The subject of the research is relevant to the participants perceived needs. The researcher is both the subject of the research and the person researching. This was the path but where was the 'Me'. The question I asked myself was 'where was 'I' situated? If 'I' was an active participant, the 'I', was making process decisions based on my own worldview which at that time was contextualised as 'doing good or doing no harm'. Initially I referred to this as 'personal integrity' (See Fig 3). During a residential discussion I was challenged by a fellow student around the meaning of the term 'personal integrity'. As I attempted to explain this term I realised the vagueness of my own thinking on this issue. The return 'home' to a quiet environment enabled me to reflect on my own conceptualisation of personal integrity. My reading and thinking led me to the work of Elizabeth Porter (1991). This experience resulted in a
reworking of my previous statement.
And, I concluded:
On the other hand, although ethical characteristics are inherent within the worldview of new paradigm research, ethical decision making will always be related to the 'moral identity' (Porter 1991) of the researcher/s and their understanding of, and willingness to openly deal with the dilemma's created by the epistemological embeddedness of research ethics and the realities of their own lived experience of research.
My concept of personal integrity had now been replaced with the idea of a living moral identity situated within my own self identity. Figure 4 conceptualises the evolution of my thinking on ethics. It clearly demonstrates the reconceptualisation of personal integrity as moral identity.
This, I felt, also conceptualised the answer to the ethical limitations of critical social science as postulated by Brian Jay (1987).

**Figure 3. Personal Integrity and Process Decision Making**
Figure 4. Towards a Model of Ethical Inquiry in Critical Social Science.
Ethics of Inquiry in Critical Social Science.

The previous discussion considered the embeddedness of ethics in the worldview of the proposed research paradigm and I concluded by centrally locating the final ethical decision making within the moral identity of the researcher/s. Just as the work of Maturana (Russell 1989a, 1989b) has been proposed as a suitable body of knowledge for the biological basis and scientific tradition of social ecology, I would propose the work of Elizabeth Porter (1991) as providing the scholarship in feminist philosophy concerning Moral identity as forming the framework for the development of an ethic of research in social ecology (See Fig. 4).

The 'Self-in-relations'.
In wrestling with the polarisation of a women's ethic of love as espoused by Baier (1986,1987) and caring as proposed by both Gilligan (1982) and Nodding (1984 ) on one hand, and men's concern about obligations, duty, responsibilities and principle on the other, Porter suggests the 'self-in-relations' as the central idea of her concept of moral identity for both men and women (1991:196). She views this concept as a synthesis which:

... acts to breakdown the hegemony of traditional thought structures and gender-differentiated practices that rely on dualistic assumptions, by acknowledging new moral tensions, new combinations of possible solutions and new forms of subjectivity. This provides a framework for an emancipatory ethic that is holistic in dealing with general identity and sex-specific dimensions of identity. (Porter 1991:196)

In her concept of moral identity, this 'self-in-relations" is predicated upon self-knowledge which is ... 'affirmed... [by] ...
dialogue to determine shared values, common purposes, and the conditions whereby human potential might be realised' (Porter 1991:196). Therefore commonalities, differences and diversity are validated within a dynamic self-growth orientated context. Porter elaborates further, drawing on the work of Taylor (1976) and Meyers (1987) stating 'While there is a responsibility both to self and others, the moral filter is the person's sense of identity, for to violate personal identity undermines self-respect' (1991:196). Reciprocity is the connection between responsibility, identity and respect. She suggests that it is within reciprocal relationships which value interconnectedness that tension creating moral dilemmas can be resolved within a context of mutual growth.

*It would seem that Porter's voice is echoed by Russell and Ison (1990:22) who suggest 'the transformation that we are most interested in ... is the continuing evolution of how we understand our surroundings and ourselves.'*

Further to this (Tomm 1992:108) contextualises this thinking for social ecology when she states:

> Because the basic ontology is assumed to be a process of emerging patterns of interconnectedness, fullness of being would consist in experiencing the highest degree of interrelatedness. Increasing awareness of oneself as an aspect of that process is consistent with compassion for other, just as it is consistent with concern for ecology.

This model (See Fig 4) is aimed at concretising and therefore contextualising ethics. It is a deliberate move away from abstraction which is often associated with justice and rights models of ethics. Rather it is situated in moral action. Scaltsas (1992:17) speaking of women and ethics clarifies this idea commenting:
The concrete, contextual aspects of women’s moral thinking can be seen to result from this perceived responsibility to appropriately respond to people in actual situations, to ensure that this particular person is not hurt and that this particular relationship is sustained.

Davion (1991) although discussing the earlier idea of integrity supports the ideas of wholeness, connectedness and growth processes in moral identity.

What must be guarded against is the urge to define ones moral identity only within a relationship with another. There is a need to conceptualise moral identity as separate, but also related to that which is situated within the relationship. That is, the ethical self, or personal identity, must exist in its own right. Thus ensuring the ethical ontology of the self.

**Research as Ethical Praxis.**

The above discussion has demonstrated the context of ethics both within the research paradigm and the individual moral identity. It is congruent and recognisable as a perspective that allows for lived experience of research to inform critical social science.

I have adapted Jack Whitehead’s view of a ‘lived educational theory’ (McNiff 1988). He suggests that one is led by question and answer to account for personalised contextual practice both in theory development and research. This creates the milieu for the development of dialectical logic. One’s question becomes another’s answer and this answer becomes another’s question. The above discussion has demonstrated the context of ethics both within the research paradigm and the individual and relational moral identity. It is
congruent and recognisable as a perspective that allows for a lived research praxis to inform the discipline of social ecology (See Fig. 4).

An Ethic of Research in Social Ecology.
...in replacing an ethics located in principles and duty, ... it must provide for the possibility of ethical behaviour in relation to what is foreign, it must consider analyses of oppression, ... it must have a vision of, if not a program for, change. (Hoagland 1990:113)

The following conceptualisation has been formulated within my own worldview as a feminist social ecologist with a conscious consideration of my own moral/self identity. It is aimed at asking questions about ethical practices. Research programs within particular disciplines leading to an educational qualification pose certain contextual ethical dilemmas that require negotiation by the person who will finally submit the research. I see the relationship as being one where the context interacts with moral identity and research paradigms and their value-laden assumptions requiring certain actions which then produce ethical risks which must be negotiated. The ethical risks or dilemmas are related to decisions concerning such broad areas as the nature of the research; how it is conducted; how the data is interpreted and utilised and who benefits from the research.
A fundamental premise is the utilisation of an appropriate methodology/method which does not
reinforce/support the oppression of women or any other group and
demonstrates an attitude of care and compassion and a validation of
'humaness' for all with whom we interact in the formulation of the
research purpose and the carrying out of the research processes. Rather than pose
a set of ethical guidelines based on the concept of rights and responsibilities
derived from the research framework, I have instead chosen to put foreword a
series of questions which should be reflected on at the beginning and at
various stages of the research. The questions reflect my own developing
epistemological and ontological understanding of critical social science
and Porter's (1991) concept of moral identity. The perspective is clearly
feminist utilising an alternative view of
moral philosophy aimed at creating a
dynamic rather than static dialogical
community of researchers. I have also
made some attempt to problematise
some of the questions as they apply to
the many different research paradigms.
The point I want to convey is not that
each of the characteristics inherent in the
question is also characteristic of the
research, but that as each aspect of the
question is answered a new question
arises. This should also be considered
with the previous discussion which
problematised such concepts as
collaboration, participation and
emancipation.
The questions are as follows. Is the research:
1. reflexive, reflective, participatory, collaborative, democratic and emancipatory in all aspects of the theory development and research processes?

This is problematic in the context of presenting a research project within a graduate program of study or situations which may involve overt political consequences. Research paradigms which are interpretive will not necessarily be emancipatory. And, research which is aimed at being emancipatory may not necessarily in the end be empowering.

3. trustworthy, honest, fair, responsible, confidential supporting anonymity (if requested by participants) and respectful, avoiding manipulation and control?
4. constructed utilising 'language that is non-exclusive, accessible and de-mystifying'? (Nebraska Feminist Collective 1983:542).

This is problematic in the context of submitting research within a graduate program of study and raises the problem of meeting the challenge of multiple audiences.

Should I do as Fals-Border (1992) suggests and actually write two theses? Or, continue to do what I have chosen, that is, to write in several voices?

5. sharing of knowledge (Nebraska Feminist Collective 1983:542), acknowledging the involvement of all concerned in the conception, development, implementation, documentation, interpretation and presentation of a project?
6. validating of the important role of mentorship?
7. supportive of harmonious, non-hierarchical, non-dualistic intra interpersonal relationships that are caring, reciprocal and growth-orientated?
8. proceeding on the basis of a declaration of intention and informed consent?

Summary
If only the research paradigm is examined then it is likely that a rights and responsibilities approach to ethical decision making will be a feature of the research. If research is viewed from a 'lived' perspective then I believe it is possible to recognise the inherent ethical dilemmas created by the methodology/method which is then processed through the final moral filter, self identity.

Research then, is ethical praxis. Here ethical considerations and theory as situated within the practice of research by a 'lived being' with a moral identity, is reflexively shaped, as in turn, is the research practice.

I am a snail that carries my home with me on the journey. I cannot separate the 'me' from the 'journey' in the same way that I cannot separate my epistemology from my ontology or my ethic from my self identity and worldview.

The model presented in the discussion and demonstrated in Figure 4 is an attempt to overcome the ethical constraints inherent in the critical social science paradigm. It provides an account of human identity as a 'self-in-relations', responding to the lived experience of research and committed to working through ethical issues with the aim of achieving mutual growth. It is an adaptation of Porter's (1991) concepts combined with the conceptualisation of a lived ethical praxis deeply embedded in the methodology and lived experience of the research driven by the tensions within the questions and the corresponding answers. Knowledge production within this form of social relationship is therefore consciously collaborative, participatory and empowering at an institutional, intellectual and personal level. Figure 5 provides a summary of the
relationship between the three collaborative research cycles and ethical research.

Figure 5. Summary of the Relationship between Collaborative Research and Ethical Research
Chapter four: Action Research as the Ontology of Social Ecology.
...the research process is anything but a neat and tidy linear process... It is more often experienced as a dynamic, emergent, changing and tension-filled process. (Hedin and Duffy 1988:363)

**Background**

There is no simple methodic recipe for doing critical social research. One must come to grips with the methodology. ... However, in order to ... carry it out, it is essential to disentangle the assumptions of substantive theory from methodic practices and from epistemological presuppositions. (Harvey 1990:2)

Action research is concerned with two outcomes. Research and action. Research is aimed at an increased participant understanding of a self identified problem. If the paradigm from which the methodology is derived is critical theory then the action is defined as emancipatory change for the participants. Understanding informs action and action contributes to our understanding in a reflexive manner.

On the other hand in different research contexts the action and research components may not necessarily be equally balanced. Some research may have a greater emphasis on understanding and another project may focus on action outcomes. Some projects may have a balance of both. These characteristics of the research may be deliberate or a feature of the natural and spontaneous evolution of the project.

Commenting further on this Bob Dick (1993:9) states:

Action research can be regarded as a research paradigm which subsumes a variety of research approaches. Within the paradigm there are several methodologies. Some examples are Patton's (1990) approach to evaluation, Checkland's (1981) soft systems analysis, Argyris' (1985) action science, and Kemmis' critical action research. (Carr and Kemmis, 1986).
Action research as methodology was previously established as an appropriate approach to research in the critical paradigm. As methodology, it has also been embedded in non critical paradigms as exemplified in the work of Zuber-Skerritt (1990) and in the work of researchers cited above. John Elliott (1988) who has situated some of his work in critical theory, is on the other hand, somewhat critical of attempts to locate action research exclusively within the critical paradigm. Further to this Bob Dick (1993) strongly warns against this framework for a thesis. He makes several challenging comments on the Deakin University approach to action research.

Be warned that they work with a particular form of action research, and are critical of other approaches. If you use their method, it would be as well to document and argue for any deviation...they argue more on ethical than epistemological grounds,...Your best strategy for thesis purposes may be to use their process but find your arguments elsewhere. (Dick 1993:17)

These somewhat unnerving comments brought all my fears to the surface. Had I justified clearly my approach? Was I doomed to failure or a major rewrite of this thesis. I was troubled and unsettled but perhaps a little reassured by Bob Dick's (1993) comment that Richard Bawden runs a faculty on action research principles based on the Deakin school. How could I go wrong? Social ecology as a discipline within the Faculty of Agriculture and Rural Development was therefore embedded in critical pedagogy, or was it? The answer to this I decided could be another thesis.
Bob Dick (1993:16) comments on Peter Checkland’s (1992) work stating that ‘what a legitimate rigorous action research methodology requires is an explicit methodological framework.’

There is a sense here of some confusion in the above statement. A reading of Peter Checkland’s (1992:1-6) cited paper indicates that to use action without positioning it within a theory is to use it as method or process. Making the methodological framework explicit provides coherence and transferability of results. Further to this Bob Dick (1993:17) suggests that ‘[P]articipatory action research is a generic methodology’ and refers to the Deakin approach as emancipatory in that participation results in emancipation. There is a need to clearly differentiate epistemology, methodology and method.

_In this research construction I have drawn heavily on Sandra Harding’s (1987) conceptualisation of these terms. Initially I viewed action research as a coherent method consistent with critical social science. Further exploration of the topic clarified the concepts. I realised my chosen approach was participatory and reflected the Deakin school of action research which is embedded in the critical theory of Habermas._

Harding (1987) defined epistemology as a theory of knowledge and then goes on to differentiate between methodology and method. Methodology is viewed as ‘a theory and analysis of how research does or should proceed.’ And method as ‘a technique for...gathering evidence’. (Harding 1987:2-3).

Given the context of this research, action research embedded in the concepts of emancipatory change as an outcome is consistent and coherent with the epistemology and methodology of social ecology.
This can also be expressed as the idea that if research is viewed as a lived experience, then action research is the ontology of social ecology.

**Feminist Action Research.**

'To the extent that feminism is change-orientated by definition, all feminist research has action components' (Reinharz 1992:196).

There would obviously be those who would disagree with Reinharz’s statement especially those who research in the interpretive paradigm.

In a review of feminist action research over several years Reinharz (1992) discusses the main features of this type of research. Her discussion is summarised in the following list of characteristics of feminist action research:

- values action goals which are specific.
- emphasises processes directed toward change which is continuous and aimed at empowerment.
- is 'usable' research.
- is participatory or collaborative.
- is evaluative
- is 'passionate' or 'engaged scholarship'
- is 'demystifying', Praxic, transformative and Political.

Reinharz's (1992) work is disappointing in the lack of depth and breadth of understanding of the nature of critical action research.

*In chapter 1 I have clearly and more comprehensively demonstrated the link between feminist research and critical action research.*

**Critical Education Science.**

‘Critical theory, as described by Habermas according to Carr and Kemmis (1986:144) is the product of the critique of contradictions in the rationality of social actions.’ (Ewert 1991:373)
Carr and Kemmis (1986) as discussed earlier believe that Habermas' critical theory is both a theory of causation and a theory of the nature of society. Therefore, they view his work as both critical social science and critical theory. Based on this, and having identified the requirements of an educational theory, they have derived a scheme for a critical education science in which action research is seen to be an enactment of that theory. In summary Carr and Kemmis (1986) contend that the characteristics of a critical education science include:

- a rejection of positivist rationality with its emphasis on objectivity and truth.
- an emphasis on teacher's interpretive reality.
- a mechanism for revealing false consciousness and ways the effects of this can be overcome.
- the concept that theory is grounded in and generated from practice.
- a concern to 'identify and expose those aspects of the existing social order which frustrate the pursuit of rational goals and must be able to offer theoretical accounts ... of how they may be ... overcome.' (Carr and Kemmis 1986:130)

Within critical education science research is for education rather than about it. It is participatory, democratic, collaborative and aimed at improving situations which inhibit freedom and autonomy.

Critical Action Research.
Kemmis and McTaggart (1988:5), from a critical perspective, give the following definition of action research.

Action research is a form of collective self reflective inquiry undertaken by participants in the social situation in order to improve the rationality of their own social or educational practices, as well as their understanding of these practices and the situations in which these practices are carried out.

It involves critical reflection on the social as well as the political context of the situational practice. This critique allows self-conscious awareness of distorted knowledge, thereby uncovering
false consciousness. According to Habermas (1974 in Kling 1983, Carr and Kemmis 1986) this forms the 'organisation of enlightenment.' This 'enlightenment is dependent on participants striving for true statements, authentic insights and prudent decisions' (Kling, 1983:10) within a context of collective criticism. Emancipation is the end result and is dependent on enlightenment and the ability to act freely to change oppressive social systems which in turn enables the realisation of human potential. Self understanding and insights should occur in a context of freedom which allows confirmation, denial or questioning of claims or statements. The concepts of true statements and rationality referred to above is part of Habermas's theory of Communicative Competence. The basic premise of this theory is embedded in linguistics rather than epistemology. Habermas contends that the 'communicative use of language is basic to any human society' (Carey 1993:91). Further to this he contends that within language, speech-acts are exchanged in a context of reciprocal consensus in which there are four claims to the validity of the statement. That is, the utterance is comprehensible, the propositional component of the claim is true, the performatory component of the statement is appropriate and that the person making the claim is authentic (Carey 1993, Ewert 1991, Lakomski 1988).

In other words argumentation concerning the claims is undistorted in that deliberate tactics of deception, power over, covert manipulation and discounting are avoided.

Lakomski (1988) suggests that the ideal speech situation is implicit rather than explicit. He states:
The ideal speech situation is attained when the requirements of symmetrical relationships obtain ... and ... all speakers have equal chances of selecting and employing 'speech acts' and when they can assume interchangeable dialogue roles. (Lakomski 1988:57)

It is worthwhile noting that these validity claims are inherent with in speech and do not vary with different language systems. Therefore as an ideal speech situation is implied when language
is used communicatively any statement that is claimed to be true can be subjected to reflective critique in the context of freedom and reason. This context so described, provides the conditions for undistorted communication, which in principle, provides a context for emancipatory actions. Habermas himself views the ideal speech-act as implied or implicit and refers to it as a 'constitutive illusion' (Lakomski 1988:58). Given this, the problematics of the theory can be seen to be related to lack of equal participation associated with unequal power relationships, the difficulty of establishing if 'true' consensus has been reached, and the ideological nature of language itself (Lakomski 1988). If we rationally cannot recognise distorted communication or unequal power relations then communicative competence (truth as consensus) and therefore praxis is but an ideal and cannot be in reality exist.

The Doctrine of Knowledge-Constitutive Interests.
Carr and Kemmis (1986) categorise the types of action research based on cognitive interest levels, as identified by Habermas, as the 'three basic interests of knowledge as technical, practical and emancipatory' (Webb 1990:3). The technical interest level is situated within the empirical-analytical realm and is concerned with facts and figures. The practical interest level is concerned with understanding the meanings within the substantive issue and is situated within the interpretive realm. These first two levels can result from unreflective action (Smith and Lovett 1991). The emancipatory interest level is concerned with autonomy, freedom and is a result of reflective action and is situated in the critical realm. This is the level of 'true' knowledge because the primary aim of this cognitive interest is truth (Carr and Kemmis 1986, Smith and Lovett 1991). These three forms of interest are viewed in ascending order of value within critical education science.

On the other hand Habermas viewed all three cognitive interest levels as being present when considering a substantive issue. What is important is the primary focus of the research.
As will be pointed out in a later discussion, understanding the meanings within a substantive issue is fundamental to, and must precede, critical self reflection on the substantive issue.

The doctrine of cognitive interests was an epistemological response by Habermas to the overwhelming status given to scientific knowledge. Human interests according to Habermas are embedded in experience and action, have evolved as part of the evolution of society and therefore on that basis provide a 'true' framework for all knowledge (Lakomski 1988).

To say that just because a human interest is manifest as a basic part of one's experience and action within an evolving social system, does not necessarily guarantee truthfulness of the doctrine. This attempt by Habermas to 'ground' his critical theory within a theory of knowledge was epistemologically weak and hence he sought instead to ground his theory linguistically in the form of communicative competence (Lakomski 1988).

History and Scope of Action Research
The landmarks in the development of a different way to conduct research is highlighted not just in terms of processes, as if these processes existed in a vacuum, but also to fundamental shifts in the ideologies which underpinned these processes. They are directed towards the conceptualisation of the relationship between theory and practice, the prevailing philosophy of science, differing views of teachers, the prevailing dominant educational theory and theory of society.

The conceptualisation of this area is heavily indebted to Robin McTaggart (1991). In his book Action Research: A Short Modern History he identifies the main early North American writings on action research and indicates clearly how action research lost favour in the United States. It is suggested that this was due to an
increasing emphasis on scientism, positivistic research and issues of subjectivity and validity in educational research. The teacher was seen to be a separate identity to the researcher and theory separated from practice. Theory development was clearly seen to be the responsibility of educationalists (Kincheloe 1991).

Setting the scene both McTaggart (1991) and Kincheloe (1991) begin by identifying Corey’s (1933, 1953) citing of Collier’s recommendations concerning the need for experiential research to improve the situation for native North Americans. Corey himself worked with teachers implementing action research projects and spoke in terms of cycles of action-research and research-action.

But his emphasis was on technical teacher skills aimed at improving their educational practice and the need to generalise the finding of action research. He essentially failed to question the underlying epistemologies of educational theories in which these practices were embedded. Instead, as McTaggart (1991) suggests he was more concerned with teacher’s conditions of work which could limit the freedom to initiate group action research activities.

And as McTaggart further suggests, although Corry preceded Lewin it is Lewin’s (1946) seminal work researching social relations that has earned him the title of the ‘father of action research’ (Marrow 1969 in McTaggart 1991:6). McNiff (1988) a British educationalist suggests that Lewin described action research as a spiral of steps of planning, acting, observing, reflecting. This model has now been well developed by the Deakin University in Australia and by several British Educationalist such as John Elliott, Dave Ebbutt and Wilfred Carr at the University of North Wales. The action research spiral as it has come to be known has several variations as formulated by different action researchers. Fundamentally they are similar to each other in that the steps appear to be same but vary with emphasis and dimensionality.

As Lewin’s research effort was directed toward social justice and effective group activities McNiff (1988) suggests that his work was
democratic, collaborative, participatory could be said characterised an emancipatory stance.

But, Lewin was involved in developing a theory of group facilitation rather than a theory of practice, his approach was predominantly functionalist. Action in context was his emphasis. On the other hand he was aware of the value of unrestricted dialogue in social action groups. (McTaggart 1991:8)

It was Gouldner in fact who suggested the link between Lewin’s group work and the concept of ideal speech that Habermas develops within his critical theory.

Seen from the standpoint of the kind of practice it implies, it may be that the ‘praxis’ consistent with Habermas’ ideal speech situation is that found in the early ‘group dynamics’ movement launched by Kurt Lewin.(Gouldner 1976:147 in McTaggart 1991:8)

Given this, although important, action research was not viewed as being owned by the people. Lewin continued to differentiate between the researcher and the re-searched.

It seemed that the Lewinian approach to action research was one of problem solving within such varied contexts as industry and American Indian Affairs. Lewin himself did not apply his ideas specifically to education.

As suggested earlier the popularity of action research came under attack and interest was waning. Although, Lewinian approaches were undertaken by Shumsky, his emphasis was technical and again failed to question the underlying assumptions which contextualised teacher practice. The mood in the United States was one of

...treating teachers as functionaries-performing technical rather than substantive roles in a nation-wide program of centralised curriculum research, development and dissemination, coupled with a program of research on
teaching which was looking for universal causal relationships between teaching behaviours and measurable student outcomes. (McTaggart 1991:19)

This thinking was supported by Tyack (1974 in McTaggart 1991) who was in favour of a corporate structure of education which effectively ignored community life and reform. The emphasis was placed instead on research development and dissemination. Although action research in North America was on the decline McNiff (1988) notes Lawrence Stenhouse’s work as crucial to the development of action research in Britain especially the conceptionalisation of the teacher as researcher. The teacher/researcher role is to test curricula to determine the contribution it makes to practice. It is through this process that the causal relationship between possibilities and constraints of the curriculum can be understood. McTaggart (1991) suggests that Stenhouse’s early work was practical rather than critical.

But, this was practical in the sense that collective, strategic planning of change was directed at an enhancement of achievements within a given contextual understanding.

On the other hand McTaggart does acknowledge that the seeds of a critical approach to research was encapsulated in Stenhouse’s view of the school as an institution and educational research as ...'co-opted by the research establishment' (McTaggart 1991:128). And, that it was a prescription for what was to follow in terms of more emancipatory forms of action research.
Stenhouse’s influence on other educational action researchers such as Elliott and Ebbutt at the University of East Anglia in England and Stephen Kemmis at Deakin University Geelong Australia (previously at the University of East Anglia) is notable in the conceptualisation of teacher as researcher especially in the area of curriculum studies.
Although Lewin’s spiral of action research may have originally formed the basis of thinking on this type of research there has been a definite shift in thinking. For the above proponents of
educational research, both McNiff (1988:33) and Kemmis (1986) suggest that there has been a move away from Lewin’s functionalist, prescriptive, externally initiated approach to more critical, emancipatory notions of research. The most notable focus in Australia for the development of critical approaches to action research has no doubt been what is referred to as the Deakin School. This particular group has been led by Stephen Kemmis but also includes other members of the education staff at Deakin University.

Although this is true there have been others that have applied critical theory to action research. Remember the 1st and 2nd World Congress of Action Research and Process Management. Professor Fals-Border spoke of his participatory research with Colombian peasant landrights in South America (1992). Webb (1990, 1992) spoke of reflection in New Zealand, Henry (1992) of his work with the indigenous people of Canada. What then is so critical about action research?

Emancipatory change is a fundamental goal of critical research. But this change means first having a vision of how and what things should be in the context of freeing people from the constraints of the dominant social culture.

The visualisation of transformation conceptualises this idea of change. Without the vision, change may remain impossible within the status quo. Vision names the change process as transformative and research becomes the vehicle for its achievement.

A Critical framework for action research provides for the acknowledgment of subjectivity and value-ladeness of ideas and theories. This obviously leads to a consciousness of ones own personal and professional values and those of the dominant culture. This consciousness is promoted through self-reflective analysis. And, it is this very process which seeks to reveal the
ideologically distorted beliefs and practices which preserve the dominant culture. This is not unidirectional but cyclic, in the words of Robin McTaggart:

...consciousness not only defines reality, but that reality may systematically distort consciousness so that understandings of people may be shaped by illusory beliefs which sustain irrational, contradictory and unexamined forms of life...
(1991:34)

New knowledge is a product of critical research and it also enhances our understanding of present knowledge. Rather than separating knowledge production from understanding knowledge, critical research brings them together within practice therefore conceptualising research as praxis. In this framework practice is said to be informed and theoretical, understanding and knowledge production is inseparable from practice. Theory therefore arises within the lived experience of practice.

Therefore, it is important to question what we were doing. In moving through the cognitive interest levels we were actually involved in research praxis, in that knowledge understanding led to new knowledge production.

Critical research is also ethical research in that it is collaborative and participatory. The researcher and the researched are in the same critical plane and hierarchical relationships are considered antithetical.

I have previously discussed the problematics concerning automatically labelling critical research as ethical without taking into account human identity.

Critical action research is also reflexive in that the research process is not static and fixed but dynamic and fluid. Outcomes in part of
the process influence and determine the direction of the research. The research is shaped in a continual process of responsiveness to the moments of the research.

**Jack Whitehead and Living Education Theory.**

I have included Whitehead, an educationalist at Bath University in England, in respect for the impact he has had on my own thinking in the area of authenticity and the importance of questions in the context of the dialectic.

Whitehead focuses on the ‘I’ in educational research and practice. He stresses the importance of this notion, saying that the: ‘I’ of each individual is his [her] unassailable and inalienable integrity, and that the ‘I’ is a living, pro-active entity. It is vital that we acknowledge the force of individual consciousness in interpersonal relationships. It is this force that makes possible, and its acknowledgment that encourages, a one-to-one relationship between persons that is fundamental to human inquiry. (McNiff 1988:37)

Dialogue and the forming of dialogical communities in Whitehead's notion of lived educational theory is fundamentally important in that it provides the milieu for the development of dialectical logic. What is conveyed by this term is a dialogue of questions and answers which focuses on change that resembles a metamorphosis rather than a restructuring, where one question becomes another’s answer and this answer becomes another’s question. As life is dynamic rather than static so the development of a personal educational theory will be led by question and answer to account for personalised contextualised practice (McNiff 1988).

**The Kemmis and McTaggart Model.**

Grundy and Kemmis (1981a) cited in Kling (1983) suggests that there are 3 minimal requirements for a research project to be labelled as action research these are:-
1. The subject matter is a social practice which is seen as 'strategic action' which can be improved. (Kling1983:8)
2. There is a systematic and self critical implementation of an action research spiral.
3. The research involves those responsible for practice in research, the wider community affected by practice, but remains collaborative at the level of the spiral.

The notion of reflexivity is also discussed by Speedy and Emden (1990:18) who suggest that 'the questions involved in research have personal meaning and significance for the researcher.' And, also the idea that the research bends back on itself and is continually responsive to new information and ideas.

The Kemmis and McTaggart Model (1988) of action research was utilised with a reconnaissance phase and then a spiral of planning, acting, observing and reflecting.

When discussed in the literature this model is somewhat idealised with the moments of the cycles appearing to have equal emphasis. What then did our action research cycles resemble? It was more like the circle made in a pool when an object is thrown in. The ripples which result form circles which have varying sizes and last for different lengths of time. And so it was for us. Different cycles were characterised by varying degrees of planning, acting, observing and reflecting. In other words varying degrees of construction and reconstruction. This is difficult to describe in words and is best represented by the following diagram.
Figure 6. Action Research as a Groundswell

**SOCIAL RELATIONS / PRACTICE**

Cycle 1.

- PAOR
- PAOR
- PAOR

**SOCIAL RELATIONS / PRACTICE**

Cycle 2

- ROAP
- ROAP
- ROAP

**LANGUAGE, DISCOURSE, WAYS OF KNOWING**

Cycle 3

- PAOR
- PAOR
- PAOR

**CODE**

A = Act
P = Plan
O = Observe
R = Reflect
The Problem of the Problem

In the first formulations of a topic of interest my initial concern was women, nurses, and change. The early theoretical explorations of this topic, was mainly concerned with adaptive organisational change. A review of the literature at that time revealed some promising perspectives. The work of Jenner and Jenner (1991) on emotions and moods in organisations, Micklin and Choldin's (1984) discussion of sociological human ecology, and Clarke's (1972) case study on action research and organisational change all provided revealing insights. However, Goodman's (1982) discussion of organisational change was the most fruitful, revealing three major themes which were considered appropriate at the time. The themes were: population ecology perspectives, organisation/environment relationships viewed from a phenomenological perspective and adaptation within organisations. It seemed that change was not an event, rather more like a process and this area fitted well within the framework of social ecology. These explorations although interesting were eventually to have little direct relevance to the eventual topic of study.

Walking together and choosing the collaborative path.

When the group of self nominated women, clinical tutors, from within the organisation met together to discuss the broad topic of women, nurses and change, what eventuated from the first
meeting was a totally unexpected event. It appeared that they were deeply concerned with issues related to the implementation of a problem-orientated curriculum in the experiential context. I felt compelled to stay with the group. This was a 'real problem', it was authentic. But I struggled with curriculum as an area of study. I was neither interested or particularly knowledgeable in this area of education.

Authenticity
In the Action Research Reader (ARR) (1988:253) Brock-Utne's (1980) article entitled 'What is educational action research' cites Klafki's (1967) discussion of this question. She indicates that one of the main characteristics of educational research is that it ... 'seeks to further the solution of practical educational problems.' Further to this Grundy and Kemmis (1981 in ARR 1988:330) also note that people are motivated to examine problematic practice especially those for which practical action is possible. They also go on to discuss the relevance and importance to participants feeling a sense of ownership over the project. They suggest:

The issue of initiation is related to that of ownership of the project. Where the initiative in a project is taken by participants, they are more likely to feel a sense of responsibility and 'ownership' towards it. If participants do not feel they own the project, ... the knowledge being generated is not authentic. Even if a project is initiated by a facilitator, it is important that ownership be transferred to the participants. (Grundy and Kemmis 1981 in Kemmis and McTaggart 1988b:330)

Hall (1979 in Kemmis and McTaggart 1988b:289) in a discussion of participatory research further supports this position, 'The problem ... he states ...' originates in the community itself and the problem is defined, analysed, and solved by the community.' ... facilitating ... 'a more accurate and authentic analysis of social reality.'
Speaking in terms of the relationship between knowledge, reflection and action, Carr and Kemmis (1986) consider that authenticity results when personal knowledge is realised in the context of rational reflection on deliberate and thoughtful action.

And finally, in my own personal context, Sandra Harding’s (1987) discussion of Feminist research was highly relevant. She suggests that the problem under study must be relevant to women’s own perceived problems rather than providing information or data for beauracritic organisations. The other aspect of this was related to dealing constructively with this problem. I was aware that I had two choices. On one hand I could bring the problem to the attention of the head of the programme knowing that I would probably be asked to take some responsibility for dealing with it, therefore increasing my work load. Or, on the other hand, take on the problem as a challenging and authentic action research project. It was the reality of the problem, the genuine concern of the group members and my need to avoid a further increase in work load that became the criteria for deciding to stay with the topic related to curriculum issues in experiential learning.

The actors/stakeholders

At this point it is important to note the characteristics of the group. We are women and nurses employed by an academic institution to carry out the teaching and supervision of student nurse learning (ratio of teacher/student
1:8) in the experiential context of the health care institution and within the academy.

The length of time each member of the group had been working in a tertiary institution and associated with this particular curriculum varied. Two members of the group had been working for 6 months in the institution previous to commencing this research. And, three members had been involved since implementation of the curriculum at the beginning of 1989 (eighteen months) with one member having been an academic for two years prior. Our experience and knowledge of, and time working in academia was therefore limited. We had experienced limited orientation both to the position and the institution. The organising framework for the curriculum was new and very different to any other conceptual model we had implemented.

However the group was not static but rather dynamic, responding to several major personal life crises and stresses. This characteristic highlighted the lived experience of research contextualising it in the every-day-ness of life. A close colleague and friend of several members of the group was dying. Two particular members were caring for her during this process. We were all caught up with and effected by this process. Her eventual death was to effect the whole group. Also the father of one of the pair caring for the dying colleague died suddenly and in traumatic
circumstances during this research. The mother of another member of the group also became seriously ill. As a consequence of these events two members of the group withdrew from the research at different stages of the third cycle. A new member was invited to join the group at that time and participated in the third cycle of the research. These lived experiences effected the group dynamics, membership, energy and commitment to the research.

Action, research or both.
'You are invited to meet together with other members of staff in an exciting new group whose aim is the formation of an action research group. I have enclosed some information on action research to help clarify your thinking on the topic. However, it is written by action re-searchers who have been mainly involved with education...But, it does summarise fairly well the nature of action research and is an excellent place to begin.'

And so began my letter of invitation.
Eight women attended the first meeting.
And, to my dismay, as we focussed on identifying a thematic concern, it became obvious that curriculum was the key issue. At this point the ethical context of collaborative research emerged and so began my journey towards an epistemological/ontological understanding of ethical research in critical social science. Having identified the broad area of curriculum implementation in the context of experiential learning the first few meetings of the first cycle attempted to identify the thematic concern. This was attempted by referring to Appendix A
Finding a Theme: The Aristotelian Table of Invention in Kemmis and McTaggart (1988a:91-99) This was a Table of Invention utilising Schwab's commonplaces in education. These were teachers, students, subject matter, and milieu. And, as Kemmis and McTaggart state, 'this Appendix cannot guarantee anyone that it will find them a theme for an action research project' (1988: 91). And, in fact it did not for this particular group. This was the reconnaissance phase (Kemmis and McTaggart 1988a) or Fuzzy phase that Bob Dick (1990) refers to which is an attempt to gain some clarity on the domain interest. The group decided that the thematic concern was related to putting theory into practice but we just needed to be out there doing it. It was therefore decided that the action research cycle which occurred over the rest of second semester 1990 would be concerned with identifying the how, when and what of the milieu (organisational culture and socialisation) and the how, when, where and what related to the student and teacher. As the 3 cycles proceeded it became clearer that we were concerned about the social relations, practice, language and discourse of the curriculum within the organisational culture of the practice setting. Ethics approval for the research was obtained from the participating practice settings. Discussions also included the role of the critical community in action research. By the time the fuzzy stage (Dick, 1990,
1993) was completed the group had settled to 5 members. The first cycle consisted five fortnightly 1-2 hour sessions, the second cycle nine 1-2 hour sessions and the third five 1-2 hour sessions. These sessions coincided with the academic semesters between spring 1990 and spring 1991. The critical self-reflective discussions were taped, apart from those in the fuzzy stage where notes were taken instead.

Analytical Approach

The analytical approach is Dialectical deconstructive-reconstructive analysis of the taken-for-granted, the myths, contradictions and ideologies of the social relations, practice, language and discourse, and staff development. As I have suggested earlier, critical social science does not separate the analysis from the aim and the purpose of the study. Dialectical method conceptualises the totality of the natural and human worlds in terms of contradictory and distorted phenomena which are outcomes of the dynamic and changing interrelationship of whole to the parts in the process of moving from what ‘was’ to what ‘is’. It is through critical self reflection and dialogue that new meanings are constructed. Therefore dialectical method is a praxic process.

For critical social science research:

...science as the basis for understanding the social world, is not the construction of causal laws, but of a deeper understanding which goes beyond surface appearances and relates parts to the whole. As such it differs too, from phenomenological approaches in relating its essentialist analysis to the social totality. This process is one of deconstruction and reconstruction. (Harvey 1990:31)

On the other hand Bookchin is critical of the reduction of the dialectic to method. In discussing the concept of ecological thinking he very sternly advises against
such a move suggesting that ‘it distorts the very meaning of dialectic’ (1990:174).

The analysis has been carried out both horizontally, that is within each cycle, and vertically through each of the three cycles (Harvey 1990) And, this was not an easy task. There is no one way to carry out this process as I discovered. It is unlike positivist analysis where the notion of an objective world allows theory to be imposed upon the data.

Lee Harvey (1990:29) commenting on this process states: The deconstructive-reconstructive process which is the heart of dialectical analysis involves a constant shuttling backwards and forwards between abstract concept and concrete data; between social totalities and particular phenomena; between current structures and historical development; between surface appearances and essence; between reflection and practice.

In terms of practicalities I then transcribed cycle 1 taped sessions. A tentative analysis of cycle 1 was carried out by identifying core concepts situated in the dialogue. I then presented this analysis to the other members of the group to check the genuineness of the interpretation. One complete session was involved in further deconstruction-reconstruction of the core concepts with models of relationships diagrammatically constructed by all the participants.

In critical social science research the identification of the core concepts is not a once and for all fixed decision. Rather the very process of deconstruction-reconstruction means that conceptual
trustworthiness is established through refinement by continual and dynamic analytical processes (Harvey 1990).

*Cycle 2 sessions were transcribed and each session's dialogue was summarised by myself. Again, before the commencement of cycle 3 another session involved a check with the group for trustworthiness of the summary. Due to time constraints no analysis was carried out at this point. Cycle 3 was transcribed, core concepts identified and written up as a paper for publication by myself. The final session of this action research occurred in December 1991. It involved a check on this paper as trustworthy and a review of a short story I had written. The story related what I believed we had gained from the process and outcomes of this research. I also asked the group if they would like to bring their own story to the group as well. The overwhelming wish was for dialogue. It was within the process of interaction and exchange of ideas and critique that it was felt the most could be given to the research. It was in this last session that the analysis of cycle 3 was rejected by the group as being too descriptive and lacking in critical analysis. It was not trustworthy or genuine. It did not represent their story.*

It was this experience which sent me back to further deconstruct-reconstruct each cycle of the research. This involved a re-listening with a closer ear to the tapes from each cycle. The consequent
making of notes on how things were said and not just what was said identified my role in the research process, the laughter and the role of humour, the connections between the parts and the relationship of the parts to the whole. A refining of the core concepts occurred by rethinking identified key themes that I had numbered in the margin of my previous transcriptions.
Although the aim was predominantly critical as suggested above we tended to move through technical (positivist) practical (interpretive) and emancipatory (critical) cognitive interest levels at different times in the three cycles.

The first two cognitive interest levels are fundamental for the third. One must understand what is to be changed and how to do that in order to initiate the process of change. The difference is located in the focus.

An extract from some documentation at that time records my reflections.

'Originally we were carrying out technical action research, mainly because of the groups lack of knowledge, and the unfamiliarity with the concepts. My role was very teacher/facilitator orientated. I tended to suggest or circulate relevant material, group members would look to me for confirmation of ideas. I arranged meetings, set times and strategies. Although there was some discussion, I tended to hold the central focus. The last two meetings has seen a move away from this with more emphasis on members of the group giving input, suggesting strategies and making decisions. In fact it was the members decision to carry out the above strategy with me suggesting that I would give them a relevant article on 'Debriefing as a Learning Experience'. I believe here we have moved on to the practical style of action research as described by such researchers as
Kemmis and Grundy. I also feel that we will evolve towards emancipatory action research as described by Kemmis. My reflections are also supported by Kemmis and Grundy in that I feel that at various stages of the cycles, especially associated with an unfamiliar area that I will again become the main focus within the group and that this will co-exist with an emancipatory action research cycle.'

In the first cycle the major strategy discussed was the setting of goals, both teacher and student learning goals and to examine the factors which assisted or militated against their achievement and to implement strategies which improved our practice in assisting student learning. In looking beyond the taken-for-granted it could be seen that we were doing more than negotiating curriculum implementation in the practice setting, and performing a curriculum evaluation. We were in fact struggling with a curriculum that begged important questions about what constitutes nursing knowledge, who has the right to produce it and impose it, in what cultures can certain types of nursing knowledge be imposed and what are the consequences of an inappropriately applied nursing epistemology in which those exposed to it are ambivalent or antagonistic to its ideology, purpose and outcomes. Firstly, what became apparent was the dualistic relationship between clinical practice and the academy and the nature of the social relations within that context. Inherent in this dualism was a dialectical tension which affected teachers and students ability to 'fit in' and the quality of the teaching/learning situation.
A disembodied definition of dualism suggests it to be 'the state of being dual or consisting of two parts; division into two' (The Macquarie Dictionary 1987:550). From a feminist perspective Nancy Hartsock in an essay entitled 'Money, Sex and Power: an essay on Domination and Community' (1981 in Humm 1987:56) argues 'that dualism, along with the dominance of one side of the dichotomy over the other, marks phallocentric society and social theory.' Hill (1991) in a discussion of the dialectic suggests that the oppositional view of the dialectic, is situated in the Socratic dialogue. Presenting a different view she argues for the Marxist view of the dialectic.

The essential view of the dialectic as used more fruitfully by Marx ... involves however a process of perpetual change where the thesis itself produces its own contradictions. Within this view of the dialectic the antithesis emerges from within the thesis; antithesis is therefore intrinsically connected to the thesis, and it is out of the dimensionality of relationship (as opposed to undirected opposition) that synthesis is cast, this synthesis becoming in turn a new thesis producing its own contradictory antithesis in a continuous process of 'becoming' (Hill 1991:45)

This is reminiscent of becoming-what-should-be, the Hegelian concept that Bookchin also talks about in dialectical naturalism. Contrary to the above Marxian concept Bookchin (1990) indicates that it was Engels rather than Marx who put forward the idea of the dialectic. He is outspoken in his comment that 'dialectical philosophy, properly conceived and freed of vulgar Marxian presumptions, is an on-going protest against the myth of “methodology”: notably, that “techniques” for thinking out a process can be separated from the process itself.' (Bookchin 1990:174)

*It is in this context of the dualism and dialectic that the horizontal and vertical analysis of the three action research*
cycles is presented. It was approximately halfway through the 1st action research cycle that I began to realise that we were 'finding a voice'. At that time I referred to this as staff development as the emergence of voice was a gradual process. I needed to 'check' with everyone. Were we all aware of this process?
Chapter five: Women's Voices in the Academy
Heart like a Wheel.

This is a women's voice
speaking a women's life
singing a women's song
dancing and weaving
a women's way in the world.
sometimes,
quietly.
sometimes,
loudly.
sometimes
pushing gently
leaning
into the winds of oppression.
sometimes
standing still,
a formidable force
passionately
standing still.
sometimes,
wailing and crooning
echoing
a million women's voices
forming and reforming the connections,
sounds which are ourselves
yourselves
the wind
the trees
the earth
river
sky
sea.
Listening always listening
an ear to the ground.
Weaving always weaving
hands on the loom.
Caring that the web
is broken.
This diagram represents our activities in professional development and their relationship to the three cycles of the research.
Tutors are insecure, untenured and poorly paid. ...They ...
become locked into a high class-contact mode which hinders
the research and publication that would allow them to
escape. The problem is cyclical. (Wilson and Byrne, 1987:110)

Action research as professional development to some extent flies
in the face of the positivistic emphasis on large scale funded
research as a measure of professional standing. Apart from Zuber-
Skerritt (1987) who utilised action research as a mechanism for
staff development in the context of tertiary teaching in Australia
it would appear that this is a topic has had little general interest or
support. In fact Zuber-Skerritt (1990) in a discussion of this topic
maintains that Elton’s statement in 1977, that staff development
in higher education is in need of direction, remains relevant today.
In support of action research as staff development she states:
My own experience suggests that university teachers are the
most effective people to do research into their own teaching
practice and to publish their results in a language that is
easily accessible to their peers. (Zuber-Skerritt 1990:141)

Ortrun Zuber-Skerritt (1990,1991a,1991b, Perry and
Zuber-Skerritt 1991) who has written extensively on
this topic has been recently criticised by several
academics (Whitehead 1992, Hales 1992) for what is
viewed as an essentially positivistic approach to
professional development of academics.

Although, a careful reading of her (1991a:125) work does indicate
that she has embedded her action research in the interpretive
paradigm. Interestingly, she also goes on to comment that action
research in the critical paradigm has remained essentially
unexplored in higher education. Jack Whitehead is one of the few
academics who has researched his own educational practice and
management in the tertiary sector at University of Bath in Britain.
His action research method is embedded in an existential
dialectical methodology where professional development is
contextualised by a ‘lived educational theory’ (Whitehead 1991:
436).
There has, in the last couple of years been a proliferation of academic papers concerning reflective practice and action research in higher education, but very little of this work considers the context of academic professional development (Colins and Chippendale 1991, Reflective Practice in Higher Education Mini Conference 1992, Bruce and Russell 1992). Although, Zuber-Skerritt (1990) in a discussion of Argyris' theory-of-action does cite the work of Dick and Dalmou (1990), Rutherford and Flemming (1985), and Flemming and Rutherford (1984) as examples of the application of action theory to professional development in higher education.

However, the work in the area of secondary school teacher's professional development is more extensive and only a small number are cited (Kemmis and McTaggart 1988, Winter 1989). Further to this the first Master of Science degree in Social Ecology to be awarded (Ramsay 1991), examined the professional development of a group of NSW secondary school teachers of Agriculture, utilising critical action research in the implementation of curriculum change.

Borthwick (1982:384) in a discussion of curriculum development and teacher's professional development notes Kennedy's (1980) point that, '[C]ollaborative inquiry as a research strategy is not, under most circumstances, viewed as a vehicle for professional development.' Researching some 10 years ago Borthwick's (1982) comments on secondary school teacher's professional development indicating that a deficit model of teacher development was the most prominent. It could be said that this approach is still prevalent in most staff development programs in higher education today.

'Un-learning Not to Speak'. (Piercy 1973 in Lather 1984:52)

[In all applications for promotion, heavier weighting is given for research, for involvement in externally funded large scale projects, and for publications, than for outstanding teaching. (Wilson and Byrne 1987:112) Academic staff development as action research in the critical paradigm is somewhat of a contradictory statement. In the same
way that it is inappropriate to apply positivist's standards of rigour to new paradigm research so the linking of the term staff development with the critical paradigm brings a degree of paradigm confusion and conflict. Staff development has also been termed professional development. The term professional is problematic as Ramsay (1991) points out. Both the terms staff, and professional development, imply growth but at the same time maintaining the status quo.

Although Zuber-Skerritt (1990:161) speaks in terms of critical education science and emancipatory action research she defines staff development in the narrow sense ‘...as professional development of university teachers with the advice and assistance of educational advisors called staff developers’ (Zuber-Skerritt 1990:149). However she provides a critical stance on her role as staff developer by indicating a collaborative relationship where teachers are ‘...creating... knowledge themselves through experience, self reflection and critical debate...’ (Zuber-Skerritt 1990:149).

Speedy (1990) is one of the few Australian nurse academics who has written about nursing staff development in the tertiary sector. She raises some relevant issues concerning the title for professional academic growth and development. Speaking of the confusion over the use of the terms 'professional development', 'staff development' and 'faculty development' she suggests that '[I]n the Australian context, staff development can refer both to academic staff and support staff' (Speedy 1990:8). Faculty development is Speedy's preferred term as it is common in the North American literature and she sees a trend towards the adoption of this term in the Australian literature. (1990)

Allen (1990:1) in her study of Women Academics in Australian Universities comments:

Women academics are less likely than men to enjoy tenure with its associated job security, superannuation, study leave and maternity leave. One in 16 university academics is a full-time, tenured women; one in two university academics is a full-time tenured man. Women are concentrated in the lowest paid ranks of academic employment.
In fact Allen (1990:5) indicates that previously it was believed that the way up the career ladder in universities was by ‘doing time’ in a sublecturing position. On the other hand Karmel (in Allen 1990:6) as late as 1982 indicated that tutors were viewed as having no academic career. According to Parson’s (1972 in Allen 1990:5) the path to success in academia begins as a research student rather than a tutor. It would seem, as suggested by these researchers, that a promotion to lecturer from tutor cannot be achieved on academic merit in the same way as lecturers can be promoted to more senior positions. Further to this Allen (1990:9) states:

There is a strong association between academic rank and the likelihood of attaining tenure. Tenure was least likely in sublecturing ranks where women are concentrated... Their poor representation in tenured lectureships is disturbing because “lecturer” is now seen as the bottom rung of the academic ladder for promotion to higher levels.

Although nursing like teaching and secretarial services is predominantly composed of women, the forces operating on women and nurses within the predominantly male hierarchical and beauracratic organisational structure of the university is doubly oppressive. Speedy (1990) is one of the few Australian nurse academics writing and researching in this area who considers the role of gender and socialisation on the academic and professional development of nurses teaching in the tertiary sector. In a discussion of women nurse academics she suggests that although '[N]on nursing faculty and administrators may speak positively about nursing faculty... rarely are they rated high on the more general academic status system'(Speedy 1990:18). Identifying the scope of the problem Speedy (1990:21) notes:

Prevalent social values, nursing faculty's relative lack of power and influence in the tertiary setting, and their previous socialisation, all militate against the development of an esteemed status accorded other groups in tertiary education.
What emerged from this research was not just a change in our understanding of the what and how of our engagement with curriculum but an authentic process and outcome of finding voice and being heard in the academy. It was a context of em-powerment. That we were friends, colleagues and all trying 'to make it' in academia is of no doubt. The decision to join a collaborative research group was not only a decision to help a friend and colleague, myself, make a step in the right direction for promotion and increased professional recognition but it was also a need to 'find voice' in a culture that traditionally paid little attention to untenured female nurses at tutor level. The context which interfaced the university and the health care setting was one which was not only insecure and pervaded by powerlessness but stressful and undermining in terms of confidence and self esteem.

'...because I actually realised that this clinical educator business is highly stressful - much more stressful than ... when I came to the job I had no idea - never done it before... had not had all that much experience.'

Added to the lack of acknowledgment by other academics is the difficulties created by the 'insider-outsider' context for nurse academics who also teaching in the clinical setting (Speedy 1990, Elliott 1988). Not only are they invalidated in the academic arena but there are some in the service areas who view nurse academics as idealistic, out of touch with reality, out of date in relation to clinical knowledge and living in an ivory tower untouched by the everyday problems within health care institutions (Lawler 1984, Street 1990).
Have you ever?

Have you ever
denied your self,
said
you would rather work with a bunch of men,
believed
that men make better leaders than women?

Have you ever
felt
unworthy of friendship, a kind word, a shared joke,
found
it difficult to accept compliments?

Have you ever
said
we are our own worst enemy,
felt
the need to control everything
rigidly holding on,
blamed
your friend and colleague,
felt
fearful of their success?

Have you ever
rocked the boat?
Have you ever
said
you didn't agree,
refused
to change your story,
let
yourself accept a compliment,
felt
strong and cared for.

Have you ever
rocked the boat?

Have you ever
Laughed,
when they said,
You should have gone to med school,
Cried,
for a colleague wronged,
Welcomed
change, friendship and challenge,
Resisted
power over and
Encouraged
power within.

Have you ever
rocked the boat?

1. My writing of this poem was inspired by the work of Peggy Keen (1988) and her paper entitled 'Caring for Ourselves' which she presented at the Caring and Nursing explorations in the feminist perspectives Conference.
Chapter six: Speaking the Unspeakable.1.

1. I am indebted here to Jenny Howe and her workshop of that title which I attended at the Critical Theory and Nursing Conference in Dec 1991.
Our preparation for life and career is most often weighted towards what-to-be in the world rather than how-to-be in the world. (Schuster 1992:1)

The unspeakable is complex. It is shrouded in the silence that women and nurses keep. Generally nurses and women do not rock the boat by breaking the silence over personal situations and/or the way in which they are constrained by oppressive structures. The discourse is structured in such a way that not only do they fail to talk about it but they also fail to recognise that it is unspeakable.

Silence renders our experiences invisible and we cannot heal what it is that we cannot hear or see.

Like all partial discourses, there have always been those who have been subversive and spoken out naming what is hidden and silenced. But overall, like nursing’s response to feminism, this has been partial, and has resulted in the perpetuation of a discourse of divisiveness, distrust, dualisms and lack of validity accorded to difference.

As the research progressed I was to realise just how much the fear of, and lack of validity given to difference influenced the nature of the social relations.

The Nature of the Social Relations

Although Lawler (1984:xii) was considering the resocialisation of clinical nurses into the culture of nurse education, and their marginalisation, isolation and idealised state, her following comment is somewhat prophetic.

This study is written at a time when large scale plans are proposed in some Australian states to close hospital schools of nursing and transfer the responsibility for nurse education to the tertiary system.
While it may appear reasonable to assume that what is described here will cease to exist when hospital schools close and nurses are educated in the tertiary system, the North American experience suggests otherwise. (Lawler 1984:xii)

The relationships within the organisational culture where education and clinical practice interfaced were found to be conflict based, alienating, hierarchical, dualistic and dialectical. A paper presenting the processes and outcomes of cycle one of the research had been accepted and presented at the Science Reflectivity and Nursing Care:exploring the dialectic, in December 1991 (see Appendix 1). After the workshop several people came to me following the bringing forth of our voice and thanked me for finally saying what had to be said. Their experiences were no longer invisible and non-validated but real and substantial, we were heartened by the validating and grateful response from the conference audience. Someone is finally talking about it they said. You are not alone they said. Your experiences are ours. Now that the words had been spoken the process of healing could begin. The exploration of the experience of implementing this curriculum was an attempt to understand the nature of the social relations and the way in which the various forms of social relationships affected the quality of the teaching/learning context. What we were concerned with was what Kemmis and Stake (1988:80) refer to as the discourse, practice and forms of organisation (social relations).
The following are some of the women's voices regarding the social relations.

Hospital Culture
'There is a hierarchical structure, and therefore, formality, power, status and authority are vested in a position.'
'There is a strong medical culture.'
'Controlling behaviour is common.'
'There is a large emphasis on time management and the urgency of situations. 'In situations where RN'S had greater responsibility and confidence there was a less obvious medical and hierarchical culture demonstrated.'
'There was some degree of horizontal violence'

University Culture
'It is less formal and respect derived from knowledge and the quality of the interaction. As there are different ways of perceiving professional behaviour, we did not reinforce the same types of behaviour as some people who possessed different views on professionalism.'

On one hand it revealed both teacher and student feelings of alienation in the practice culture, double messages, hidden agenda's, hierarchical power relationships and super nurse expectations and on the other hand our feelings of ineffective teaching/learning situations.
'To some extent this was a result of the practicum arrangements of limited exposure to the clinical setting, (half to one day a week); the method of student allocation to client care (therefore learning); the historical dualistic relationship between education and clinical practice and aspects of oppressed group behaviour.
How then can the horizontal violence and emotional dumping be explained?
A fundamental feminist premise contends that nurses are an oppressed group. This is a double oppression in that they are women (93% in Australia) and nurses. The enormous extent and insidious nature of this colonisation is such that women are unable to recognise it operating within their own personal life and within the structure of the health care institution. To some extent this structured misogyny is a function of the family they were raised in, the school they attended and the institution in which they work.

As Howe (1991) comments:

'Power relations in nursing practice are not only defined in relation to patriarchal underpinnings and rigid organisational structures, but noticeably a major feature is women against women.' (Howe 1991:57)

Based on this, several models situated within critical social science, will be compared to partially deconstruct the Unspeakable.

The Hospital Family
A model which explains the hospital family has been proposed by several researchers (Ashley 1976, 1980; Game and Pringle 1983). And, will be utilised here as an appropriate framework to discuss oppression and dominance in this predominantly female group of health care workers.

Nursing today has inherited a way of being in the world which is an extension of the family household. Game and Pringle suggest

...nurses experience a continuity in the shift from family to their work situation; even if the hospital represents an escape from the family, it is another institution where the environment is restrictive.(1983:101)

The now Director of Nursing (several years ago known as the Matron) can be likened to Mother who had ultimate authority but was subordinate to the Consulting Doctor or symbolic Father. The nurses may be viewed as daughters and the junior doctors as sons but also rivals to their sibling sisters and finally the patients as
little children. The sexual politics and therefore the nature of the social relationships within this symbolic family operates to...'ensure medical authority' (Game and Pringle 1983:106). It also encourages competition amongst the subordinate group for dominant group approval. One of the predominate characteristics of oppressed groups is the divisive nature of colonisation and the degree to which it maintains power differentials and controls the subordinate group.

The previous apprenticeship training instilled 'rigid discipline, fear of punishment, and denial of any independent thinking...' in most nurses who were exposed to this system of education (Game and Pringle 1983:102). The socialisation that nurses were exposed to within this system tended to be characterised by thinking which encouraged dichotomisation and particularisation. Power over, has been viewed as a goal worthy to be achieved. This created a situation where power was exercised as control over people and all aspects of the environment including events and things (Chinn and Wheeler 1985).

**Horizontal Violence.**

Susan Jo Roberts (1983) has utilised Freire's theory of oppressed groups, feminist theory and nursing literature in writing her classic work on oppressed group behaviour and its implications for nursing. Other nursing academics such as Chinn and Wheeler (1985) Breen (1988) Speedy (1987) have also written on this topic drawing heavily on Robert's analysis. It is intended to refer to this classic work to explain the behaviours displayed by women who are doubly colonised.

The characteristics identified as being typical of oppressed groups are also typical of nurses' behaviour. Roberts explains the situation in the following way. The norms and values of the dominant group are valued and seen as positive whereas the characteristics of the subordinate group are viewed as negative. As the dominant group possesses the power to enforce these values they become accepted as correct over time and...'contribute to the maintenance of the status quo' (Roberts 1983:22). These norms become internalised by both the dominant and subordinate group.
And, a constructed belief system evolves whereby the subordinate group adheres to the belief that adopting the norms and values of the dominant group will accredit them power and control. This is exemplified in attempts by nursing leaders to professionalise (Speedy 1987). The path to professionalisation has led some nurses to adopt dominant male cultural values such as decisiveness, objectivity, positivism and emotional detachment rather than nurturing and valuing the positive feminine characteristics such as intuition, caring, warmth and empathy. Chinn and Wheeler (1985) cite nurses belief in the acquisition of medical technical and administrative skills as mechanisms to achieve increased status and power. This is in fact the idea of assimilation and leads to marginalisation which results in self-hatred and low self esteem. Roberts acknowledges this and states:

If the dominant culture does not value the subordinates' characteristics the tendency is for the subordinates to feel hatred for themselves. If they are unable to avoid the presence of their devalued characteristics, self-hatred and a resultant low self esteem develop, which perpetuate the cycle of dominance and subordination. (1983:22-23)

As the subordinate group is unable to express to the dominant group their anger and frustration arising out of with their lack of validity these feelings are internalised creating a submissive-aggressive syndrome. An end result of this self-hatred and low self esteem and submissive-aggressive syndrome is 'horizontal violence'. This internal emotional and verbal violence is a phenomena of paternalistic attitudes, institutionalised misogyny and oppressed group behaviour. The degree to which nurses and women are separated from each other is a function of horizontal violence. The dominant group conquers and divides the subordinate group who then demonstrate negative behaviours towards their own members who are perceived as powerless. Nurses also disassociate themselves from other powerless groups. They fear the authority of the dominant group. Roberts identifies the evolution of a secondary fear. She states ...'as the process of oppression continues, ...the fear of change itself and of alienation of the status quo no matter how oppressive' becomes
internalised (1983:23). This situation also prevents clear identification of a positive role within the health care arena. And, hinders the articulation of and action for change intrapersonally, interpersonally and in state, national and international health care settings. Internal and external alienation separates them from any constructive support system which in turn perpetuates the cycle of oppression.

In the process of researching nursing practice Annette Street (1990) uncovered several maxims said by clinical nurses to be characteristic of some although not all nursing personnel.

Nurses do not read about nursing.
Nurses do not think about nursing.
Nurses do not talk about nursing.
Nurses do not write about nursing.
Nurse administrators do not support clinical staff.
Nurse educators are academics who have lost touch with practice. (Street 1990:18)

Nurses she suggests ...'manifest the characteristics of other oppressed groups by viewing themselves negatively and developing a fatalism that rejects evidence to the contrary in order to maintain and perpetuate the accepted myths'(1990:18). Freire refers to this as 'myth-built fatalism' which ...'strangles the capacity to bring about change' (Freire 1984:219 in Street 1990:18).

A model which adapts Boulding's (1981 in King 1989) concept of otherness, Warren's (1987) patriarchal worldview and Robert's (1983) conceptualisation of oppressed group behaviour is presented in Figure 8 to provide an integrated theoretical explanation for the forms of social relationships that exist between those that 'do' nursing and those who 'talk' about nursing.
Figure 8. The Creation of 'Otherness'.

VALUED AS POSITIVE

- Dominant group views and behaviours
  - Internalised
  - Power to enforce these values

NOT VALUED

- Subordinate group views and behaviours
  - Internalised
  - Constructed belief system of power and control

- Value-hierarchical thinking
- Logic of domination
- Conceptual trap

Creation of normative dualisms 'I' vs 'not I' or 'other' teacher vs clinician women vs women

Justifies the dualistic relationship

Perpetuation of the oppression of 'otherness' the 'not I'
This discussion contextualises oppression within the personal and ignores the structural constraints on autonomy and freedom. It is a little like a 'blame the victim' approach which denies the power of structured misogyny. The end result is the absorption of the discontent into the person with no recognition given to the role of hierarchical and oppressive organisational structures.

On the other hand we named those powerful structures within the organisation which encouraged and maintained these attitudes. The importance of emancipatory change is that it is directed towards dismantling oppressive structures. To some extent this was an impossible task but at least by naming and understanding it we were speaking the unspeakable, hearing the unbearable and making visible the invisible.

"They are extremely busy"
"Stress within the ward... rostering, Morale ... [is low]"
"administration is not supportive"
"They are very frustrated at the moment ... with all the organisational changes."
"they are under pressure to go and do a degree, half are studying as well... with a family, husband"
Figure 9. Women's Voices in the Academy: Finding Voice and being Heard. The Conference Paper.

Without normative data on publication rates, or any system to assess quality, it can only be concluded that the relationship between publication and academic merit is notional at best, and may show sex difference.(Allen 1990:23)

As suggested earlier, on becoming aware that a conference entitled Science Reflectivity and Nursing Care: exploring the dialectic, was to be held in December 1991, we decided to submit a collaborative paper. At that point the aim was to explore the first action research cycle in the context of social ecology. The substantive issues were nursing knowledge and nursing diagnosis. It was subsequently accepted, presented and published. In the time between the acceptance and writing of the paper we in fact discovered that the substantive issues could not be viewed outside of the social relations in which they are embedded. The decision was therefore made to present the nature of the social relations and the collaborative strategies implemented in the context of social ecology as transformation of practice. Although not a publication in a refereed journal, for most of us this was our first public academic contribution and we were heartened by the validating and grateful response from the conference audience.
In Australia, as in the USA there has been extensive emphasis on research and publication as a measure of eligibility for promotion and tenure (Ostmote and Sparke 1990). And, although the documents pertaining to tenure and promotion in this country are replete with statements concerning the emphasis on teaching excellence there remains much doubt about its reality. There is a trend towards recognising teaching excellence the in North American tertiary sector and this has been prompted by a devaluation of the undergraduate degree (Ostmote and Sparke 1990) with a crisis created by academics who prefer to be predominantly involved in post graduate programmes and research. The emphasis though, is on scholarship which is determined by research and publication. Several North American researchers in this area indicate that over the more recent years there has been increasing emphasis on research, publishing, and increasing qualifications in faculties of nursing (Kruger and Washburn 1987, Haytes 1984 in Ostmote and Sparke 1990). Further to this Speedy (1990) contextualises Faculty Development in Australia in her comment that:

It should be kept in mind that Australian tertiary nursing is in its infancy compared to North America. This suggests that there would be lower levels of development and experience among Australian nursing faculty at the present time. (Speedy 1990:13)

*This was the very beginning of the journey on the road, or as some would say, treadmill, of academic scholarship.*
Chapter seven: Social Ecology as Transformation of Practice and Social Relations
'the process of a dialectic encourages one to continuously reconnect dismembered dualisms.' (Russell 1989a:16)

One of the problematics revealed in the first cycle was associated with a teacher/student ratio of 1:8 and the need to provide a quality learning experience which did not render client safety problematic.

We had discovered features of a non-collaborative decision making process concerning student allocation to client care, and therefore learning experience, had led to features which were increasingly stressful to teachers, students and registered nurses. The stresses concerned questions related to who was finally responsible for client care, teachers inability to actually teach due to high client care responsibilities and high levels of student anxiety. The end result was poor quality relationships for everyone together with a poor quality teaching/learning context.

Before this research we did not give a name to the involvement of the registered nurse in the education of students of nursing. As a consequence of this research we identified a role and our relationship to that role. We spoke about the relationship of registered nurse, student, client and clinical educator in terms of focus. Each situation was defined by the degree of input that either the registered nurse or educator had in the teaching/learning
context. This was totally informal and not a stated part of the curriculum.
A diagrammatic representation of the relationships between teachers, RN's,
students and clients, before and after collaborative strategies were implement
is demonstrated in Figure 10. This diagram was constructed by the research group in the last session of the first cycle. The relationships before collaborative strategies were implemented is represented by System A. System B represents the relationships after the implementation of collaborative decision making strategies.
The difference between the models in each system represent differentiating factors that were characteristic of the particular health care institution. These were often structural features of the organisational culture.

System A Characteristics in Terms of Relationships and Teaching/ Learning.

Our perceptions of RN reactions to the difficulties within the System A context is revealed in our comments.

"Some registered nurses do not believe they have an educative role."
"Some registered nurses carry out complex tasks without involving students in the learning experience."
"Registered nurses did not feel responsible for patient care and at times some did not feel in control of the of the nursing situation."

Our own reactions to the nature of the relationships in System A is reveals in the following comments.
For Us.
'This system created depth not breadth of learning experience.'
"...patient care responsibilities retracts from our ability to meeting students learning needs."
For students.

The following student reactions were derived from reflective debriefing session facilitated by the teachers participating in the research.

"....being supervised was an anxiety producing situation." "...educator was able to more accurately identify problems areas....and therefore ... might not pass practicum.. very powerful role ....and therefore feel more inclined to ask an R.N. when not sure or don't know."
"...educators asked too many questions.."

There were poor quality relationships with educators and RNS.

"... unable to develop a relationship with the educator due to one day/week placement for practicum.'
"...educator demand was high ... teachers were often not available due to educative load and patient responsibilities."

A deliberate move to formalise a more collaborative decision making process to determine student's learning experience was initiated by each of the teachers. An anticipated effect of collaborative decision making was to reverse the previous situation. As suggested earlier these relationships are represented as System B in Fig 10.
Figure 10. Characteristics of System A and B in terms of Collaboration.

SYSTEM A

Pt

RN

ST

SYSTEM B

Code
RN: Reg. Nurse
Pt: Patient
S: Student
T: Teacher

Pt

RN

SYSTEM A

Pt

RN

SYSTEM B

Pt

RN

ST

T

RN

S
In summary it was felt that a 'them' and 'us' situation existed between RN's, educators and students. Educators felt that their patient care responsibilities affected the amount of quality teaching available to students. This was reflected by poor student rapport with educators and RN's and anxiety about the learning experience.

System B Characteristics in Terms of Relationships and Teaching /Learning (see Fig.10).

Our own perceptions of RN reactions are demonstrated in the following comments

"Allows RN to take responsibility for patient care."
"Allows a feeling of control of the nursing situation."
"Staff interactions are more positive."
"Registered nurses do not often call in the educator to perform an educative role."

Our own teaching quality and levels of anxiety are revealed by the following features of our dialogue.

"The work was easier but assessing and teaching more difficult."
"The student was not always exposed to good learning situations and tended to be left to routine boring activities or activities at which they were already competent."
"In this arrangement there is breadth but not depth."
"R.N's. need to negotiate student learning experience more clearly therefore taking responsibility for learning."
"... feel ... more approachable because the pressure of meeting 8 student's needs is removed ... patient care responsibilities are now clearly delineated... there is more flexibility to meet students needs."
"Learning is enhanced when educator not there to watch what we are doing."
".. feel more comfortable when answering directly to R.N ... and.. feel like we can ask the R.N. for help."
"... felt accepted by staff who were kind and developed a level of camaraderie felt we had learnt something at the end of the day."
".. don't have to take responsibility for total patient care, especially the decision making, as the R.N. often gives more direction and help especially with time management."
"The educator is freed up to do more teaching than patient care."

Although we were in doubt at times about the value of the learning experience this is not supported by the students own reflections. On the other hand an understanding of the constraints on quality student learning had led to the initiation of changes. This altered the social context of that learning experience for students which led to quality patient care delivered by those students.
The question we struggled with was: Which is more beneficial for student learning: breadth, depth or both together? It was decided that the most collaborative system achievable within the organisational structure produced the most beneficial results and that the establishment of system B altered the organisational culture which enhanced experiential learning.
Social ecology attempts to unify 'goods' organically at all levels of self, society and nature (Albrecht 1990). These 'goods' are associative and involve cooperation, reciprocity and love. Dissociative qualities such as selfishness, exploitation and authoritarianism are seen to act against these 'goods'. (Albrecht 1990:241)

In terms of System A we perceived that we were operating within the context of hierarchical thinking embedded in a divisive culture where distrust, horizontal violence, anxiety and dualistic relationships were featured at least some of the time. Within the framework of social ecology and ecofeminism these features are viewed as dissociative qualities which act against associative 'goods' and prevent the evolution of a harmonious ecological community. With the move to System B a more collaborative, participatory, caring and friendly context was evolved. An enhancement of positive relations between teachers, clinical staff and students, alteration in the quality of teaching and learning, and reduced student and teacher anxiety was an expected outcome.

Uncovering the Dualisms.

We uncovered several dualisms. One of the first we named was that of clinician/teacher. We spoke of it in several forms, doing/talking, them/us. ‘old view of the educator as policeman ... still influencing ...[the] ...
situation’
'university culture versus hospital culture'
'the feeling that came out of the experience with the questionnaires ... that separation ... the 'them' and 'us'.'

**Reconnecting the Dualisms but Living in the Tension.**

If the Marxist idea of the dialectic being sited within the dimensionality of the relationship of the thesis to the antithesis is accepted then this reconnecting of the dualisms (thesis-antithesis, doing-talking) is the process of creating the synthesis (collaboration).

**All nurses are nursing not actors within it as though nursing existed independently of nurses.**

But what of the contradictory outcomes that Marx speaks of in relationship to the synthesis? It is contradictory and dialectically embedded in the new antithesis.

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A contradiction became evident as we reflected on the synthesis. As successful as this strategy was, later on we were to discover that in many situations the quality of the experience depended very much on individual personalities and attitudes of both those in the health care institutions and the teachers. Therefore adjustments to the collaborative process occurred over the three cycles of the research. It was a dynamic, flexible and precarious process rather than static and inflexible and predictable. Teachers often made decisions concerning the degree of collaboration and with whom the collaboration would occur depending on the individual who was present at the time. The precarious nature of the relationships was frustrating and discouraging at times.
The continual movement between thesis-antithesis-synthesis-new thesis
(contradictory)-antithesis-synthesis in a cyclic fashion created the new dialectic
(See Fig. 11).

The tension was difficult to adapt to at times and all we could do was laugh about it. Our reaction to the frustration and powerlessness to positively influence the situation led to meetings that would just erupt into laughter.

The not so hidden agenda was humour as resistance. This reminded me of a favourite poem by Pauline Long.

If women could speak, what language would they use? Part II,

'Who are those women, standing there and laughing,
Those women standing there, dancing,
Those women, singing, talking, speaking, shouting,
Speaking in some language that some understand
Speaking with eyes and tongue and head and body
Speaking.'

(Long 1979:204-205)
Figure 11. The Contradictory Nature of the Collaborative Process.
Will the 'Real Nurses' Please Stand Up..
In Annette Street's (1990:18) research RN's commented, '[N]urse educators are academics who have lost touch with practice.'

The contradictory nature of this phenomena also was revealed by the interesting finding that once the teachers took on a one day a week consultancy in clinical practice on the weekends but continued to teach students during the week at the same institution the nature of the relationship changed. They were perceived as 'real nurses' with 'real' understanding of the practice setting. On the other hand we also found that once registered nurses in the health care institutions took up tertiary studies both teachers and students were considered resource people who could assist in the negotiation of the difficult task of studying at degree level. But this was not constant and tended to revert to the previous state where emotional dumping and petty picking at students use of first names, state of students dress (whether or not they wore a petticoat) differences in workloads was a phenomena of the dialogue.
Yes, the thesis-antithesis-synthesis-new thesis with its contradictory tension had re-emerged.

Historically there has been a dichotomy between those who practiced at the bedside, clinical nurses (real nurses) and those who taught in the nursing school (theoretical nurses). Lawler in her 1984 study of the resocialisation of clinical nurses to the academic setting indicates that there has been ...'powerful social, historical and political forces which have shaped nursing, and
which continue to do so, and which have contributed to, if not
caused, the chasm between educators and clinicians.' (1984:ii)

It would seem from both Street's (1990) study and our
own that this taken-for-granted reality of conflict
between those who do nursing and those who only talk
about it continues to perpetuate the theory practice
split nearly 10 years after Lawler's ground breaking
work.

Further to this Lawler (1984) in her research found that to survive
in the academy nurse educators were required to be resocialised
into an 'ideal' nurse who was different to the nurse in the practice
setting.

The myth for us was that we had been
socialised into the ideal world of the
teacher. There was role conflict and role
ambiguity. This affected several areas
related to the practice of education and
nursing and our own socialisation into
the culture of the health care setting.
There was a dialectical tension within
our dual role of nurse academic and
clinical teacher. This was associated
with meeting the expectations of the
curriculum and prioritising client care.
On one hand there was the need to
impart knowledge related to the present
learning goals of the unit such as
'relating' when the clients priority was
in the 'exchanging' area.
Dialectic of Curriculum and Clinical Priorities.

The tension created here was fairly complex. It involved several contexts predominantly defined by the relationship between the formulation of nursing diagnosis, prioritisation and the time consuming nature of the process. It was in fact the overlapping space within the relationship between practice and language/discourse. This it brought out in the following observations in the clinical setting.

..."generate ...a lot of diagnosis...do not prioritise..."[RNs]
..."need for prioritisation to keep things in perspective and then it's not time consuming..."[RNs]

For students the context was one of length of placement constancy of staff they interacted with, assessment and the dynamic nature of the clients condition. The student's comments reveal the tensions created to the point of anxiety at times

"The 3rd years said ' depends on the patients condition and how long you've got to care for them'...
..."there's no time for assessment and no time ... to know or become familiar with the client."
..."that it is time dependent in terms of student placement and patient admission..."
...‘the number of nursing diagnosis that can [be] generated”
"the longer the time [have] been able to work with the client or the length of time the client [has] been in both contribute to allow you to generate more nursing diagnosis”
..."the dynamic nature of the change in clients condition and therefore the nursing diagnosis changes.”
..”a few times they’ve said can I work with that RN I worked with her last week.'
The Dialectic of Two Roles.

Because we had been educated in the same system as those in practice, our own socialisation to the hospital culture was very persuasive. And yet we were aware of our own responsibilities as teachers.

'The expectation [was] that in the move to tertiary education we would see ourselves as professionals but this is not happening, instead we are conforming to hospital behaviour. We should be taking risks and generating new theory. Safe practice is of ultimate concern but features of the organisational culture become woven into the practice.'

"What are the priorities here, am I just reacting to my own socialisation as an RN ... being on a busy ward and aware of acute emergencies. Am I in a way seeking out my educational beliefs ... conflict of interests and a conflict of belief systems."

Dialectic of Different Goals.

There was tension created by the different educational and learning aims of educators and students. This was demonstrated in the teacher observation and also the comments by the students in that nursing diagnosis has little meaning. Teachers believed that students learning priorities were directed towards skills acquisition, thereby gaining confidence and reducing alienation and fear and gaining a knowledge of different hospital practices. Students stated that their priorities were predominantly skills acquisition and being accepted in the hospital culture.

..."it's an application really of their theoretical knowledge...which they just talk about [as] clinical skills"
My diagnosis comes from learnt medical terms, I do not tend to think in ND terms"  
"Diagnosis is rarely used and medical diagnosis is most commonly used in the hospital setting"  
"No I don't use NDS unless I have to pass a unit."  
"Don't usually use ND."  
"I relate ND to a client in relation to their non-acute state."  
"They do not talk about things such as 'greater integrity of practice' - never about the patients well being."

The Dialectic of Two Languages.

There was tension surrounding the formalisation of the nursing diagnosis discourse and included care plan documentation/communication. Inconsistencies existed in terms of format, structure of the diagnosis and the language. Although we saw this to be related to the lack of educational input into the practice setting concerning nursing diagnosis on the other hand we were able to see this in the context of responses to theory imposition by the academy. As one of the group commented

"They're trying to do it but only to satisfy the educator's needs...saying look we will give it a go"

This is exemplified in the following extracts of dialogue.

..."use incorrect format... and ...language"  
..."not even using the right diagnosis"  
..."lack of input into the designing of forms"  
..."if it's written on the care plan they [students] can see how it fits"... [used]..." a bit like a check list"
..."don’t use the right diagnosis and they don’t use the right format"
"use two different languages"
..."it’s obvious the problem has been in the implementation..."
..."they don’t have a sense of why they are doing this."

Speedy (1990) is one of the few Australian nurse academics who has developed a model of Faculty Development. Her model includes gender and socialisation as central themes in the personal, organisational, community and institutional dimensions of Faculty Development. Her approach is one that emphasises competencies and skills in a unified model which clearly articulates the tension that exists for Nurse Academics who need to fulfil the roles of clinician and academic, both of which may suffer in the process. This is further clearly conceptualised in Speedy's citing of Van Maanen (1984:217 in Speedy 1990:15-16), in that it is suggested that "leaving one setting for another does not mean that the cultural premises of the first are abandoned for those of the second." Speedy (1990:51) speaks of a 'partial discontinuity' and the need to unlearn the previous identity and adapt to the new role.

Quite often tensions are created within the nurse academic role which is characterised by vagueness and conflicting expectations (Speedy 1990). The role stress, strain and ambiguity that results from this situation has been discussed by many nurse academics and researchers (Fain 1987, Hardy and Hardy 1988, Goldenberg and Waddell 1990, Speedy 1990). Contributing to this tension is an increasing accountability especially in the present context of the Australian tertiary sector. This is a vicious cycle where uncertainty, conflicting role expectation with at times partial socialisation into the new scholarship role but strong socialisation into the old role, contributes to unsuccessful resolution leading to increasing tension. This tension is compounded by differing reward systems which are built on different values and expectations which may also be in conflict. A Canadian study by Goldenberg and Wardell (1990) found increased stress in the educator role was due to increased workloads, managing the clinical component of their role and the emphasis on conducting research.
This situation is similar to role overload which may be quantitative or qualitative. Either not enough time to get things done or that the complexities of the work is such that it cannot be managed regardless of time. (Hardy and Hardy 1988)

A Further Movement Towards Synthesis: Making the Invisible Visible.

Having concluded that curriculum implementation was the general topic, how were we going to go about understanding its problematics, and in the context of social ecology transform the problematics in some positive way? Before this research project was begun a workshop on nursing diagnosis for registered nurses was held at the university at the time of its planned implementation. Also a talk was given at the health care institutions utilised by the student group to prepare staff for the implementation of the new curriculum. Those that implemented the curriculum had not been involved in its development.

The registered nurses in the health care setting who interacted with students and teachers were not employed by the academy to teach or supervise students, and to some degree also felt that they no longer had a role in student education since the move to tertiary education. But the ethics of safe practice demanded that they take on this role when university teachers were not present. And as the cycles progressed it became obvious that there would be a change in the ratio of students to teachers which
would place severe strain on the educative and safe practice aspects within the practice setting. In our reflective discussions we referred to the role of the registered nurse in supervision and teaching of students as a type of preceptor role. Although this was not overtly named as a hidden curriculum by the group we uncovered its taken-for-grantedness and in cycle two implemented strategies which were aimed at naming and formalising this role.

Much discussion concerned strategies to formalise this role for interested registered nurses.

"[We could] ... train people as preceptors and give them a ... badge and pay them a ... bit extra.'

"[Utilise]... joint appointments.'

"[Utilise] ... Centre for Professional Development assessors"

"We decided that the above suggested strategies were not in our power to implement and it was decided to follow through on discussions from the first cycle concerning the concept of preceptors as this was working well in one particular clinical setting.

"Have a look at the places they already use a preceptor model - X which is a total preceptor model, they [students] ... enjoyed ... [this placement]"

In the second cycle a decision was made to hold an educational seminar for interested registered nurses concerning our curriculum. In the reflections of this cycle it was pointed out that registered
nurses involved in this situation may be unfamiliar with the preceptor role. This factor together with data derived from the first cycle which indicated such views as a 'Them and us' situation between nurse academics and clinicians; a split between theory and practice; and horizontal violence directed towards teachers and students partially prompted this decision.

We had also identified that there was confusion over what is defined as nursing knowledge as opposed to medical knowledge, especially as it related to our curriculum.

The above issues motivated the group to consider holding a seminar involving our group and local registered nurses who were involved with student learning. The seminar was aimed at addressing the issues identified above.
Figure 12. Women's Voices in the Academy: Finding Voice and Being Heard. The Questionnaire and Seminar.
Bein\( g \) Heard: Questionnaire Design, Distribution and Analysis and Outcome.

As suggested earlier we had decided that a small experiential based seminar was an appropriate response to increased collaborative teaching in the clinical setting.

'...so what you are saying is that there needs to be a lot more input from us.'
‘Workshops with a few [hospitals]...’

To gauge the interest in the proposed seminar we designed and distributed a questionnaire (see appendix 2) asking registered nurses in the health care institutions if they would attend and what they felt their needs were. It was given out in the last meeting of cycle one [1990]. Although the response was disappointing with a return rate of 11 out of 60 (18.3%) we decided to go ahead. We also distributed a second questionnaire (See Appendix 3). As part of the questionnaire we asked for responses to specific questions concerning registered nurses preference for the preceptor role and if they felt this role would interfere with other roles. We also asked if they would like more input concerning our curriculum.
<table>
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<tr>
<th>SYSTEM OF ALLOCATION</th>
<th>most preferred option</th>
<th>least preferred option</th>
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**Code for system of allocation.**
Tutor allocation of students to the:
1 = patient with an RN supervising the student.
2 = RN who then allocates the students to patients.
3 = RN who then allocates the students to tasks
4 = patients with tutor supervising the students.

By collapsing options 1 and 2 into one preferred category and options 3 and 4 into one least preferred category it is possible to determine the RN's preferences for a system of managing student learning experiences.

The system of management where the tutor allocates students to the patient with an RN supervising the student (allocation 1) was the most preferred option. (n=11)

Tutor allocation of students to the patient with tutor supervising the student (allocation 4) was the next most preferred (n=6) but was fairly
equally distributed with five choosing it as a least preferred option. The two least preferred options were tutor allocation of students to the RN who then allocates the students to patients (allocation 2) was chosen by seven people and tutor allocation of students to the RN who then allocates the students to tasks (allocation 3) was the least preferred. (n=10) The registered nurses qualified their choices. The main reasons included that: they know the clients and are able to carry out total patient care, they can teach time management realistically, they are an appropriate role model, students can obtain experience as part of a team and they can share their knowledge and expertise with students and this provides a better learning experience.

"Students are more able to see what is required for/or by individual patients and to be able to perform these duties under the supervision of some one who is familiar with the patients."

"The only way to learn is to do it. It is important to share one's knowledge with a student and then allow that student to attend to tasks to their level or year of training."

"To impart the knowledge the student needs to feel comfortable, a part of the team and willing to learn. Allowing dual responsibility gives the student a role model to learn nursing skills both practical /theoretical."

"The number of students under supervision outweighs the amount of tutor time. The RN usually ends up supervising pieces of student work anyway. Be useful to supervise students as a teaching process and know what is being done."

"The students need to have constant back-up and learn how to utilise time management."
"The RN'S are experienced in hands on total nursing care and have usually been nursing these patients for a length of time."
"The number of students under the supervision of the tutor is to many. This situation is not satisfactory as students are left unsupervised in many instances. RN's employed in the hospital environment are frequently if not always supervising the students practice due to this situation." "Better for the RN primary care giver of patient to supervise the student as they are more aware of the care needed plus 1 tutor doesn't go far between 6-8 or more students which means much of the time the students are waiting for the tutor before undertaking procedures many of which can then be an hour or 2 late."

Those registered nurses who chose the option tutor allocation of students to the patient with tutor supervising (allocation 4) did so because the demands of other roles they were expected to fulfil as part of their clinical responsibilities. They felt educators could give more consistent time and that they, the RN's, lacked knowledge of the curriculum.

"It is logistically impossible to allocate students to an RN due to increasing and unceasing work loads. I would dearly love to do three [option] above but it is unfair on the patients and the students." "I feel that it is important that the students are supervised as much as possible which is better for all." "As I have previously stated I am not very familiar with nursing diagnosis and HRP and therefore, I feel it is better for the tutor who has this knowledge to supervise the students. I, as an RN, would certainly not mind assisting the student where I can."

Nine of the eleven respondents said they would be willing to act as a preceptor. They qualified this indicating that although they felt they needed to be more aware of the curriculum they also
felt that this would increase their knowledge. They also felt that they would be appropriate role models and could teach time management, pass on their knowledge of 'hands on' or bedside nursing and that they enjoyed the teaching role.

"only if I was much more familiar with what the students are actually being taught."

"I enjoy working with the students. Increases my awareness of college based education."

"...the RN. working in the institution would be more valuable as a role model rather than a tutor from outside the institution. Would be valuable to the student re learning principles of time management, routine etc. as well as possibly providing a more realistic guideline to the role of an RN plus hopefully will provide valuable teaching of 'hands on ' nursing."

"enjoy teaching willing students. Develop good relationship between RN and student. Pass on 'nursing tips' which help when students work in clinical situations."

"the students will learn continuity in care and total patient care as well."

"I feel that as having had 20 yrs of nursing experience in many varied fields I could offer my knowledge and experience and confidence to these students."

"Provides students with practical experience from RN's working in the health care setting and recent clinical experiences."

"students are our future and I feel that RN's are the most expert and experienced to help clinically."

"I have in the past and am happy to participate in the future. I enjoy teaching immensely."

"[I have had]... previous experience as an educator. Keen to learn from students. Selection of students not allocation by someone else. The input I have will hopefully continue the excellence in nursing at the bedside."

"I feel confident I can instil the qualities a competent nurse requires. To care, feel and understand what helping and nursing our fellow human beings and especially relating to each individual with their own needs and to enhance their comfort and recovery- as well as instilling confidence in the student to be satisfied with their effort, encouragement is what is required."
The heavy role demands of the charge nurse role makes taking up the teaching role understandably difficult.

"[A]s a NUM I find that I cannot allocate sufficient time to this."

Seven out of eleven said that student supervision would impede management role responsibilities although two saw this as variable depending on work load and student needs. Overall registered nurses felt a tension between responsible high quality client care and their responsibility to be part of the preparation of future registered nurses. And to some extent their dilemma was also our dilemma. We also felt similar tensions. We were after all not that different. The responses to the question 'do you believe the supervision of students would impede the efficient management of your other responsibilities?' can be likened to a story which is told below.

"I believe that the supervision of students is indeed a very heavy responsibility because this is the time when they are gaining the foundations of their career I also believe that my responsibilities to my patients are very important and, therefore, the former would impede the latter."

'...at times [it would impede management]...depending on the day, pt loads, dependency ect. Also level of student learning and the individuals enthusiasm and initiative would influence this but I feel it's important for RN's to have input into the students learning and it's also our responsibility to help educate them as they are our future professionals." "to a degree [it would impede management]. On a busy ward it is difficult to supervise students as well as carry out other duties of medications, dressings and supervision of EN's."
"If the person as preceptor is given patients to totally care for with the student."
"If you are teaching you can pass on your information whilst doing your procedures and instruct as problems arise."
"Only if you were team leader. The team leader manages the overall care of the patients under his/her care and works with the team members to ensure all aspects of patients needs and treatment are met. Team members don't have this responsibility and they would be more suitable to act as preceptors."
"Work load; implementation of new concepts in nursing; nursing shortages; and the supervision of students should be 100% in the wards."
"at times. Because I would be responsible for the student and have to give help and feedback in order to allow student to participate.
" unfortunately the real world does not provide at times enough time and at other times a lack of interesting of challenging patients to assist the student to learn to recognise what difficulties are nurse in too often pat order."
"depending on responsibilities. RN's must take on some of the responsibilities for the future of nursing as a profession and extra teaching is a way of ensuring that we assist in the evaluation of our future RN's."

Ten out of eleven said they would like more input on our curriculum.
It was considered that this seminar would begin to heal the 'them and us' relationship between teachers and clinicians. It was also directed at meeting the needs of preceptors for a more collaborative teaching situation and increased input on our curriculum.
Told in our words our intention was:

'assisting registered nurses for the preceptor role in the context of our curriculum.'
'enhancing relationships between 'them' and 'us'..' '
'develop a praxic relationship for the development of nursing diagnosis'...It's about learning and sharing together... bring us closer together, showing we have mutual understandings about things...' 
"its about our relationships .... bringing us together"
This interpretative strategy provided insight and understanding of the needs of clinicians who were involved in student learning.

Seminar Facilitation and Evaluation and Outcome.
The when, how and what were arranged.
Staff of the faculty were asked to give informal presentations on the topics identified (See Appendix 4). We, the researchers organised and ran the seminar and also took apart in various sessions. The topics chosen reflected our own needs and those identified by the registered nurses who responded. Our lack of confidence and fear of being seen as 'experts' surfaced and we discussed our feelings about this.

"I feel really ill equipped for all this. I feel like I am sort of coming along to find out for myself rather than coming along so I can give ... I don't really feel like I've got the answers ... I have questions too"

But we were afraid of emotional dumping and negative attitudes. So, we discussed strategies to deal with this.

"I see this ... as a learning experience for everyone ... I don't know that I know the answers to a lot of these things either".

The validation of our feelings within the group was extremely positive. We were not isolated in our feelings of inadequacy and came to view the strategy as one of mutual learning with no one person seeing themselves as more 'expert' than another.
As the story unfolds it can be seen that we were struggling with this curriculum probably as much as those registered nurses in the health care institutions. We were also concerned about emotional dumping and the possible negative attitudes of some RNs. This was prompted by the negative experience of one of the group which occurred while she was distributing the questionnaires. We discussed the possibilities of this occurring during the planned debriefing at the end of the seminar and we also discussed strategies for positively and constructively dealing with this eventuation.

"I got a bit of a shock... I got this feedback from them saying why should we do this you've asked us to preceptor the students and we help them with teaching and now you are asking us for more, to come to this workshop and they want to be paid for it, for what they are doing... I just feel a lot of those feelings just might come out."

"They were just expressing their feelings ... anger because they knew me they felt they could tell me"

"We should anticipate that this may come up"

'I see this whole thing as trying to improve that [situation] "

"We could bring it up, encourage it to come out instead of just keeping it under".

The attendance was small (20 people) but a rewarding experience. The evaluations completed at the end of the day demonstrated that we met some, but not all three of the aims (See Appendix 5).

Critical reflections on this identified reasons for the failure to meet some aims
and how to more successfully run a similar workshop. This was an interpretive strand that pre-dominated the first and part of the second cycle. We were attempting to understand the organisational culture of the health care institutions including the nature of the relationship between it and the academy and to implement strategies which improved the quality of the relationships and the students learning experience. It was also an effort to make explicit part of the curriculum which was implicit and covert or hidden. We certainly enhanced our relationships with clinicians, and they felt special in that they perceived that something was being done to assist them in particular. Social ecology as transformation of the social relations didn’t seem so much like a theoretical ideal.

‘...people were very positive and were saying it’s positive to have a professional day...’

On the other hand we were doubtful if that particular day provided an environment which enhanced our praxis. We discussed how we would do things differently next time, less content, more time for discussion, more participative strategies. The strategy which was implemented increased our insight and awareness of clinicians needs in the teaching context. It broke down some of the barriers between us and overall the experience deepened our confidence.
...for me personally it was very good in that it made me a lot more aware of the needs of people...[the clinicians]'

'Yes, there seemed to be three major areas...knowing about this curriculum, knowing about nursing diagnosis, knowing how to assess students.'

'...I had a sense that they were asking how can I identify what these students need to know...how do I actually assess them...'

Much of what we uncovered concerning preceptorship is reflected in both the Australian and North American Nursing literature.

Teaching arrangements in the clinical setting for undergraduate students of nursing vary considerably. Teaching techniques referred to in the literature include mentorship, preceptorship, joint appointments, 'buddying', 'coaches', 'peer pals', clinical educators, 'educational liaison persons', 'sponsors', (Barnett 1992:248, Perry 1988) 'undergraduate clinical internships', 'externships', and 'clinical contracting' (Goldenberg 1987/88:11). Unfortunately there exists much confusion concerning names and role definitions. Perry (1988) makes the point that preceptorship is worth considering given the need to formalise the various roles.

Although, Barnett (1992) is concerned about too great a degree of formalisation of the preceptor role suggesting that there is a need for clinical nurses involved in teaching to reinterpret their role.

As was clear in the RNs stories, they too felt that as professional health care workers they had a responsibility to be involved in teaching. But there were some who felt this was not viable. The question could be asked, is preceptorship suitable for all clinicians?
Barnett (1992) makes the point that clinical nurse specialists are especially equipped, in the context of critical social nursing, to develop praxis and perform program evaluation. Ideally clinical nurse specialists would be the most appropriate people for this role but preferably this should be on a volunteer basis. Other registered nurses who are interested in teaching also have a wealth of experience and expertise to assist the preceptee. On the other hand areas where there is a high workload and excessive stress is not an appropriate place from which to select preceptors. And, lack of preceptor familiarity with a particular curriculum is a hindrance to an effective preceptorship. Barnett (1992) and Goldenberg (1987/88) and Turkoski (1987) comment about the value of preceptorship for registered nurses. These include a sense of accomplishment and increased skills in the teaching/learning context, an increased sense of responsibility and recognition of their competency and expertise.

The role of the faculty in experiential learning then becomes a facilitative one. Commenting on this point Barnett (1992:258) suggests:

In this context, the roles of faculty members and administrative staff are therefore largely facilitative, providing educational expertise and service support (e.g. conducting workshops for preceptors; developing study guides/manuals and compiling relevant readings; preparing and assisting the orientation of preceptees; liaising regularly with preceptees, preceptors and clinical staff; problem solving and assisting with preceptee/preceptor and programme evaluation).

Although discussing registered nurses' learning opportunities Hart and Rotem (1992) comment that although increased teaching opportunities created new learning situations, conflict concerning client care and teaching responsibilities inevitably evolve. Myrick (1988:138) makes the comment 'If university faculty elect to place students with preceptors for their clinical learning experiences, it is important that those preceptors be well qualified
to assume such a role.' This is further supported by Goldenberg (1987/88:14) who suggests the need for well-planned and indepth education for preceptors including, among other topics, workshops on teaching methods and adult learning theories. The taking on of the preceptor role is liable to test the relationship between education and service as collaboration may be a new experience for everyone involved (Barnett 1992). As if echoing social ecology, Perry (1988:22) suggests, that preceptorship programs foster 'increased acceptance of and commitment to tertiary programs by the processes of collaboration and a tolerance for individual differences'. 
Figure 13. Women's Voices in the Academy: Finding Voice and Being Heard. Curriculum Development.
Finding a Women's Voice and Being Heard: Curriculum Development.

'We operate within a paradoxical marginality which both devalues our work and yet leaves us room for covert manoeuvring.' (Lather 1984:58)

It is important for any action science, that it does not get bogged down in endless discussion and attempt the implementation of inappropriate strategies in situations where the power and control is negligible. This is a time and energy drain and leads to frustration and disillusionment. Speaking of critical educational science Carr and Kemmis (1986) clarify this by pointing out that actions, as an outcome of self reflective dialogue, are always directed towards practical achievement. Critiquing radical or revolutionary change advocated by some radical theorist they comment:

Insofar as it speaks to practitioners, it offers them only the responses of hopelessness and cynicism; insofar as it speaks to policy-makers it offers them only the usual promise that a new programme can 'fix' schooling. (Carr and Kemmis 1986:208)

Concurrent with this research was the faculty development of the curriculum for the new Bachelor Program which the government had decreed by legislation was to replace the present undergraduate Diploma as a registration requirement for nurses in the state of N.S.W in 1992. The development of this degree curriculum, although difficult at times and unlike the present diploma program, occurred through participative discussions by the faculty with the primary designer who was the head of the nursing program. It was this participatory facility that allowed us to influence the development of the new curriculum based on the program.
evaluation that we had been carrying out in this action research. This was an empowering experience. To observe findings from the research being implemented and being in the position to shape the nature of the learning experience in such an immediate way gave powerful voice to those who are usually powerless in the university hierarchy. We were able to speak insightfully on the length of practicum that was beneficial, the appropriateness and sequencing of nursing diagnosis and the NANDA Taxonomy as an organising framework for curriculum, the need for all the diagnoses to be covered before studying individual diagnosis, the importance of collaborative diagnosis and medical terminology. We also identified that student goals were task oriented, that registered nurses expectations of students of nursing were orientated to skills proficiency and time management, and recommended and supported that the first student practicum occur only after skills proficiency had been achieved. And, although to some extent it threatened the jobs of most of us, support was given to the value of joint appointees in bridging the gap between the clinical and academic settings for student learning.

All of the above has been incorporated into the new undergraduate degree program. Included in this is the delay of clinical placement until the second year of the program after a first year which
aims to achieve skills proficiency. Although there is no doubt that the doing of nursing skills in nursing laboratories on campus is not the same as the 'real life' situation in the HCl this is aimed at reducing the length of time in which students are anxious and preoccupied with this aspect of nursing. Also we were able to influence and support the establishment of two consecutive practicum days a fortnight instead of one day a week and a block practicum at the end of first year and third year.

"We need an on campus prac. because student goals are task orientated."
"Need to provide a mechanism for ensuring competency in task before students go into the practicum setting."
"Foundation unit ... needs to cover all nursing diagnosis ... tending to not to look at the patient and formulate a ND but make the ND fit the patient they are working with at the time"
'If they knew all the diagnosis they could look at the patient and ask which one fits."
"Nursing diagnosis are ok, but human response pattern is a problem... the way nursing diagnoses is organised that is the problem"

The Role of Action Research in Curriculum Evaluation and Development.
In a discussion of action evaluation in the context of school and teacher evaluation Batcher and Maxwell (1987:74) indicate that many people argue that action evaluation and action research are so similar that they may be considered indistinguishable. They suggest the similarities are based on shared 'seminal writings' and evaluation literature. Further to this they suggest that the processes, outcomes and ownership of the product are also similar. Smith and Lovett (1990:187) in a discussion of curriculum change comment that action research 'has proven to be most effective for curricular and educational change in a variety of educational settings.'
Both these educational researchers also consider that critical action research is a valid and more recent approach to curriculum evaluation directed at changing the educational structures and practices.

Role of Curriculum Evaluation and Development in Staff Development.
In a study of Heads of Nursing attitudes to nursing faculty development in the tertiary sector Speedy (1990) found that they considered the highest priorities to be skills development in curricular and course design and evaluation. Further to this Speedy (1990) makes the relevant point that nursing being new to the tertiary sector is experiencing an understandable expansion in this area often without the appropriate faculty expertise.

Action research as a form of critical engagement with curriculum was felt to be appropriate. We commented on how successful it had been as a process of identifying problems, planning strategies to manage these problems, observing the change and then reflecting on the outcome. It enhanced our confidence.

"changes that I made were huge... good to be able to validate that."
"what action research can do ... for working on this curriculum... felt very much that I had a handle on some of the stuff people were talking about in the new curriculum"

Ortrun Zuber-Skerritt whose academic discipline is a staff develop in tertiary institutions makes the following comment:
If staff are continuously involved in curriculum development and justifications for their actions, they are unconsciously, almost incidentally and indirectly engaged in professional development as teachers in the widest sense. (Zuber-Skerritt 1991a:197)
This particular comment was part of the writing of an action research Ph.D thesis on professional development in higher education in Australia. And, clearly Zuber-Skerritt (1991a) views action research as an appropriate mechanism for both curriculum and professional development of tertiary teachers.

Further to this, Zuber-Skerritt (1991a) situates curriculum evaluation and development in the critical context by suggesting that by being active participants in the process, teachers move from uncritical technicians, to critiquers of curriculum through the action research process. This process removes the power from outsiders and gives teachers back the power to formulate their educational work.

*It was obvious that our newly gained knowledge was relevant and applied immediately. It is only now in 1993 being tested. The outcomes of the first year evaluation of the Bachelor of Nursing programme will indicate the relevance of our contribution.*

The concept of immediacy and the mechanism for testing and revision is seen by Zuber-Skerritt (1991a) as a valuable characteristic of action research as curriculum evaluation and development. Referring to both her own work and that of Coles (1978) she also goes on to suggest that because curriculum development through action research is an integrated approach it is a process which 'offers the deepest and most effective'... form of... 'professional development ' (Zuber-Skerritt 1991a:198).

Professional development in higher education for the 1990's has been prioritised by Ortrun Zuber-Skerritt (1991a). The first and second priorities are in the areas of high quality teaching and accountability respectively. Within both these categories evaluation and development of curriculum are featured. This is consistent with the findings of Speedy (1990) concerning the needs of nurse academics in higher education.
In this action research we were responding at a heart felt level to our own identified need to have control over our own practice and this was in correspondence what other researchers had uncovered.
Chapter eight: Language, Discourse and Ways of Knowing.
This exploration of the constitution of nursing knowledge suggests that the emerging discipline of nursing is shaped by the discourses of scientism and professionalism (Bruni 1991:187).

Nursing research in the past has been predominantly empiricist and quantitative. And as Bruni (1991) suggests this has tended to influence the direction of nursing curricula which has in turn has shaped the worldview of nursing graduates. Critical pedagogy, scholarship and research which questions power relationships and poses actions aimed at freeing people from imposed constraints which limited freedom in thinking and practice has been a recent nursing phenomena in this country. Science in the form of scientism has been substantially critiqued (Parker 1991). Within nursing, those who have viewed caring as the essence of nursing, have been highly critical of the embeddedness of nursing within the scientific paradigm to the detriment of other perspectives and of the move to increased professionalisation based on scientism (Lawler 1991).

In the context of social ecology the neurophysiological work of Maturana, which has been applied to family therapy, has also been proposed by some Australian social ecologists to be an appropriate scientific framework for the discipline (Russell 1991). At the same time within Australian social ecology there has been a call for the marriage of the art and science of the discipline (Russell 1989b). Nursing scholars have also called for such a marriage. In both these disciplines it is the exclusivity of scientism as a way of knowing to the detriment of other ways of knowing that has been the focus of critique.

Bruni (1991:188) comments '[T]he development of nursing knowledge has been explored in terms of the appropriation of knowledge generated in other disciplines, such as medicine.' To this could added, science.

An examination of the language and discourse of this curriculum is a critique of the power relations embedded in scientism, an examination of an imposed ideology through a different cultural lens and an exploration of the resistant discourses offered by all those involved in its implementation.
Discourse Defined.

In brief, discourse in its most general sense refers to regulated systems of statements, which as language give meaning to the world. The concept of discourse also incorporates the notion of practice, as practice is seen to be constituted by the language which informs it. The problem of inconsistency of meaning or variability of attitude is hence exposed as an issue of discursive complexity - not a problem of personal irrationality or of false consciousness. (Bruni 1991:173)

Speaking further on the nature of discourse Bruni (1991:189) goes on to say,

The potential for challenge does, however, exist in any discourse for discourses are not coherent, unified, closed systems. They contain spaces within which challenges can be, and are made as people oppose some aspect of the context in which they are located.

Discussing ideology as a form of doctrine Delacour (1991:414) puts forward the definition of ideology as including ... 'not only consciously held values and beliefs, but myths, images, representations, and ways of perceiving.' Warning against the insidious nature of dogma in nursing Rodgers (1991:180) comments:

The growing system of nursing diagnosis presents a similar risk. The taxonomy has not yet achieved the status of dogma, perhaps because of continuing debate and development of the diagnostic statements. However, as nurses increasingly employ nursing diagnosis to guide their thinking, the potential exists for the introduction of another source of dogma as the conceptualisation of nursing care situations becomes reduced to a preconceived category system.
The Relationship of Nursing Diagnosis to Nursing Theory and Nursing Knowledge.

In looking beyond the taken-for-granted it could be seen that we were doing more than negotiating curriculum implementation in the practice setting, and performing a curriculum evaluation. We were in fact struggling with a curriculum that begged important questions about what constitutes nursing knowledge, who has the right to produce it and impose it, in what cultures can certain types of nursing knowledge be imposed and what are the consequences of an inappropriately applied nursing epistemology in which those exposed to it are ambivalent or antagonistic to its ideology, purpose and outcomes.

It was in cycles 2 and 3 that responses to the language of the discourse in the context of the organisational culture and practice emerged and became more clearly focussed.

In relationship to the first aim of cycle 3 the identification of the different variables also revealed the dialectic or tension that could be located within both the institutional setting and the curriculum.

Beginning in the first cycle and continuing through cycle 2 with the focus in cycle three was the interpretive and deconstructive shared self reflections on Nursing Diagnosis and NANDA Taxonomy. On one hand it was considered in terms of its claims to nursing knowledge and on the other its appropriateness to the Australian
practice scene and as a teaching tool for students of nursing who were novices rather than experts. This was, as Dick (1991) indicates, a major moment of research rather than action. As he suggests this type of methodology is usually a balance between research and action although at times, depending on relevance, one may have more emphasis than the other.

We also identified a hidden message that within the Nursing Diagnosis and Therapeutics units it was implied that only so called nursing knowledge rather than knowledge from other disciplines was taught in these units.

Nursing Diagnostics

Background

The earliest recorded writings on nursing diagnosis was by McManus a North American Nurse in 1950 (Thomas, Wearing and Bennett, 1991:8). But as Thomas et al (1991:8) suggest it was not until the revised 1980 model Practice Act that the American Nurses Association definition of nursing actually recommends that nurses undertake a diagnosis and implement therapeutic interventions. The development and popularity of Nursing Diagnosis has been a response to changing role of nurses in North America.

Australian Legislation does not define nursing in the same way as those in North America but the Australian Nurses Federation statements on competencies does include the ability to formulate a nursing diagnosis (Stockhausen 1992). Definitions of Nursing Diagnosis vary and the North American Nursing Diagnosis Association (NANDA) has taken responsibility for clarification of issues and the development of a taxonomy or classification system of diagnosis.
Mutual Questions
The acceptance of nursing diagnosis both in Australia and North America varies, although there is no doubt that acceptance in the United States is more extensive, there continues to be much debate and controversy (Thomas et al 1991).

Our struggle with the conceptual nature of nursing diagnosis and the NANDA Taxonomy began in the first cycle continued in the last half of the second cycle and became the focus of the third cycle. In the third cycle we asked specific questions about Nursing Diagnosis. One which we asked, unbeknown to us at the time, is one which several Australian and North American nursing scholars were also concerned to elucidate (Lawler 1991, Thomas et al 1991).

Lawler (1991: 222) asks, ...'what does one actually do with the diagnosis- that is, how does it influence nursing actions if at all?' Thomas et al (1991:11) also state:

Proponents for the use of nursing diagnosis emphasise the direct relationship between the diagnostic statement and the selection of appropriate nursing interventions. The relationship between medical diagnosis is much less direct. However, there is an urgent need in nursing research to establish the relationship between certain diagnoses and probable success of selected interventions.

Nursing diagnosis, if viewed from a theoretical perspective is concerned with ...'identifying and defining labels for judgements that nurses make in their daily practice' (Meleis 1991:412). It is an example of a factor-isolating theory (Kritek 1978 in Meleis 1991:412) which 'specifies, describes, defines and classifies concepts' (Meleis 1991:412) and is the first step in theory development. This is a problem orientated rather than asset orientated approach to client care. The curative approach ignores prevention and health promotion and is modelled on the approach
of medicine which predominantly concentrates on problem identification and curing rather than prevention of the problem. Like some practices in medicine it also discourages individual or community participation in problem identification and management. Shamansky and Yanni (1983) contend that nursing diagnosis is inappropriate in the primary health care setting.

The Beginning of a Nursing Praxis.
The discussion of nursing diagnosis has occurred in the context of a practice-theory.

What then is the difference between practice-theory and praxis, is it the process or the outcome? Could it be both?

In a discussion of the influence of theory on nursing diagnosis and nursing diagnosis on theory Meleis (1991:412) suggests that 'Nurses were asked to look at their own practice, to trust their assessments, to uncover their judgements, and to collaborate in a long process of specifying, defining, and identifying.' What was being utilised in this process according to Meleis (1991:412) is theoretical thinking which has as its goal the development of theory.

It guided the process but not the content.

There is also the possibility that existing theory could be applied to the now accepted diagnoses from which new diagnoses could evolve. How has nursing diagnosis influenced theory development? It has, according to Meleis (1991:413) created an arena for theoretical discourse, further refined concept classification, encouraged further research aimed at identifying new diagnosis and validating the accepted labels. Theoretical and philosophical analysis would be the next step in the process of theory development.
Praxis or Practice-theory.
As Australians we do not share the same worldview as nurses in the USA who do most of the promotional work about a science of nursing— we are culturally two different groups and that means we do not necessarily share the same worldviews, nor do we live and practice in the same socio-culturally contexts. (Lawler 1991:213)

I had begun to wonder if the evolution of nursing diagnosis had actually been a highly successful example of Praxis.

Lather (1986:258) cites Salammsi (1981:73) suggesting the word praxis has a historical context. She speaks about the Gramscian concept of 'praxis of the present' which is described as a process in which people become...'conscious of their own actions and situations in the world.' Referring to an earlier time in history Webb (1990:3) indicates that critical theory...'re-generated the Aristotelian idea of praxis, of theory and practice growing in unison.' There are several characteristics of this growing together process. The relationship between theory and practice is reflexive, dialectical and directed towards change (Brown 1989:35, Humm 1986:172, Lather 1986:258). The concept of praxis is one where theory and practice are no longer split and critical reflection on actions provides the context for their reciprocal interaction. Stanley (1990:15) arguing for a feminist praxis views theory generation as more than just... 'knowledge of what'... but also as...'knowledge for'...change. When this view of praxis is adopted, emancipatory change is the outcome of an emancipatory cognitive interest. Adapting Webb's (1990) definition of educational praxis, nursing praxis as used in this context is, learning and adapting ones nursing knowledge and practices in the light of critical reflection on actions to serve nursing and social purposes. The concept of social purposes utilised in this research refers to educational endeavours and client care which is collaborative and negotiated with the client rather than scientised.
If nursing diagnosis developed from nurses reflecting and dialoguing about what they did when they made a nursing
judgement with the aim of defining the domain of nursing, was it then nursing praxis?

**Is there then a difference between the theoretical construct of praxis and what actually happens in reality?**

Perhaps the problem of the reality of praxis is reflected in Meleis' (1991:412) criticism of nursing diagnosis. She states:

> While they represent the realities of those nurses who participated in developing the diagnosis, they do not represent the majority of nurses who have been caring for clients and for communities for years and whose level of expertise range from novice to expert, nor could they do that. Assumptions held by nurses and shared assumptions of the domain have not been adequately, carefully, or systematically discussed, nor have they reflected on the nursing diagnosis literature.

Further to this Meleis (1991:413) comments '[T]he content of the classification process was predicated on diverse values, assumptions, and visions of the mission of nursing that remain to be identified and defined...'

While the realities of some North American nurses are not represented it is most certain that the realities of most Australian nurses are also not represented by a nursing diagnosis approach to defining the discipline of nursing (Jones 1987:186). That it is a practice-theory which has been imposed on the discipline in this country has been echoed by several Australian nursing scholars (Lawler 1991, Parker 1988). Further to this Bruni states:

> The constitutive power of new discourses (their language and concomitant practices), must be explored prior to their adoption. For they may sustain, rather than challenge, the status quo albeit framed within new concepts and terminology which has a nursing flavour. (Bruni 1991:189)

Nursing diagnosis as developed in the USA is socio-culturally bound. It develops locally relevant rather than grand theory. In
the feminist sense nursing diagnosis and the process in which it is embedded is a practice-theory rather than critical praxis as it seeks to establish nursing as a scientific discipline where the client has very little input in determining the context and validation of identified problems. The client is not free to be self determining but is forever under the ‘scientific gaze’ being bounded by its definitions and processes. Ideally the processes in the development of a nursing praxis would include those who ‘care for’ and the ‘cared for’.

Praxis is personal. How can a practice theory developed by a particular dialogical community be implemented by a community who have been separate from its development? It remains theory imposition which is externally initiated, prescriptive and functionalist.

The ideology of Scientism, Professionalism, Economic Rationalism and Theory Imposition.

In recent years, the North American style of scientific ‘reality’ has been imposed upon nursing discourse in this country, that is, there has been the presumption to know for us. (Lawler 1991:213)

Background

The utilisation of a diagnostic reasoning process to determine health problems is not new or limited to nursing. Other health care personnel, such as medical officers, physiotherapists and occupational therapists also use a systematic process to identify client problems. Discussing the diagnostic reasoning process a group of North American nursing scholars (Carneveli, Mitchell, Woods and Tanner 1984:26) comment that 'T]he diagnostic reasoning process is a complex observational-critical, thinking-data-gathering process used to identify and classify phenomena that are encountered in presenting clinical situations. Further to this Thomas (1987:44) suggests that 'T]he skilful use of the
diagnostic reasoning process in identifying related problems is the foundation of professional health care.'

The nursing process has in the past been the scientific problem solving process which has assisted in systematically organising nursing practice Bandman and Bandman (1988:114) cite Stevens (1984) who believes that nursing diagnosis ... 'attempts to provide form to the nursing process' ...and without it... 'the process is the same process used by physicians, social workers, and teachers.' Griffiths (1992:17) further supports this in stating that ...'Nursing Diagnosis is the critical element of the nursing process.'

So, the diagnostic reasoning process situated specifically within the discipline of nursing, resulting in a nursing diagnosis, identifies client problems related to changes in health status which justify nursing actions aimed at managing that change.

In support of this a more refined definition aimed at standardisation was accepted by the NANDA conference in 1990. It was stated that a nursing diagnosis was...'a clinical judgement about individual, family or community responses to actual or potential health problems/life processes. Nursing diagnoses provide the basis for selection of nursing interventions to achieve outcomes for which the nurse is accountable' (Avant 1990:53).

It has also been suggested by Griffiths (1992:17) that it is a framework to more realistically apply theory to practice. Jones (1987:186) indicates that nursing diagnosis may also more clearly identify the knowledge domain of nursing.

But, having a list of diagnostic statements does not significantly help the increased identification of and systematisation of nursing knowledge and practice.

In fact nurse practitioners and theoreticians postulated the need to embed nursing diagnosis in a philosophical framework in which a taxonomy, or diagnostic classification system, could be developed. This was an effort to develop a pattern of organisation which would be a common frame of reference directing the formulation
of a nursing diagnosis preventing the necessity to relearn each diagnosis (Gordon 1987).
NANDA was not alone in developing a diagnostic classification system. In 1974 Marjory Gordon developed a classification system to encourage an organised approach to the teaching of assessment and identification of nursing diagnoses (Griffiths 1992:36). Gordon (1987) justifies her Functional Health Patterns as supporting a holistic approach to assessment which can be utilised '... in any setting and with any age group at any point in the health-illness continuum' (Daniels and Brown 1991:17).
The type of philosophical framework in which the taxonomy is developed determines the format of the nursing assessment. Hence the levels of a taxonomy become the organising framework for data collection. Further to this Griffiths (1992:31) sets an international perspective in stating that:

As the nursing diagnosis movement gains world wide recognition the NANDA taxonomy can be seen to be a method of unifying nursing practice through the world. It is perhaps the first serious attempt to standardise nursing language and practice throughout the world; not that the actual practice was ever very different but the language or labelling of that practice was.

Is this a hint of North American nursing cultural imperialism? Is it a preoccupation with medical models, the need to communicate, and standardisation? What consideration has been given to the question of diversity and difference? Is it necessary to label everything in the same way?

Further to this point Lawler comments:
In effect the nursing process was a style of practice which promised to ‘elevate’ nursing to the status of a science, it was an imposition, and it was jargonistic... There are a number of consequences and responses to this epistemological imperialism, not all of it to our disadvantage. (1991: 216, 214)
We were operating in an appropriate context that is suggested as imperative by some writers in the area,(Shoemaker 1987, Jones 1987, Cooper 1987) in that we were implementing a diagnostic reasoning process within the context of a Nursing diagnosis based curriculum. The curriculum was problem orientated with the problems organised into a classification system or taxonomy.

So, the ideology of scientific method is clearly the guiding framework for the development of diagnostic labels organised within a taxonomic structure. What then is the role of Intuitive approaches and Benner and Tanner’s (1987) work on expert and novice approaches to clinical judgement?

What we did conclude was that a nursing diagnosis approach to clinical judgement was more appropriate to the expert who possessed a vast knowledge base on which to draw.

Other outcomes of this scientific and rational approach to the formulation of a nursing diagnosis and consequent appropriate nursing actions, is that it validates independent practice and accountability for that practice (Griffiths 1992, McCourt 1986). On this point Lawler comments, ‘[W]hat nurses seem to have wanted with the nursing process was not science itself necessarily, but rather what science could make possible- that is, greater visibility, higher status, more access to research funds, and a more valued place in society’ (1991:217).

The idea of economic rationalism is closely linked to the previous discussion. The development of nursing diagnosis in North America has to some extent been a response to the economic crises and the need for those supported by the public purse to be accountable for practice. Accountability is much easier to document if practice is systematically identified and documented. Nursing diagnosis with its taxonomic structure is such a method.
Further to this Lawler (1991) contends that if it is only the political economy we are responding to in the formulation of nursing diagnostical then we are dealing with a very slippery problem.


In a discussion of the conceptualisation of person and society Allen (1987) proposes that inherent in its technical approach, nursing diagnosis sets up a diagnostic relationship between the client and the nurse. The client is said to make responses to changes in physical, psychological and environmental change which is determined by the nurse. Examined as a diagnostic system in theory, without viewing it in practice, there is no sense of negotiation of the identified problem or interventions conveyed or that the decisions made by the nurse might be value laden. Further to this there is no recognition of differential status which might be a feature of the nurse/client interaction. In this situation one particular value system associated with a particular status has the potential to be predominate over the other. Therefore professional arrogance as a potential problem is ignored. And, although this could be viewed as a problem of individual nurses it also ignores the inherent worldview of the nursing diagnostic system.

One is reminded of the 'blame the victim' mentality which ignores power relations inherent in the structure of a system.

This is supported by Bruni (1991:188) who comments:
An analysis which assumes a mutually constitutive link between knowledge and power reveals the conservative character of contemporary nursing knowledge. Its discourses offer no challenge to relations of power prevailing between occupational groups or individuals involved in the provision of health care.
Allen (1987) echoes Hagey and McDonough (1984 in Mitchell 1991) who suggest that unique experience and personal meaning is lost in the reduction and categorisation of individual responses classified by the diagnostic process. Speaking in an ethical context Mitchell (1991) discusses the harm that is potentially possible once the nursing judgement moves beyond a level of pathophysiological alterations. She suggests that 'Diagnosing human experiences requires value judgements by nurses about another's way of living, viewing oneself, being or relating with others.' (Mitchell 1991:102) Further to this Mitchell (1991) considers that paternalism, client vulnerability and coercion, and restriction of client autonomy are all potentially possible by the application of some diagnostic labels such as noncompliant, dysfunctional, noncooperative or helplessness. This is further elaborated upon by Fine (1992:73), who, although reporting a case study on rape, contends that it is time to recontextualise our concept of coping in that 'The continued assessment of "women's\' coping" as helplessness needs to be reframed.'

Shamansky and Yanni (1983) in the context of nursing diagnostics and primary health care are critical of the barriers to collaborative practice set up by a very different and perhaps inappropriate language system. They also are concerned that this system will limit the scope and practice of nursing ignoring practice which utilises intuition and inference. Further to this Scahill (1991) in a discussion of the application of nursing diagnosis in child psychiatry comments:

The early proponents of a separate language for nursing judgements maintained that in order to become a true science, the domain must be described, phenomena categorised and a taxonomy established... This 20-year effort has produced both a lexicon and a methodology for making nursing diagnoses.
Figure 14. Women’s Voices in the Academy: Finding Voice and Being Heard. Second Questionnaire.
Being Heard: 2nd Questionnaire.

Having been inspired by the response to the workshop with clinicians we were interested to understand their views of our curriculum. It was decided to formulate a questionnaire (see appendix 3) and distribute this to registered nurses in the clinical settings where students were placed for experiential learning. This interpretive strategy provided some insight into resistant discourses.

Resistant Discourses

At the workplace, the nursing process met with opposition, reluctance, and at times extreme resistance on the part of some clinicians who said, among other things, that: it was a waste of time; it was just paper work; it was OK for beginners; it made no difference to the way nurses did their work; it did not evolve from ‘real life’ practice. (Lawler 1991:216)

Contestation (resistance) and institutionalisation (accommodation) are at the very heart of hegemonic relationships concerning ideology and discourse (Hazelton 1993). And Kritek (1985), although a proponent of the nursing diagnostic system, views critique of the dominant paradigm as fundamental to scientific growth and professional maturity. Resistance and accommodation to the nursing diagnostic system occurred with both students and teachers in the areas of discourse, practice and organisational culture.

The Academy as a Culture of Resistance.

Hazelton (1993) contends that nurses have always been subversive and is extremely critical of those stances which suggest that all nurses have been dominated by hegemonic discourses.
Teachers' reactions varied, but there was an element of subversive critique of nursing diagnosis in the practice setting.

'I really don't think nursing diagnosis works'

Students faced with the dilemma of implementing a nursing diagnosis approach to client care were clear about who and what guided their practice.

Student resistance.
..."it's an application really of their theoretical knowledge...which they just talk about [as] clinical skills" [teacher]
"My diagnosis comes from learnt medical terms, I do not tend to think in ND terms"
"Diagnosis is rarely used and medical diagnosis is most commonly used in the hospital setting"
"No I don't use ND's unless I have to pass a unit."
"Don't usually use ND."
"I relate ND to a client in relation to their non-acute state."

Resistant and Accommodating Discourses in the Practice Setting.

Many clinicians, especially the more experienced, responded with scepticism ... If something does not 'ring true' to the practice environment then, in my view, something is wrong—perhaps seriously wrong. (Lawler 1991: 216)

Several North American nursing scholars (Bruce 1979, Field 1979, Thomas and Newsome 1992) have discussed the implementation of nursing diagnosis in the service setting and view the responses in terms of reactions to the change process rather than resistance to an externally imposed system of nursing. Bruce (1979:514) comments '[I]nitial problems were relatively few, of a minor nature, and generally predictable as being components of the change process.' Further to this Lucy Field (1979) believes that those attempting to implement nursing diagnosis are acting as
change agents and features of resistance and accommodation will be present to varying degrees.

Moving beyond a consensual analysis which views responses to a change as a challenge to the status quo, the responses could be viewed as reactions to theory imposition by the academy, or on the other hand as reflecting the contradictions inherent in the transitory phase between what 'is' and what we were moving towards.

The response of those in the practice setting varied enormously depending to some extent on their exposure to students, educators and the curriculum. When asked in a questionnaire about the application of ND and HRP in clinical practice, as teaching tool problems and the utilisation of ND based care plans registered nurses responded to the discourse in various ways. Common themes across these questions included a lack of understanding, that it was unrealistic, time consuming and inflexible. Several identified the fact that it was inappropriate for their level of expertise, it was merely reframing what they have always been doing, reductionist and inappropriate to the Australian health care culture.

Lack of understanding of this framework. The formulation of a nursing diagnosis as pointed out earlier requires critical thinking skills. It is difficult, and education aimed at teaching nurses to think critically within the diagnostic process is fundamental to a conceptual understanding of this system of knowledge.
"Do not understand this context."
"No-one understands them or has enough room to fit in the very 'wordy' descriptions."
"A lack of knowledge and especially perception of the student nurse to foresee the possible problems of making a nursing diagnosis. After 13 years of nursing I miss things and overlook small problems that may be a big problem for the patient."
"Lack of understanding in the profession of clinical RN's."

We asked registered nurses if they would like some more input concerning our nursing diagnosis curriculum. Ten out of the eleven who replied said that they would.

Unrealistic and non-holistic.

The problem based nature of the various human responses tend to detract from what these nurses viewed as a holistic approach to client care. There was also some difficulty with differentiating between medical and nursing diagnosis.

"Too difficult to apply in real practice and not concrete enough."
"It's an interesting concept but doesn't hold much value in real life application"
"Good idea yet not proper or practical. Students not able to apply the process practically to the clinical situation."
"It is unrealistic as nursing diagnosis doesn't reflect the total problems associated with the patient. Particularly in a surgical setting (where I work), all other health care workers use medical diagnosis to communicate patient needs to each other and nurses still use this system. College graduates do not learn these concepts."
"There can be more complications occurring with patients than just nursing diagnosis."
"Nursing diagnosis is often repeating in a too simplistic form what conventional diagnosis (as used by all other disciplines) already indicate."

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Thomas and Newsome (1992:183) in a study of factors affecting the use of nursing diagnosis cite Hanson et al (1990) finding that nurses ...'felt less confident in distinguishing between medical and nursing diagnosis.'

On the other hand some nurses felt that it was holistic but time consuming and without support of the medical profession.

"Holistic but time consuming"
"There are many benefits for ND & HRP in especially identifying the patient as a whole individual and planning a structured course of nursing action however this process involves many hours and to date in this country the medical profession are not supporting the new professionalism and ideals of nursing practice."

Although speaking about nursing administrative support for nursing diagnosis Thomas and Newsome's (1992) research found that institutional support for nursing diagnosis was the most important factor in its successful implementation.

Time Consuming and Detracts From the Real Business of Nursing.

Experienced nurses found the extra paper work frustrating. The need to document every little problem undermined their level of knowledge and expertise.

"Time consuming and not realistic.'
"Time consuming." "Overwhelming- a lot of writing to say a simple statement."
"Totally useless. Not enough hands on nursing care and putting patients care before any paper work."
"Go back to basic needs and non categorical care. Treat as a whole. Most educated nurses with experience can foresee problems and are able to deal
with these or consult the appropriate persons. Do we need to itemise every little detail lessening our time for patient care?"

**Inflexible and Prevents the Utilisation of Other Frameworks.**

"Nurses level of expertise and ability to utilise several frameworks was considered restricted by the nursing diagnosis framework.

"I feel this nursing diagnosis is too (unclear).......... has not enough flexibility and doesn't allow RN's to use their initiative."

**Prevents Collaborative Practice.**

"Nurses view themselves as carrying out their practice in a team where communication and working together is necessary for the smooth delivery of care. Nursing diagnosis is seen to be divisive.

"I feel nursing diagnosis needs to be used in conjunction with a medical diagnosis."

"From what I know it appears it is quite a good teaching tool. However medical diagnosis and medically orientated terminology seems to be not very well understood by college students and graduates. Remembering this terminology is what is used by all health care professionals in the hospital."

"Nursing diagnosis may have a place as a teaching tool if students are unable to grasp the implications of a conventional diagnosis."

"It is a good teaching tool for students of nursing but the system as it is presently situated is not geared to cooperate and work in all areas of nursing. I believe it could work in small more remote hospitals but where there is a high turn over and busy schedules there needs to be many modifications made. This could become frustrating to the training students."
Non Reflective of the Australian Health Care Culture.

There was some degree of recognition that this system of nursing was inappropriately derived and applied.

"I'm not a strong supporter. We should encourage our degree students to think laterally and utilise a theoretical framework suited to Australia's population- cultural mix. Not taken from USA."

"Do you think a curriculum based on NANDA is suited to Australian culture? Many other sciences influence a human being and need emphasis?"
Figure 15. Women’s Voices in the Academy: Being Not Heard. Conference Paper Rejected.
Being 'Not Heard': Disempowerment

The main aims of the 3rd cycle of this action research was associated with finding voice and being heard in the academy. The strategy chosen for that was to submit an abstract for a paper to be presented at a forthcoming Nursing Diagnosis Conference which was to be partially sponsored by our own faculty. Three aims of the research where formulated as:

"To determine the influence of different variables, within the clinical setting, on the effective implementation of a diagnostic reasoning process, (nursing diagnosis) as a tool to apply theoretical knowledge derived from a curriculum organised around human response patterns.
To implement strategies which enhance the application of the theoretical knowledge in experiential learning in the present curricular context.
To determine the extent to which this particular research project has provided a framework for the development of nursing praxis."

Conference paper abstract submitted...

'Are we going to present a paper at the ND. Conference?'
'I think we should, if the group doesn't I am going to do a paper anyway'
'I would like to do one, .... look at it [the curriculum] as a teaching tool'
'... not as a teaching tool but from a clinical perspective'
'we thought we'd ... submit a paper... the role of action research for developing [a] critical reflective paradigm for understanding nursing.'
'Have a responsibility to share' [our knowledge]
'need to critically analysis it' [the curriculum]
'We are one of the very few Universities that use it as a curriculum tool.'
'Plus we are teaching it and trying to implement it in places which aren't into it.'
'we’re change agents... as clinical educators we are change agents in changing the way the profession is thinking about... nursing diagnosis.'

Our abstract was rejected
‘...we are discussing the implications of the fact that our paper for the Nursing Diagnosis Conference wasn’t accepted. Do you think it’s worthwhile talking about the reasons why, I mean I don’t know, I have no idea.’

We reacted with anger, frustration, disbelief, disappointment, loss of confidence, and a sense of injustice...

‘...there were five papers submitted from here and three were accepted and two were rejected... five submissions from here and that’s a lot from the one place I suppose...’

‘It’s just personal choice!’

‘Yes I think so...’

‘I hope it was more what fitted rather than personal!’

‘Well I thought something fitted.’

‘... maybe it isn’t, maybe there is a dozen of them like that, nursing diagnosis ... categories’

‘The difficulty, I think for this paper which makes it so hard for this conference is that there are no categories listed under which you could actually nominate a paper and I think what made it easier for our Melbourne paper ... is that they had about four categories and we actually submitted under the category of action research and I also think to some extent action research is poorly understood and I don’t know perhaps that could have been a factor... I don’t know for sure.’

‘There may have been people from the hospitals with clinical type papers and they may have thought, ... there’s already five from here... you get a more academic perspective from here and most people want hospital topics, that may have been a deciding factor.’

‘That doesn’t seem fair does it.’

‘it doesn’t’

‘That’s how I am feeling about it!’

‘... I find that I am disappointed at the moment just from the point of view that I thought we had something relevant to say and on that basis I think we could have said it! So I think it’s disappointing...’

Our strategy was to publish a paper based on the third action research cycle.
'The paper was written by myself and given to the group. But, the consensus was that it was too descriptive and needed a lot more work. Further work on this has not occurred and it has not been submitted for publication.

‘I think we need to make a decision then about where we are going from here.’
‘Well why don’t we just keep going and get a paper out of it.’
‘... there’s a new nursing journal out... Australian... [work] on it in terms of writing up a paper and submitting it for publication.’

On the other hand it did influence the development of the new curriculum for the Bachelor in Nursing program.

‘...it was really beneficial getting the paper out on cycle 3 because a lot of the stuff will be in...[such as] critical thinking and nursing diagnosis... diagnostic reasoning... ways of organising knowledge,’
‘...we really influenced this new curriculum...’
Figure 16. Women's Voices in the Academy: Finding Voice and Being Heard. Empowerment.
In preparation for the final action research meeting I asked the other members of the group if they would be willing to share with the group a story concerning this research as a whole. It was suggested that this story be written and circulated before hand so that other members could respond in the last meeting. Rejection of this idea was the overwhelming response. The predominate response was a preference for sharing orally with each other as we had always done. The process of collaborative self reflection and dialogue within a critical community had come to be valued and validated. As my love and interest in narrative and story telling was part of the reading I had been caring out at the time I decided to write my own story, which related my own experience and reflection of action research and the substantive issues which were uncovered.

The final session of cycle three revealed more accurately what I had suspected but needed validated. In an earlier progression document I wrote concerning this hunch.

"It could be said that the group is actually carrying out staff development and that this is its primary aim. But I am hesitant to articulate this more substantially without validation by the group itself. But I do suspect at this point that the process events are supporting in part Heron's description of candidates as including, "personal growth through mutual aid...Peer learning communities....and.. Peer review audit." (Heron in Reason and Rowan, 1981:163).
This was to eventually become a context of Women's voices in the academy. This action research, although concerned with the substantive issues of curriculum (social relations, practice and language/discourse) was also fundamentally concerned with the growth and development of novice nurse academics in the dual role of academic and clinician. The responses to my story were validating and inspiring. A fundamental value of this research is revealed in the following voices of various group members.

"...it's really made me look closer and be more observant... [trying] different teaching strategies"

"...the degree to which what we have done has developed our clinical teaching expertise in terms of gaining confidence, taking risks, trying something you wouldn't normally try, seeing how it works."

"...establishment of collegial relationships and mutual trust and respect. I feel we have come to trust each other and respect the contribution we all make, and the tertiary academic situation sets up a lot of competitive stuff and I think I have a sense we developed very trusting respectful relationships."

"...it's group participation and it's not one person at the top..."

Increased confidence and risk taking in the teaching/learning situation. A deeper insight into our own contexts as teachers.

The processes of this research broke down the barriers established by this system of domination establishing relationships embedded in trust, support and respect.
"...our relationships were enhanced - just that day we had certainly enhanced things... they felt better about us after that... changed their strategies."
"Yes, it's totally different... I don't know whether it is altogether related to what we did, as the environment has changed to a large degree..."
"it is a much more pleasant working space... easier to work in'
'[when] ... first started off I was having a hell of a time at ... changing that strategy that - giving RN's back - making them more responsible for patients and communicating with the students as opposed to me and it just enhanced relationships."

'This occurred not only in the university context but also in the clinical setting. The dualistic relationships were disconnected and the split between us was healed for a time.

"... truly because we used to come and debrief ourselves."
"... we had a good chance to say [ how we felt] ... support one another and now we are not doing it we're not getting that support that we did have."
"... debriefing ..."
"Well actually that's what we did in a way - we learnt from each other - 'It was the first opportunity we had to find out what everyone else was doing ... everyone else was having the same problems."
"It's something we should get to do all the time."
"The group is also much better kept smaller... allow[s] the opportunity to debrief and talk..."
"Yes it was problem solving."
"... it was very empowering..."
"we used different strategies and came back with different results."
"... and supported each other's strategies..."
"but you could tell the group when you really stuffed up badly - I doubt whether you could say that in the other group..."
"... and I think this group would say - look you didn't stuff up that badly."

The nature of the group was one of mutual support and understanding. The processes freed us to recognise and
articulate our difficulties in a special space that was our own and where we did not have to compete with others for time and validation of our concerns.

"...it’s like breaking the silence over things. When you break the silence over it all people begin to come forward ..."
"That’s what it has done amongst ourselves it has broken the silence as individuals ...[we can say] you are having the same problem I am having..."
"...cuts down that isolation feeling."
"...like domestic violence."

'We liken this to breaking the silence and identified the process as being as profound as breaking the silence concerning domestic violence.

"When you look back at what [it] was like in 1990 when I first went there, now it’s a breeze really."
"Why do you think that is?"
"...it’s probably because I work there as well, they know me."
"...but I think it got something more...because they all don’t know me ... they are more relaxed."
"...they were going through all those changes..."
"so in fact over the period of time you have been there there’s been some change..."
"huge, unbelievable."
"in the structure of ..."
"...and in their attitude."
"...and the students - they actually enjoy the students now."
‘and plus more of them are doing their studies now and ... I think when they start doing that they see a change in the attitude to the students’
"Yes I think it really has made a difference."
"... a lot of what we did was the initial experience of nursing moving into tertiary ed. and the lack of familiarity RN’s had with this and their lack of understanding- so it was a bit like teething problems."
"... the day pracs had only been in a year when we started this curriculum..."
"as far as the students went and the actual practicum they were so relaxed.‘
‘by the end of the second day they were saying ‘oh yer."
"I think that’s interesting because we made that recommendation out of
the discussions we had."

It provided a deeper insight into the
problematics of working in a health care
institution at this particular time and in
a particular region. There was a sense
of history and evolution of events over
time.

"...you can be really effective in creating some change... I guess it happens
informally a lot of the time- it was just for me being able to do it was an
acknowledgment of the process of taking to teaching the first time."
'You’ve got here the motivation to act as change agents- well we’re actually
talking about this and maybe we can change something."
"because it wasn’t easy - like it is much easier now for me than it was ... in
1990... I probably would have been in the same boat as I was in [then]...
because it was just so alien - half the problem is that you don’t know what
the students expect, you don’t know what the venue expects and you sort of
get this preconceived idea that they don’t want you there."
"...and seeing that you can change your views and hypothesis all the time-
go off at different angles and directions."
"...and how we can make other people change, attitudes have changed... I
guess we to a certain extent have been a catalyst... I don’t think we can take
responsibility for the whole of the change .. it’s a changing time in nursing
basically an exciting time..."
"...there is a lot of hostility that we can change simply by turning it
around..."

We realised the potential for, actuality
and excitement related to personal and
structural change.

"We were saying things like..."
"... let's go with, let's research this idea, let's do an evaluation— in the beginning we weren't doing things like that... I think we have come a long way since the beginning in terms that we are all thinking along those lines."
"... action research ability has improved..."
"[Identified] ...the need that ... educators be better orientated to the job... I ran around asking things about the curriculum but talking about it was the first opportunity to say look what are we really trying to teach here, how are we meant to get there."
"So orientating you towards the curriculum, acting as resource people."

'We had begun to realise that we were developing skills and confidence in research and evaluation. It provided an orientation to curriculum and the importance of individuals as resource people.

As this research progressed I began to realise that the process bore strong resemblance to consciousness raising processes that had been part of my early experience in the Women's Liberation Movement. The idea that this research process and outcomes had been likened to breaking the silence concerning the domestic violence had a profound effect on me. The analogue presented not only the silence that surrounds the personal experience of being a novice nurse academic in the tertiary sector but also the degree to which this 'being-in-this-world' was at times a brutalising experience.

Peters and Robinson (1984:118) in a review of the literature to determine the characteristics of action research suggest that 'strong' as opposed to 'weak' action research is characterised by
high levels of collaboration and resembles a variation on consciousness raising.

In the context of discussing Nursing Faculty Development Speedy (1990) identifies strategies and activities which address gender issues. She suggests consciousness-raising (CR) is a process which provides a framework for moving beyond the personal to include organisational structural problems.

Consciousness-raising in nursing has been coherently addressed by Cheek and Rudge (1993). Although they cite Sorensen's definition of CR, Humm's Dictionary of Feminist Theory (1989:36) provides some valuable insights into the history of the concept, clearly drawing out its similarity to action research, in that, 'CR is a form of data collection and therefore a crucial source of feminist theory.' CR represents both a psychoanalytic process and sociological deconstruction. By bringing to the surface unconscious personal features of oppression and revealing structured oppression CR serves through education to emancipate and empower women though self-awareness and evaluation which in turn increases confidence and self worth (Humm 1989).

This has been likened by Code (1991) to the critical theory concept of false-consciousness. And, this is not surprising given the psychoanalytical influences on Marx, Habermas and other critical social theorists.

Drawing out the importance of making the personal political Cheek and Rudge (1993:16-17) state:

Consciousness-raising, in enabling groups of individuals to articulate their personal and hitherto private, (and thus invisible), concerns, affords the potential for such shared concerns to enter the public domain, become visible, and hence politicised.

Further to this Cheek and Rudge (1993:17) provide helpful insights into this situation in that by 'allowing nurses to become self aware, and to articulate and share their feelings, consciousness-raising allows for feelings of powerlessness, frustration, non-acknowledgment, and lack of self esteem to be linked to the
structural.' It provides a safe context and process to openly express anxieties and problems.

In a study of Nursing Faculty Development, Speedy (1990:32-33) identified that the goal accorded the highest priority by Heads of Nursing in tertiary institutions was that of, 'enhancing the confidence and self worth of each faculty member.' Added to this, in order of decreasing priority, was the development of subject competence, improving team skills and morale, increasing the ability to understand and work in an institutional organisation and the improvement of research skills.

Academic life in the tertiary sector is contextualised in a patriarchal positivist reality. It is hierarchical and competitive to the point of being brutally aggressive. Distrust abounds as academics attempt to outdo each other for promotion, tenure or research funds.

*The collegiality established in the context of this research was a reflection of the views of other nurse academics concerning faculty development.*

Collegiality is characterised by mutual helping and validation which encourages 'shared knowledge, problem-solving, assistance-giving, provision of feedback... and efforts...[directed] ... towards goal achievement' (Speedy 1990:74). Commenting further on this Speedy (1990) suggests that the collegiality established by consciousness-raising in the context of Nursing Faculty Development is characterised by being unthreatening, open, enjoyable, understanding, satisfying, positive, trusting and friendly. In an effort to ease the role conflict, ambiguity and increase job satisfaction Goldenberg and Waddell (1990:541) recommend that effective coping strategies can be developed through 'assertiveness workshops,'... 'ongoing support/discussion groups,'... and a... 'formal faculty networking system for research'.

Mason, Backer and Georges (1991) speak in terms of marginalisation of different groups of nurses and suggest that group consciousness occurs in stages and involves, identifying with the group or common interests within the group, rejection of
'others' definition of their marginalisation and, an evolving sense of injustice. They site the development of self esteem and sense of competence within the consciousness-raising process.

For critical theory, empowerment is an outcome of the consciousness-raising process. Mason et al (1991:72-73) conceptualises CR as:

the enabling of individuals and groups to participate in action and decision-making within a context which supports an equitable distribution of power. Empowerment requires a commitment to connection between self and others, enabling individuals or groups to recognise their own strengths, and resources and abilities to make changes in their personal and public lives. It is the process of confirming one's self and/or one's group.

For Brian Fay (1987:205) empowerment is 'socially transformative action.' Definitions of empowerment are problematic and Gore (1993:55), drawing on Foucault (1980b) refers to empowerment in critical and feminist pedagogy as a 'regime of truth'.

On the other hand Lather (1992:125) recognising that postmodernism reveals the vulnerability of emancipatory discourse also recognises that this critique is carried out by philosophers who have 'the will to power' that underscores the privileged positions of knowing and changing'.

The conceptualisation of power in critical social theory is one which rejects the 'power over' contexts in favour of 'power with' context. Therefore empowerment is 'power with' and aimed at liberation. Further to this Gore (1993:121) identifies three aspects of empowerment, 'power-as-property', as 'agency' and as 'vision' with 'liberatory intent'. In a strong warning against theoretical imperialism she states that empowerment 'must be grounded in a discourse of social reality' (Gore 1993:121). If this is accepted then empowerment is a process embedded in a historical context which is always changing. Therefore, resistant discourses are continually being shaped by the conditions which ground them in their social reality.
Chapter ten: Final Reflections
Concern for rigour, especially notions of validity and reliability, have preoccupied researchers who situate themselves in various scientific paradigms. Although it has been suggested by those in the positivist paradigm that rigour is difficult to establish in non experimental research, that view has been widely challenged (Lather 1991, Merriam 1990, Dick 1990, Guba and Lincoln 1989, Reason and Rowan 1981). Notions of rigour however, are conceptualised quite differently depending on the paradigm in which the research is situated. Concepts such as multiple truths, honesty, responsiveness/reflexivity, dialectical iterative cycles, contradiction, transferability, consistency, credibility, extensive participation and observation, and critical subjectivity are all found in various discussions of the issue of rigour. Lather (1991) in a discussion of paxis-orientated research explores validity in terms of triangulation, systematic reflexivity, iterative cycles and action outcomes which transform the social context of participants. The final reflections on this research and the construction of the thesis explores notions of rigour and the problematics of this research in the context of critical social science, my own role in the research and the measurement of final outcomes. A recommendation concerning the role of action research as professional development for teachers in higher education is put forward. A final brief discussion explores social ecology in the context of this research. The present state of theory development and the contribution of the discipline to personal and organisational change is considered briefly.

Kemmis and Mc Taggart’s (1988:23) construction of action research is revealing of the problematics concerning this research when they state:

Action research is collaborative. It involves those responsible for action in improving it, widening the collaborating group from those most directly involved to as many as possible of those affected by the practices concerned.

One of the main features of this research was that it was a small group project. That is, five novice nurse academics carrying out action research concerning their critical engagement with curriculum in the practice setting, in which those clinicians who were associated with this context were not part of the action research group. Although we made several statements suggesting that they be part of this group, this did not eventuate. Several factors produced this situation. Ethics approval was obtained from the four health care institutions in which the research
was to be conducted. One was returned with approval being conditional on registered nurses who may chose to be involved, do so in their own time. We discussed the problematics of this in terms of being able to coordinate the meetings when shift work, study and family commitments were involved. It seemed that just being able to meet together ourselves was extremely difficult at times. Many meetings were cancelled and rearranged. Further difficulties seemed probable if we were to invite registered nurses to join the group. As the cycles continued the topic came up many times but never came to fruition.

It also became obvious to me that as the cycles continued and the group began to feel more comfortable with each other that there was resistance to opening it up and this included other interested members in the faculty. It was a consciousness-raising group which was in the process of developing trust and it was difficult later on to bring other people in to the group.

There was also for myself an ethical constraint. The previous chapter on research as ethical praxis contextualised ethics in critical social science as being directed towards mutual growth. There was for me an intuitive feeling, elemental reasoning, that to bring others into the group would have effected the nature of the group in a way that was not positive. There was also the sense of responsiveness to the needs and context of this research which was evolving in terms of the substantive issues. What appeared at first to be action research on curriculum was simultaneously action research on the professional development of women nurse academics. Given this, the inclusion of registered nurses in the group was not appropriate. Although, we did seek to include them with the use of questionnaires and an interactive workshop.

The question must be asked, when does ritualistically following the rules laid down for 'good' research mean that dogma rather than rigour has been established? I am reminded of the discussion that followed the decision to use questionnaires to obtain information from registered nurses in the clinical setting. The question was, does this strategy 'fit' with action research? The discussion that ensued, included the concept of triangulation in research and the role of designing, distributing, collecting and analysing the questionnaire. As a strategy it was responsive to faculty development rather than 'good' action research. This idea of 'good' action research not only has the potential to become dogma but may also operate as a 'regime of truth' (Gore 1993) which can act to regulate our activities to the point where reflexivity in the context of
the lived experience of research is lost. The conceptualisations of action research and feminist research abound with the notion of reflexivity and responsiveness. Is there only one right way to be reflexive? I think not. Research within feminist frameworks clearly articulates that research should respond to women's perceived needs rather than the demands of methodology or method.

In coming to an understanding of the ethics of research as a lived experience in the context of critical social science, I began to understand the tension between my situatedness as a participant and as a student in a master's program who had eventual responsibility to bring the project to some form of conclusion. The carrying out of this research was a prolonged engagement that occurred over three academic semesters. The decision to carry out a third cycle was reached by consensus. At the very last meeting enthusiastic plans for new projects were discussed, and although there was some tension concerning my commitment to the group, on the other hand I was aware of the requirements and time limits for my own programme of study.

There is within the literature some discussion of economical action research (Dick 1990). How does one carry out this type of research and balance the forces of reflexivity and economy in an ethical way? There is little in the literature concerning the ethical and personal tensions associated with utilising action research in the context of gaining an educational qualification or conducting ethical, responsive but economic research. Unfortunately it is quite often 'written off' as 'grist for the mill'. The degree to which it influences decisions and contextualises the problematics concerning who owns 'what' has been essentially ignored or left for the researcher to 'work out'. The formulation of an ethic of inquiry in critical social science arose out of that very context. On a more pragmatic note, and on reflection, I felt that formulating a contract between participants, in the ethical context described earlier, would formally assist in setting some boundaries and assist in reducing the tension concerning this matter. In the end I had to say that I needed to withdraw from the cycles with the aim of writing the thesis. Without the framework of a contract I personally struggled with withdrawing from the group as the planned activities were interesting and exciting.

My role varied throughout the three cycles of the research. I was at times a facilitator, resourcer, mentor, friend, and participant and although the tension of my multiple situatedness was ever present I was also conscious not to constrain the ethically constructed mutual growth in the
name of another discourse, which, although it may be emancipatory, may also become just as regulatory as any other discourse.

Finding a women's voice in the academy is the fundamental substantive issue in this thesis. It was an empowering form of professional development. The involvement in curriculum evaluation and development, the gaining of skills in workshop organisation and presentation, the formulation, distribution, and analysis of questionnaires, the writing of abstracts, the writing and presentation of a conference paper, and finally the writing of this thesis have all been part of the process. The utilisation of action research methodology/method has provided an appropriate context for taking control of, and improving our own practice. This approach to professional development, in the context of women nurse academics at the lower levels of the academic hierarchy, has provided a rare opportunity for growth, especially in the area of curriculum evaluation and development. In fact Zuber-Skerritt (1990:118) suggests that to become 'truly professional' we have no other choice but to wrestle away from outsiders the control of our own practice, especially in the area of course development. As educational practitioners, involved in experiential learning in the context of a problem-orientated curriculum, we, more than the non clinical faculty were the experts. Not only did we systematically deal with problems concerning our practice but also the problematics of the social context of that practice especially what is accepted as valid knowledge.

Whether involvement in this research has ensured concrete outcomes is difficult to determine. Only one person in the group was a tenured lecturer level B the other members were contracted tutors (now lecturer level A). At the time of writing all have had their contracts renewed and some have applied for and received a higher level position although still untenured. The degree to which this research has contributed to an increase in skills, confidence and a beginning record in research and publication has been documented. What is difficult and probably impossible to determine is the degree to which this project in staff development has actually increased the chance of promotion and tenure. Although the status of action research is increasing in some areas such as education there are still some in the tertiary system who are embedded in the positivist paradigm who continue to discount other forms of knowledge and research. A women nurse academic carrying out feminist qualitative research of this type is often faced with
insurmountable problems in the arena of recognised scholarship. And, there is both realism and vision in the words of Magda Lewis,

I know no-one who undertakes to propose and engage in feminist alternatives in the academic world lightly... I despair for the loss of energy expended by this struggle ... However, neither the anger nor the frustration are totalising or the most important experiences. (1989:127)

Was the empowerment confined to the personal and if not how much has it altered the repressive structures within the university especially concerning promotion and tenure? An emancipatory intent does not always result in emancipation (Fay 1987, Carr and Kemmis 1986, Ewert 1991).

In terms of this action research it could be said that we merely confirmed what was already known thereby justifying an old view as correct. Winter (1990) cites this as a positivistic trap of action research. He goes on to suggest '[I]f a review is to be valuable the crucial thing is that it must open up previously neglected possibilities, otherwise it is, in retrospect, 'unnecessary"(Winter 1990:32). Therefore what 'opening up' has occurred?

Firstly we described our experiences, then made meaning of these experiences and consequently generated new experiences based on actions aimed at freeing ourselves from domination by our situatedness within two conflicting cultures. And, although we did reveal what was already known we also broke the silence, identified contradictions and deconstructed the taken-for-granted in the culture of nursing. A major difficulty with Winter's (1990) view is that he assumes that what we know is true. The idea that truth is embedded in knowing ignores the influence false consciousness has on our knowing. To the same extent though, the consensus notion of truth put forward particularly by Habermas has little to support it. There are partial truths only, in the same way that there are only partial voices.

So then how do we judge what it is that we have done? We didn't always agree with each other especially concerning appropriate strategies to be implemented with various groups of students in different HCI. Nor did we agree concerning the nature of and the causes of problematics. On the other hand, although consensus was not sought, we found the space that this non consensus context provided was validating of our experiences and growth orientated. Care must be taken to differentiate consensus

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from reality correspondence. And, in this case, the validation of reality exemplified correspondences and internal credibility rather than consensus. External credibility was maintained when the group of clinicians recognised their own voices during the public presentation of the first cycle of the research.

There is no true voice only partial voices. This is relevant in two respects. Firstly, sometimes the construction of the different voices within this thesis, which tell the story of this research, are 'out of character'. There is a feeling as I read over the work that what is being said belongs to someone else. There is also the sense, like the creative act of fiction, I could be a lifetime in writing. I am uncomfortable with some voices just as a fiction writer would be with a character that somehow doesn't appear real. No doubt more reworking would bring the work closer to the creative act of narrative or perhaps like the creative artist we are never quite satisfied with the final product. Secondly the voices of the women in the group are partial in that it is the voice spoken at that particular time in that particular context and does not represent the wholeness, richness and complexity of voice in the totality of life. In that sense they are partial.

The notion of partiality is not one that is considered in critical social science. There is totality, wholeness and completeness instead. A postmodern deconstruction of modernism brings to our attention the persuasive nature of all encompassing theories, such as enlightenment, communicative competence and dialectical naturalism in a type of conceptual over determining. If there are partial truths and partial voices then there are partial answers.

The professional development of teachers in higher education has in the past been relatively unsuccessful according to Cannon (1983 in Zubber-Skerritt 1990). This conclusion was based on the premises that there was little consideration of the inadequate organisational mechanisms within universities, the poor implementation of development strategies, inadequate forces for change and the particular characteristics of university teachers and their work (Cannon 1983 in Zubber-Skerritt 1990). On the other hand Ortrun Zuber-Skerritt (1990) has put forward a successful action research model of professional development for teachers in higher education.

This research has been a partial answer to the uncovered problematics of our situatedness in two cultures. It has revealed that critical action research was an appropriate model of professional development for
novice nurse academics but it was not without its contradictory tension. Living and growing within that tension was supported by the consciousness raising nature of the model as implemented in this particular research. Although it is not usual to make recommendations within thesis I feel compelled to do so. Higher education in Australia is being driven in the direction of increasing structural efficiency and accountability. On the 11th May 1990 the structural efficiency case was tabled before the Industrial Relations Commission. The decision taken was that 'institutions will be required to develop structured plans for staff development in accordance with nationally determined guidelines' (Academic Award Restructuring, NWC 1989). This was directed at increasing skills and effectiveness at an institutional level with a compulsory trial period of twelve months. It was also decreed that this process could not be utilised for purposes pertaining to promotion, advancement or tenure. It was then left to each institution to formulate their own approach. Meetings between the academic unions and heads of institutions have drawn up guidelines for this process. Finally, given that the forces of increasing economic rationalism may use structural efficiency in regulatory ways, I would propose that critical action research as a model of professional development, is an appropriate methodology for improvement in practice which is informed by theory, and simultaneously fulfils the requirements of the award while challenging the very system that would regulate our practice. It is an appropriate model for women academics finding voice, being heard, and challenging the structural limitations on their professional growth and ability to control their own practice. It is a model of possibility which challenges us to dream of becoming different professionals in a different social context.

Chapter 2 established the theoretical relationship of social ecology to critical social science. A case was put for a feminist context for social ecology on the basis of the under theorised nature of human identity and ethics. The application of ecological models to human social behaviour may appear simplistic to some scholars and unrealistic to those involved with transformative change. The challenge for social ecologists is to continue to develop an ecophilosophy which is situated in an epistemology derived from an understanding of ourselves and our experience in the world.
While Fay (1987) speaks of the importance of an ecological sensibility to more coherently conceptualise the scheme of critical social science Freya Mathews (1991) more clearly articulates our relationship with ourself and all around us when she speaks of an 'ecological self'. For nursing the concept of the interrelationship of our self and what we do in the world of nursing validates our unity in diversity and provides a context for the recognition of the interdependency of all facets of the discipline including those who 'do' and those who 'talk' nursing.

Social ecology provides an appropriate framework for the validation of sustainable relationships within nursing and provides a context for the recognition of the complexity, diversity, differentness but inherent tension filled interrelationships within the discipline. At the same time social ecology provides a vision for transformative change in our relationships with each other, and all with whom we interact. By articulating a more comprehensive and coherent framework for our relationship with nonhuman nature and its critique of hierarchy, social ecology also offers a vision for nursing's pivotal role in primary health care.
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SCIENCE
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A Search for new constructs, nursing, social ecology and new paradigm research.

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Introduction

The aim of this paper is to tell a story about several aspects of a much larger entity: a Master of Science (Hons) in social ecology. It has been a journey that I have taken with a group of collaborative, participatory researchers in which we have shared our own knowing of and being in the world of nursing, both in clinical practice and a tertiary institution. As this research was the basis of an educational qualification for one person in the group an adaptation of a model proposed by Perry and Zuber-Skerritt (1990) was utilised. This model is structured to include both core and thesis action research. The core action cycles were concerned with the substantive issue of curriculum implementation and the thesis action cycle with the social ecology of the whole project. It is intended in this paper to discuss in more depth the substantive issue and at this point to make some tentative comment on the thesis action cycle.

Methodology

The Kemmis and McTaggart Model (1988) of action research has been utilised with a reconnaissance phase and then a spiral of planning, acting, observing and reflecting. Kemmis and McTaggart (1988:5) give the following definition of action research: "Action research is a form of collective self reflective enquiry undertaken by participants in the social situation in order to improve the rationality of their own social or educational practices, as well as their understanding of these practices and the situations in which these practices are carried out." Grundy and Kemmis (1981a) cited in Kling (1983:8-9) suggests that there are 3 minimal requirements for a research project to be labelled as action research these are:-

1. The subject matter is a social practice which is seen as 'strategic action' which can be improved.
2. There is a systematic and self critical implementation of an action research spiral.
3. The research involves those responsible for practice in research, the wider community affected by practice, but remains collaborative at the level of the spiral.

Carr and Kemmis (1986) categorise the types of action research based on cognitive interest levels as identified by Habermas as the "... three basic interests of knowledge as technical, practical and emancipatory. " (Webb, 1990:3) At the technical level product is the main emphasis and there is no interest in changing the status quo. Moving to the practical level the emphasis is on understanding the social context of practice by consensual interpretation of meanings of that practice within the present context. Empowerment may occur but there is no fundamental power shift. At the emancipatory level practitioners are emancipated from traditional dictates and coerions. There is a critique of bureaucratic structures and transformations of the organisation. (Perry and Zuber-Skerritt, Grundy 1986)

Core Process

The reconnaissance phase identified our thematic concern as to more substantially identify the how, when, and what of the milieu or organisational culture in which experiential learning took place, and the how, when, where and what related to the teacher and student learning in the experientional setting. This was essentially related to the implementation of a curriculum based on nursing diagnoses and human response patterns. This type of curriculum was new to both teachers, students and registered nurses in the experientional setting. There were also varying responses to what was viewed by some registered nurses as an
Science, reflectivity and nursing care: exploring the dialectic

imported curriculum' which reflected North American nursing culture, 'educationist ideology' or 'just another way of labelling what nurses do'. Five fortnightly 1-2 hour sessions were taped. These sessions involved teacher reflections on the experience of curriculum implementation. The tapes were transcribed and using a coding system various themes were identified. Once this had been completed the group then confirmed that the collated data accurately portrayed their reflections.

THE CONTEXT
The organisation of the experiential learning was such that one educator supervised 8 students of nursing. Several different rural health care settings were utilised. It was considered the responsibility of the educator to allocate the students to patients and to implement the nursing practice necessary. The educator was responsible for student supervision and therefore responsible for actions that students carried out. In some health care institutions direct supervision by an educator was not possible as students were placed in several areas within the one institution.

The Story
The following story is presented from our perspective as educators and are recorded predominantly in our own words. Students were asked at debriefing sessions to reflect on their experiential learning. These students reflections were then incorporated into our own research cycle. The theme of relevance to the present discussion was that related to the degree of collaboration and participation in decision making for student involvement in patient care, responsibilities for patient care, lines of communication and learning. And, the degree to which the level of collaboration was a beneficial experience for all involved.

The initial process for determining students learning experiences appeared to be educator dominant with little mutual collaboration of all groups. In fact the first two models in this system indicate minimal RN involvement in the learning experience. Model 3 indicates some RN interaction with educators and some with students but no interaction with both. The move to System B (see Figure 2) occurred as we reflected on our strategies to enhance this experiential learning situation. System B was a more collaborative participatory system with decision making and experiences being determined by all groups in the experiential learning situation. The first model in this system indicates a highly collaborative situation. On the other hand the second model indicates that all RNs now interacted with both educators and students but educators found it difficult at times to collaborate with students.

Factors in the organisational culture
The several different models in System A and eventually in System B were based on differentiating factors that were characteristic of the particular health care institution. These were often structural features of the organisational culture. To contextualise this action research we reflected on our perceptions of the organisational culture of the health care setting and the tertiary institution, attitudes to the curriculum and beliefs about tertiary education for students of nursing.

Characteristics of the hospital culture
There is a hierarchical structure, and therefore, formality, power, status and authority are vested in a position. There is a strong medical culture. Controlling behaviour is common. There is a large emphasis on time management and the urgency of situations. In situations where RNs had greater responsibility and confidence there was a less obvious medical and hierarchical culture demonstrated.

RN's belief about tertiary education and curriculum
The RN's expectations of students are unrealistic. This is due to lack of understanding of levels of competence of tertiary students in each year.

Characteristics of the University culture
It is less formal with respect derived from knowledge and the quality of the interaction. As there are different ways of perceiving professional behaviour, we did not reinforce the same types of behaviour as some people who possessed different views on professionalism.

Educators beliefs about tertiary education and curriculum
The expectation was that in the move to tertiary education we would see ourselves as professionals but this is not happening, instead we are conforming to hospital behaviour. We should be taking risks and generating new theory. Safe practice is of ultimate concern but features of the organisational culture become woven into the practice.

Characteristics of System A in terms of the Actors
Our perceptions of RN reactions
There was some degree of Horizontal violence. The educator was viewed in a 'policeman' like role. Some registered nurses do not believe they have an educative role. Some registered nurses carry out complex tasks without involving student in the learning experience. Registered nurses did not feel responsible for patient care and at times some did not feel in control of the nursing situation.

Our own perceptions
Alterations in the quality of teaching. This is reflected in such comments as: 'This system created depth not breadth of learning experience.' '...patient care responsibilities retracts from our ability to meet students learning needs.'

Student reactions derived from reflective debriefing
High levels of anxiety. This is reflected in such comments as: '...being supervised was an anxiety producing situation.' '

...educator was able to more accurately identify problems areas and therefore ... might not pass practicum... very powerful role ...and therefore feel more inclined to ask an R.N. when not sure or don't know.'

...educators asked too many questions.'

In the ...psychiatric setting...' they were '...frightened of the patients and needed a lot of direction and support from the educator.

There was a poor quality relationships with educators and RNS. This is reflected in such comments as: '...unable to develop a relationship with the educator due to one day/week placement for practicum.'

...educator demand was high ... teachers were often not available due to educative load and patient responsibilities.'

Summary
It was felt that a 'them' and 'us' situation existed between RNS, educators and students. Educators felt that their patient care responsibilities affected the amount of quality teaching available to students. This was reflected by poor student rapport with educators and RNS and anxiety about the learning experience.

Characteristics of System B
Our perceptions OF RN reactions
Allows RN to to take responsibility for patient care. Allows a feeling of control of the nursing situation. Staff interactions are more positive. Registered nurses do not often call in the educator to perform an educative role.

Our own reactions
Alterations in the quality teaching by educators. This is reflected in such comments as:

'The work was easier but assessing and teaching more difficult.'

'The student was not always exposed to good learning situations and tended to be left to routine boring activities at which they were already competent.'

In this arrangement there is breadth but not depth.

R.N.S. need to negotiate student learning experience more
clearly therefore taking responsibility for learning.

Reduced teacher anxiety. This is reflected in such comments as;
'... feel ... more approachable because the pressure of meeting student's needs is removed ... patient care responsibilities are now clearly delineated... there is more flexibility to meet students needs.'

Student reactions derived from reflective debriefing Learning is more positive, interpersonal relationships are improve and anxiety is reduced. This is reflected in such comments as:
'
'Learning is enhanced when educator not there to watch what we are doing.'
'
'. feel more comfortable when answering directly to R.N ... and. feel like we can ask the R.N. for help.'
'
'. felt accepted by staff who were kind and developed a level of camaraderie felt we had learnt something at the end of the day.'
'
'... don't have to take responsibility for total patient care, especially the decision making, as the R.N. often gives more direction and help especially with time management.'

The educator is freed up to do more teaching than patient care.

Summary

Although educators were in doubt at times about the value of the learning experience this is not supported by the students own reflections. On the other hand an understanding of the constraints on quality student learning had led to the initiation of changes. This altered the social context of that learning experience for students which led to quality patient care delivered by those students. The question we struggled with was: Which is more beneficial for student learning breadth, depth or both together. It was decided that the most collaborative system achievable within the organisational structure produced the most beneficial results and that the establishment of system B altered the organisational culture which enhanced experiential learning.

The relationship between core process & thesis research:

Social ecology, ecofeminism & critical theory.

According to Albrecht (1990:238-239) 'Boekhout identifies the origins of Social Ecology in the 'decentralist' thinkers in the Anarchist tradition, the Solid Organismic tradition in Western philosophy and the critical approach of the Frankfurt School...and..examines the features of the evolution of industrial-technological societies and compares these to the life sustaining or organic features of natural ecologies and organically organised human societies.' Social ecology attempts to unify 'goods' organically at all levels of self, society and nature. (Albrecht 1990:344) These 'goods' are associative and involve cooperation, reciprocity and love. Disassociative qualities such as selfishness, exploitation and authoritarianism are seen to act against these 'goods'. (Albrecht 1990:241) Critical theory, which to some extent gave birth to social ecology, has argued that participatory, democratic, collective action is the hinge pin of emancipatory social change.

Ecofeminism is about the connectedness or interrelatedness of all things on this planet. The theoretical framework for ecofeminism is suggested by Warren (1987, Miles 1981.1986) to be Integrative/Transformative Feminism. The basic premise of this theory asserts that the liberation of women is fundamental to the elimination of racism, classism and nationalism. Warren extends this idea further by identifying what she sees to be the patriarchal world view which creates the nature/culture dualism. This is characterised by value-hierarchical thinking, normative dualism and the logic of domination which justifies the subordination of an inferior group which then legitimises inequality. For ecofeminists the 'self' is viewed as a co-member of an ecological community which is characterised by values such as caring, friendship, appropriate trust, and diversity. (Warren 1987) The relationship between ecofeminism and social ecology is clearly conceptualised in Judy Pinn's (1989:3) explanation of social ecology. "Social ecology will be challenged to think and act in a way through:
- understanding the nature of interconnections - within ourselves, between ourselves and others and between ourselves and the natural world...
- transforming and so improving the world."

In terms of System A we perceived that we were operating within the context of hierarchical thinking embedded in a divisive culture where distrust, horizontal violence, anxiety and dualistic relationships were featured at least some of the time. Within the framework of social ecology and ecofeminism these features are viewed as dissociative qualities which act against associative 'goods' and prevent the evolution of a harmonious ecological community. With the move to System B a more collaborative, participatory, caring and friendly context was evolved. In terms of the core action research it could be said that we merely confirmed what was already known thereby justifying an old view as correct. Winter (1990:32) cites this as a positivistic trap of action research. He goes on to suggest "If a review is to be valuable the crucial thing is that it must open up previously neglected possibilities, otherwise it is, in retrospect, unnecessary. Therefore what 'opening up' has occurred? The answer to this can be found in a consideration of the outcomes of the relationship between the core action research and the thesis research or social ecology.

Drawing on the above theoretical frameworks we had:
1. described our experiences,
2. made meaning of these experiences,
3. and then generated new experiences.
We had deconstructed the dualistic relationships and knowledge embedded in the hospital and university culture but validated the dialectic. Russell (1990:15) suggests that "the process of a dialectic encourages one to continuously reconnect dismembered dualisms." In terms of social ecology the competencies attained applied to three domains.

1. Physical domain. In this domain observations were made and strategies actioned.
2. Conceptual domain. In this domain understanding of and reflection on the social context of our experience occurred. The strategies actioned also changed our experience of the social context.
3. Psychological domain. Psychological coherence was achieved by implementing actions aimed at freeing ourselves from domination by another culture.
Russell (1990:3) suggests "In this domain we find the expression of the human struggle to live outside of the domination by the ideas and emotions of other's and be true to one's own emotions-a struggle which is at the heart of our daily living in the world."

Conclusion

We have established a satisfying and ongoing relationship where working together rather than control over is of primary importance. As Russell and Isom (1990:22) suggest "the transformation that we are most interested in...is the continuing evolution of how we understand our surroundings and ourselves." It could be said that in a very real way all nurses are nurses and not an actors in it as though nursing existed independently of nurses. If nurses/nursing is to have a sustainable future it is important to move away from value-hierarchical thinking, dualistic relationships, domination and authoritarianism, all dissociative 'goods' which are often characteristic of professionalisation. The creation of an organic community of nursing committed to emancipatory change, appropriate trust, validation of diversity and its dialectic, is
fundamental to a sustainable contribution to what is ultimately our prime concern, quality patient care.

Bibliography

IS NURSING A POST-MODERNIST SCIENCE?
Colin Holmes, Faculty of Nursing, Deakin University, Geelong

The nurse theorist Kay Avant recently suggested in Nursing Science Quarterly that a postmodernist approach to science is a most appropriate way for nursing science to serve practitioners (1991:3). I thought it would be interesting to consider what a postmodernist approach to science is, and the extent to which it has already entered into theoretical constructions of nursing. Having enthusiastically sent my abstract to the conference organisers, I suddenly felt like a non-swimmer in at the deep end, drowning in anxiety! I sought refuge in the rather weak claim that the postmodernist distaste for definition at least relieved me of the burden of defining postmodernism. This conjuring trick at least suggested some starting points for characterizing my own limited understanding of postmodernism. That it is, for example, an attitude which disallows formal definitions because it rejects the kind of systematization of knowledge which makes them possible. It rejects the expression of knowledge through systematic theoretical narratives. This could be seen as a response to the disillusionment with competing world views that followed on the heels of the cultural and socio-political revolutions of the 1960s, in which “grand narratives” of legitimation, the totalizing ‘isms’, such as liberalism and classical Marxism, were no longer credible. Thus, it argues the bankruptcy of the dominant discourses; it is an antidote to all totalizing grand theories, which it sees as arrogant; it heralds the end of modernity - the eternal search for the new; it questions rationality - its grounds, criteria, and usefulness, and it condemns the collusion of rationality in social injustices through the substantiation of totalizing forms of thought such as patriarchy, sexism, racism, ageism, liberalism, conservatism, rationalism, and so on, which underlie the dominant discourses of Western culture and society. Postmodernists would insist that they are not replacing these with yet another all-embracing ‘ism’, because postmodernism isn’t a set of emergent doctrines. It has no body of theoretical statements requiring elucidation, confirmation or refutation. Rather, it is an ‘attitude’, or a ‘process’, or even an ‘interest’ - similar to the three knowledge constitutive interests of Habermas.

More anxiety! Should I be attempting to present a cogently argued thesis about postmodernist science and - if there is such a thing - its relation to nursing - or should I simply provoke thought about Kay Avant’s claim? This was easy to answer, since I didn’t have a thesis to argue, and I took comfort from the fact that postmodernists skilfully avoid the construction and defence of ‘positions’, and have generally tried to provoke rather than convince. Were I to be true to the spirit of postmodernism, I should attempt to disrupt the smooth passage of what Foucault calls regimes of truth, placing myself on the margins of intelligibility. Instead, I will share with you some thoughts about the nature of postmodernist science and point to its presence in the discourse of nursing.

Science has attracted a wealth of postmodernist comment. The ideas of Reason, Mastery and Progress, have underwritten the last two centuries of western civilization but according to postmodernism these ideas, represented in the ideologies of science, art, politics, and all the other grand narratives, are no longer convincing. Thus, in his 1979 report on the state of knowledge, commissioned by the government of Quebec, the postmodernist Jean-Francois Lyotard (1979) critically examined the justification and legitimation of science and the investment of faith it has attracted in modern times. He elaborated two major narratives by which science is legitimated - the narratives of emancipation and autonomy. According to the narrative of emancipation, people are the ultimate subjects of science, and science is justified on the grounds that it results in improvements
ACTION RESEARCH IN THE FACULTY OF NURSING

The members of the action research group in the faculty of nursing at UNE-NR are planning a seminar to support registered nurse's who may be involved with student learning and supervision during practicum. This seminar is planned for sometime between Saturday 20th and Sunday 28th April (excluding Thursday 25th April). There will be a small charge to cover the cost of morning/afternoon tea and/or lunch. It is hoped that this will be your seminar. Therefore, so this can be designed in such a way that it is of benefit to you we are asking that you indicate below information that will assist this process.

1. I would be interested in attending.     YES    NO

2. I would be interested in attending_____a week day_____a weekend

3. I would be interested _____one day_____2 consecutive mornings.

4. What would you like included in this program.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

(Some suggestions have been Nursing Diagnosis/Human Response Patterns, UNE-NR Nursing Curriculum, Student supervision and assessment.)

Name.________________________________________________________________________

Address.______________________________________________________________________

____________________________________________________________________________

Contact phone no.________________________________________________________________

Jan Davis on behalf of the action research group.
APPENDIX 3

235
Dear

The clinical tutors supervising students in your unit have been part of a research group examining the implementation of the nursing diagnosis and human response pattern of curriculum in the experiential learning context. As part of this research we are asking for your views on some of the issues related to this context. It would be appreciated if you could assist us with this project by anonymously replying to the following questions.

1. What strengths do you believe the students involved in this type of curriculum demonstrate.

2. What weaknesses do you believe students involved in this type of curriculum demonstrate.
3. The following statements indicate different methods of organising student learning. Could you please rank your order of preference for the following method of student allocation. 

1 = most preferred, 4 = least preferred.

Tutor allocation of students to the:-

patient with an R.N. supervising the student.
R.N. who then allocates the students to patients.
R.N. who then allocates the students to tasks.
patients with the tutor supervising the students.

Please state the reason for your first preference.

4. Would you be willing to act as a preceptor of student learning. Please state your reason. (The preceptor model utilises an R.N. employed by the health care institution to supervise student learning.)

5. Do you believe that you would require more input on the U.N.E.-N.R. curriculum to effectively act as a student preceptor.

6. Do you believe the supervision of students would impede the efficient management of your other responsibilities.

Please state the reasons for your response.
7. What is your belief about the utilisation of Nursing Diagnosis and human response patterns as the basis for R.N.'S clinical practice.

8. What is your belief about the utilisation of Nursing Diagnosis and human response patterns as a teaching tool for students of nursing.

9. What do you believe to be the main problem associated with the use of nursing care plans based on nursing diagnosis.

10. Has your attitude to nursing diagnosis and the U.N.E-N.R. curriculum changed since your involvement with the program. What has been the nature of the change in attitude.

11. Other comments
8.4.91

Dear

The action research group in the School of Health Science is organising a Seminar on Experiential Learning. This seminar is to be held on Wednesday 24th April and would be of interest to any registered nurse who interacts with students in the clinical setting. I have enclosed some information concerning the seminar and it would greatly appreciated if you could inform your staff about this coming event.

Yours Sincerely,

Jan Davis.
On behalf of the Action Research Group.
The Action Research Group which includes Elaine Wells, Joy Taylor, Janet Terry, Heather McDonald and myself are planning a Seminar to be conducted sometime in study week (including weekends either side and excluding Thursday 25th). At this point in time it is envisioned that the duration of the seminar will be one day or 2 consectutive mornings. The broad aims of this seminar are to :-

* familiarise RNS' involved with experiential teaching/learning with the UNE-NR curriculum.
* enhance relationships and 'bridge the gap' between Industry and the University.
* provide an environment which enhances Praxis in experiential teaching/learning.

The following topics have tentatively been identified and this group is requesting the support of members of faculty in providing input to this seminar. Could you please indicate your interest in a presentation on any of the topics below and preferred times of presentation.

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<thead>
<tr>
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<th>DAY</th>
<th>time</th>
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<td>Nursing Diagnosis, Human Responses.</td>
<td></td>
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<tr>
<td>Introduction to Curriculum Philosophy</td>
<td></td>
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<td>Expectations of beginning level practitioners.</td>
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<tr>
<td>The nature of experiential learning.</td>
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<tr>
<td>Assessment in the experiential context</td>
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NAME.................................................................

Thankyou.

Jan Davis on behalf of the Action Research Group.
FACULTY OF HEALTH SCIENCE

The action research group within the nursing centre invite you to attend a SEMINAR on

LEARNING IN THE EXPERIENTIAL CONTEXT

<table>
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<th>DATE:</th>
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<td>8.30am-2.30pm</td>
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<tr>
<td>VENUE:</td>
<td>UNE-NR CAMPUS MILITARY ROAD EAST LISMORE H BLOCK ROOM 1HO8</td>
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<td>COST:</td>
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**PROGRAMME**

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<td>BRAINSTORMING SESSION</td>
<td>JOY TAYLOR</td>
</tr>
<tr>
<td>09.00-10.00</td>
<td>INTRODUCTION TO CURRICULUM PHILOSOPHY</td>
<td>VIRGINA KING &amp; NANCY EVANS</td>
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<td>10.00-10.30</td>
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<td>10.30-11.30</td>
<td>NURSING DIAGNOSIS &amp; HUMAN RESPONSE PATTERNS</td>
<td>JEAN GRIFFITHS &amp; RON BROWN</td>
</tr>
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<td>11.30-12.00</td>
<td>NATURE OF EXPERIENTIAL LEARNING</td>
<td>STEVEN KERMODE</td>
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<td>12.00-12.30</td>
<td>ASSESSMENT IN THE EXPERIENTAL LEARNING CONTEXT</td>
<td>NANCY EVANS</td>
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<tr>
<td>12.30-13.00</td>
<td>LUNCH</td>
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<tr>
<td>13.00-14.00</td>
<td>PANEL DISCUSSION ON THE EXPECTATIONS OF BEGINNING LEVEL PRACTITIONERS</td>
<td>HEATHER BYRNE CHAIR, JANET TERRY, ELAINE WELLS, VIRGINA KING, JAN DAVIS</td>
</tr>
<tr>
<td>14.00-14.30</td>
<td>DEBRIEFING</td>
<td>HEATHER MCDONALD</td>
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R.S.V.P TO THE NURSING SECRETARY (PH. 203 642) BY 12.00 FRIDAY 19TH APRIL TO ASSIST CATERING ARRANGEMENTS.
EVALUATION OF SEMINAR ON LEARNING IN THE EXPERIENTIAL CONTEXT

Please circle the number that best represents your opinion and add comments where indicated.

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<th>lousy</th>
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<th>Comments</th>
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Any other topics that you would have liked to see included ..................

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Any other comments. ..........................................................................

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Who are we kidding. Action Research for whom?
Kierrynn (Jan) Davis, Lecturer, Faculty of Health Sciences. UNE-NR

Introduction

Collaborative, participatory action research is problematic when situated within the context of gaining an educational qualification. Defining in reality the actual nature of the collaborative, participatory and emancipatory aspects is fundamental to uncovering the taken-for-grantedness about the use of these terms and their ethical implications.

Told in two voices, the participant and the reflector, the following is a narrative of my own journey in that particular context. In the spring of 1990 I began an action research project with colleagues concerned with curriculum and experiential learning. As I struggled with this project I also struggled with the ethical nature of the lived experience of this research. I began to see the ethical implications not as ideas superimposed on the project, but as actually arising out of the research paradigm on one hand and my own moral identity on the other.

Ethics and Methodology.

The context of action research in Australia has, to a great extent, been critical social science. Collaboration, participation and emancipation have been conceptual cornerstones of research in this paradigm. Although, a review of the literature does suggest that there is a degree of conceptual conflict.

There are those such as Fals-Border (1992) who speak mainly of participatory action research as reflected by his work with peasant landrights in Columba.

Certainly in Australia, action researchers refer to both the collaborative and participatory features of action research. (Kemmis and McTaggart 1988:22-23) Other Australian action researchers support this stating:

"Action research is distinguished by its adherence to a collaborative ethic. It is a collaborativeendeavour in which groups of practitioners work together to understand their own practice and to increase their awareness of the effects of their ownpractices and of their control over the situation within which they work." (Brown, Henry, Henry and McTaggart 1988:340)

What became obvious early in the research was that we didn't always agree with each other. But we were able to relate this to different influencing factors embedded in the various practice settings and our own perceptions of the different contexts.

Grundy and Kemmis (1981 in Grundy 1987:145) comment that the theory of action research supports 'its consensual epistemology' .... therefore indicating that "...it is inherently collaborative." On the other hand both Winter (1989) and McTaggart (1991) take a different view. McTaggart (1991:45-46) conceptualises collaboration in the following way, and, although this is a lengthy quote, to reduce it would not do justice to the clarity he brings to the topic.

"The dialectical relationship of individual and cultural action in the context of the collaborating group .... is concretely manifested in the expression of disagreements and agreements, misunder-standings and shared understandings, in clashes and agreements over the co-ordination of activities, in the eruption and resolution of conflicts of interest, in the formation and working through of power struggles and patterns of domination and resistance, and the like. These are the concrete face of the processes of contestation and institutionalisation. .... Improvement takes place through the dialectic of interaction between the individual and the group; monitoring the improvement requires collaborative monitoring of the processes of contestation and institutionalisation as they emerge concretely...."

Further to this Winter (1989:56) indicates that for him collaboration means that all participants views will be considered as important. He further states:

"To work collaboratively with these viewpoints does not mean that we begin by trying to synthesise them into a consensus, by counting or evaluating them. On the contrary it is the variety of differences between the viewpoints that makes them into a rich resource, and it is by using this resource.... that our analysis can begin to move outwards from its inevitably personal starting point towards ideas which have been interpersonally negotiated."
Brown et al (1988:340) identify the problematic collaborative issues as those concerned with common interests, differing priorities, differing commitments and energy levels, and status differentials.

Fay (1987) begins a discussion of the limits of critical social theory by suggesting its basis to be the fundamental belief in the power of human reason. He identifies four limitations, including two types of epistemological constraints. It is within the context of the failure of critical social science to consider the relationship between epistemology and ontology that he discusses the remainder, those being therapeutic, ethical and human power constraints.

As Fay suggests the ethical problem of critical social science lies in its lack of consideration of self identity.

“The failure to take adequate account of the traditional character of human identity has often resulted in violating the ethical limits placed on all revolutionary action” (Fay 1987:163)

The consideration of an ethic of critical social science research was, both a 'journey' and a discovery of my 'home'.(Pinn 1991) The discovery of my self as part of this journey came with the proposal of my own ethic of critical social science research through the naming of my own moral identity.

There was with the work of Elizabeth Porter (1991), a sense that for me, the final missing pathway connecting all isolated parts of the landscape had been discovered.

Also to some extent it provided an answer to Brian Fay (1989) concerning the ethical limitations of critical social science particularly as it applied to research in that paradigm.

I will begin with myself as a feminist social ecologist by citing the work of Cook and Fonow (1990:89) two feminist researchers who suggest "To some extent, the focus on ethical dimensions is related to the final epistemological assumption concerning knowledge."

‘And so my journey had begun.’

Guba and Lincoln (1989:117) who work in the area of educational evaluation support the previous statement suggesting that paradigms as worldviews have "...profound implications for how ...we adjudge activity to be moral or ethical ..".

The world view or paradigm therefore determines the epistemology from which the methodology is derived on one hand and the ethical dimensions on the other. ‘This was, for me, to be a fundamental concept in the birthing of a critical social science ethic.’

Positivism

Guba and Lincoln (1989:119) are helpful in their discussion of the ethical and political failure of the positivist paradigm. They suggest that it is the positivists realist ontology and epistemological claims of objectivity and value-freedom that provides the basis for unethical practices that has required the setting up professional bodies to ensure that there is no breach of ethics within the research.

‘As I am presently a representative on a Institutional Ethics Committee this was indeed a challenging postulation.’

As educational evaluators they also go on to identify other problems within the positivist world view. Writing extremely forcefully they suggest a major problematic is the '...warrent to deceive...' based on a search for "...a "higher" order of truth" situated within the interventionist methodology.(Guba and Lincoln 1989:122)

The idea of deception is related to a need for absolute truths and uncontaminated data by which reality can be controlled and predicted.(Guba and Lincoln 1989:84) This may lead to practices which deny informed consent, reduce participant autonomy and are punitive of attempts to withdraw from the research.

The ideas of value freedom/ladeness is linked with the concept of theory ladenness/freedom. Within the positivist paradigm facts are said to exist in themselves unrelated to the context within which they exist. And, being free of theory and value then they are able to be objective.

Guba and Lincoln (1989:129) go on to state, "Both the form of discourse and the particular method conventional science employs embody values....” Citing Bleier
(1986:3) they go on to suggest this in turn "affect [s] what observations scientists make and ...what questions they ask....They affect the assumptions scientists make: what language they use to pose questions; what they see and fail to see; how they interpret their data; what they hope, want, need and believe to be true. Now, further to a discussion of the journey, I came to believe that the premise suggested above applies to all epistemologies.

Constructivism

Drawing on Constructivist epistemology, of which Guba and Lincoln are well recognised exponents, a similar critique of the ethics embedded in the methodology is necessary.

The world view of the constructivist is that we create or construct our own realities. The ontology is relativistic. In other words there are multiple socially constructed realities in which truth is to be found within the '...amount and quality of the information ...

(Guba and Lincoln 1989:84)

Rather than dualistic, the epistemology is monistic and subjective. The researcher and those being researched into, are related to the extent that, the data and conclusions are created by the research process. In this world view the distinction between ontology and epistemology disappears. The methodology then becomes as Guba and Lincoln (1989:84) suggest:

"...a continuing dialectic of iteration, analysis, critique, reiteration, reanalysis and so on, leading to the emergence of a joint construction of a case."

In a discussion of the ethical problems posed by the constructivist world view Guba and Lincoln (1989:135) identify four major problems.

Firstly, due to the close contact between all involved in the research process and tools of analysis (direct quoting, natural language) real problems are posed in terms confidentiality and privacy. Secondly, violation of trust which is closely related to the previous statement. Thirdly, lack of negotiation with participants. This results in a lack of participant '...dignity, self-esteem, and self-agency.' Fourthly, problems of selection, inclusion/exclusion. This is closely related to the previous statement and involves the need for constant consultation with research participants in decision related to what data supports the constructions/reconstructions within the case study.

I had begun to realise that to some extent Guba and Lincoln (1989) had unknowingly begun to link the worldview espoused by the research framework with moral identity. To further locate this discussion within my own framework, my journey by necessity meant an exploration of the feminist contribution to research methodology and ethics.

Feminism

Feminist researchers in social science have also argued the case for the embeddedness of ethics within the world view or conceptual framework of the research. (Driscoll and McFarland 1989:185). These writers identify the value ladenness of the various paradigms and moving in the opposite direction citing Graham (1983) they state:

"Techniques of data collection and analysis are not neutral. They are shaped by the conceptual framework and they may, in turn, further shape that framework. Each technique embodies decisions concerning appropriate units of study, the important characteristics of the units, and relationship between units." They also go onto suggest that "[E]ach technique's usefulness and its limitations are structured by its underlying assumptions. Adopting a research technique means adopting its conceptual framework."

(Driscoll and McFarland 1989:186)

These researchers clearly identify several concerns arising out of assumptions built into the research process.

Firstly, differential power relationships vested within the authority position and knowledge level. Secondly the lack of validity given to women's experience. The likelihood of this occurring is associated with an excessively inappropriate use of quantitative research to study women. And is more likely to occur when research is seen as 'research on women' rather than 'research for women'.

Cook and Fonow(1989:78) also suggest that many scholars have indicated that feminist methodology is concerned with ethics and have attempted "to delineate the central tenets of a feminist ethic." Drawing on work by The Nebraska Sociological Collective (1982) they identify a fundamental tenet of feminism, the oppression of women within
society and within academic disciplines, and place the ethical questions within this context. Elements of oppression, they suggest can be clearly identified in the various research paradigms and cite the following major areas as problematic.
1. Language as social control (vocab, style which distorts women's experience)
2. 'gatekeeping' ... publication, funding, hiring, promotion tenure.
3. theory imposition and intervention. (participant observation)
4. withholding information (interviewing)
The Nebraska Feminist Collective (1983:536) also adds to this the issue of women as research objects.
This worldview argues "...that feminist epistemology and methodology arise from a critique of each field's biases and distortions in the study of women." (Fonow and Cook 1991)

Feminist research is conducted for women with the aim of informing the community about women's lives. It actively seeks to empower women, liberating them and in turn removing the existence of domination of one group over another. This worldview accepts caring, emotionality, empathy, friendship and individual uniqueness as features of feminist research. (NFC 1983. Fonow and Cook 1991) The liberatory stance of feminism is therefore activist and this poses several ethical dilemmas. Empowerment, liberation and action which changes power relationships also has the power to change the nature of intra and interpersonal relations. Quite often intimate relationships are affected with emotional and material consequences. In both these areas responsibility and accountability for the outcomes must be mutually recognised. Caring and friendship involve trust which has the potential to be violated by how the data is eventually utilised.

Finch (1984 in Fonow and Cook 1991:9) suggest
"A feminist has a "special responsibility to anticipate whether research findings can be interpreted and used in ways quite different from her own intentions."

This critique led me to believe that an ethical consideration begins with the very germination of ideas for the project and is fundamental to the methodology and method and cannot be separated from it. Harding (1987) suggests that the purpose and analysis are not separable from the origins of the research problem or question.

Given the context of my own project I believe that the critical social sciences which give rise to feminist research utilising action research method has the potential to fulfil the requirements of ethically sound research in terms of methodology on the basis that it possesses the following characteristics:

Collaborative
Participatory
Democratic
Emancipatory

The subject of the research is relevant to the participants perceived needs. The researcher is both the subject of the research and the person researching.

This was the path but where was the 'Me'. The question I asked myself was 'where was I' situated? If I was an active participant, the 'I', was making process decisions based on my own world view which at that time I was contextualised as 'doing good or doing no harm.' I referred to this as 'personal integrity'. During a residential discussion I was challenged by a fellow student around the meaning of the term I had used. As I attempted to explain 'personal integrity' I realised the vagueness of my own thinking on this issue. The return home to a quiet space enabled me to reflect on my own conceptualisation of personal integrity. My reading and thinking led me to the work of Elizabeth Porter (1991) This experience resulted in a reworking of my previous statement. And, I concluded:

On the other hand, although ethical characteristics are inherent within the world view of new paradigm research, ethical decision making will always be related to the 'moral identity' (Porter 1991) of the researcher/s and their understanding of, and willingness to openly deal with the dilemma's created by the epistemological embeddedness of research ethics and the realities of their own lived experience of research.
My concept of personal integrity had now been replaced with the idea of a living moral identity situated within my own self identity.

This, I felt, conceptualised the answer to the ethical limitations of critical social science as postulated by Brian Fay (1987)

Towards an appropriate ethic of enquiry in critical social science.
The previous discussion considered the embedness of ethics in the world view of the proposed research paradigm and I concluded by centrally locating the final ethical decision making within the moral identity of the researcher/s. I would propose the work of Elizabeth Porter as providing the scholarship in feminist philosophy concerning Moral identity as forming the framework for the development of an ethic in critical social science research.
The 'Self-in-relations'.
In wrestling with the polarisation of a women's ethic of love as espoused by Baier (1986,1987) and caring as proposed by both Gilligan (1982) and Nodding (1984) on one hand, and men's concern about 'obligations' and 'responsibilities' on the other, Porter suggests the 'self-in-relations' as the central idea of her concept of moral identity for both men and women. (1991:196) She views this concept as a synthesis which

"... acts to breakdown the hegemony of traditional thought structures and gender-differentiated practices that rely on dualistic assumptions, by acknowledging new moral tensions, new combinations of possible solutions and new forms of subjectivity. This provides a framework for an emancipatory ethic that is holistic in dealing with general identity and sex-specific dimensions of identity." (Porter 1991:196)

In her concept of moral identity, this 'self-in-relations' is predicated upon self-knowledge which is "... affirmed... [by]...dialogue to determine shared values, common purposes, and the conditions whereby human potential might be realised."

(1991:196) Therefore commonalities, differences and diversity are validated within a dynamic self-growth orientated context. Porter elaborates further, drawing on the work of Taylor (1976) and (Meyers 1987) stating,

"While there is a responsibility both to self and others, the moral filter is the person's sense of identity, for to violate personal identity undermines self-respect" (1991:196)

Reciprocity is the connection between responsibility, identity and respect. She suggests that it is within reciprocal relationships which value interconnectedness that tension creating moral dilemmas can be resolved within a context of mutual growth.

It would seem that Porter’s voice is echoed by Russell and Ison (1990:22) who suggest “the transformation that we are most interested in ... is the continuing evolution of how we understand our surroundings and ourselves.”

Research as Ethical Praxis.
The above discussion has demonstrated the context of ethics both within the research paradigm and the individual moral identity. It is congruent and recognisable as a perspective that allows for lived experience of research to inform critical social science.

Here I have adapted Jack Whitehead’s view of a ‘lived educational theory’. (McNiff 1988)

He suggests that one is led by question and answer to account for personalised contextual practice both in theory development and research. This creates the milieu for the development of dialectical logic. One’s question becomes another’s answer and this answer becomes another’s question.

An Ethic of Social Science Research.

Preamble
The following Principles and Procedures have been formulated within my own world view of a feminist social ecologist with a conscious consideration of my own moral/self identity. They are aimed at asking questions about ethical practices. Research programs within particular disciplines leading to an educational qualification poses certain contextual ethical dilemmas that require negotiation by the person who will finally submit the work. I see the relationship as being one where the context interacts with
moral identity and research paradigms and their value-laden assumptions to produce certain ethical risks which must be negotiated.

A fundamental premise is the utilisation of an appropriate methodology/ method which does not reinforce/support the oppression of women or any other group and demonstrates an attitude of care and compassion and a validation of "humanness " for all with whom we interact in the formulation of the research purpose and the carrying out of the research processes. Rather than pose a set of ethical guidelines based on the concept of rights and responsibilities derived from the research framework, I have instead chosen to put forward a series of questions which should be reflected on at the beginning and at various stages of the research. The questions reflect my own developing epistemological and ontological understanding of critical social science and Porter's (1990) concept of moral identity. The perspective is clearly feminist utilising an alternative view of moral philosophy aimed at creating a dynamic rather than static dialogical community of researchers. I have also made some attempt to problematise some of the questions as they apply to the many different research paradigms. The point I want to convey is not that each of the characteristics inherent in the question is also characteristic of the research, but that as each aspect of the question is answered a new question arises. This should also be considered with the previous discussion which problematised such concepts as collaboration, participation and emancipation.

On the bases of the above is the context of the research:

1. reflexive, reflective, participatory, collaborative, democratic and emancipatory in all aspects of the theory development and research processes. This is problematic in the context of presenting a research project within a graduate program of study or situations which may involve overt political consequences. Research paradigms which are interpretive will not necessarily be emancipatory. And, research which is aimed at being emancipatory may not necessarily in the end be empowering.
2. does it utilise self-criticism and accountability. (NFC 1983:542)
3. is it trustworthy, honest, fair, responsible, confidential supporting animinity (if requested by participants ) and respectful, avoiding manipulation and control.
4. does it "use language that is non-exclusive , accessible and de-mystifying." (NFC 1983:542) This is problematic in the context of submitting research within a graduate program of study and raises the problem of meeting the challenge of multiple audiences. Do we do as Fals-Border (1992) suggests and actually write two theses. Or, do we do as I have done and write in several voices?
5. does it share knowledge (NFC 1983:542) and acknowledge the involvement of all concerned in the conception, development, implementation, documentation, interpretation and presentation of a project.
6. does it recognise the important role of mentorship
7. does it promote harmonious, non-hierarchical, non-dualistic intra /interpersonal relationships that are caring, reciprocal and growth-orientated.
8. have you declared intention and gained informed consent.

Conclusion

If we examine only the research paradigm then it is likely that we will take a rights and responsibilities approach to ethical decision making. If we view research from a 'lived' perspective then I believe it is possible to recognise the inherent ethical dilemmas created by the methodology/method which is then processed through the final moral filter , self identity.

Research then, is ethical praxis. Here ethical considerations and theory as situated within the practice of research by a 'lived being' with a moral identity, is reflexively shaped, as in turn, is the research practice.

I am a snail that carries my home with me on the journey. I cannot separate the 'me' from the 'journey' in the same way that I cannot separate my epistemology from my ontology or my ethic from my self identity and world view.

The model presented is an attempt to overcome the ethical constraints inherent in the critical social science paradigm. It provides an account of human identity as a 'self-in-relations' committed to working through ethical issues with the aim of achieving mutual growth. Knowledge production within this form of social relationship is therefore
consciously collaborative, participatory and empowering at an institutional, intellectual and personal level.

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Nursing and Social Ecology: Re-weaving the web.
Kierrynn (Jan) Davis

Introduction
Living in the tension: Novice Nurse Academics critical engagement with curriculum. is the title of an action research project undertaken by a group of collaborative researchers. It was concerned with the exploration, and implementation of strategies associated with transforming the social relations, practice, language and discourse of curriculum.

This research is situated in critical social science and two particular critical theories, social ecology and ecofeminism form the framework in which the research is embedded. A dialectical deconstructive-reconstructive analysis of the taken-for-granted relationship between education and clinical practice was undertaken. This was carried out both horizontally and vertically on three cycles of this action research project. It is important to point out that all the participants were women with the majority holding nontenured contracts at associate lecturer level. The action research cycles resembled a consciousness raising group which Fay (1987) points out is fundamental to the critical stance of feminism. The relationships within the organisational culture where education and clinical practice interfaced were found to be conflict based, alienating, hierarchical, dualistic and dialectical. Inherent in this dualism was a dialectical tension which affected teachers and students ability to “fit in” and the quality of the teaching/learning situation. The strategies implemented, which were aimed at transforming the nature of these dualistic relationships and contexts, also created contradictory outcomes, which confirmed in practice the nature of the dialectic as proposed in critical the theories to be discussed. The aim of this paper is to examine the nature of the dialectic as it concerns the social relations within nursing and to propose a vision of the process and outcomes which I believe are fundamental to the development of an ecologically sustainable nursing community whose relationships with nonhuman nature are a reflection of our relationship with each other.
Social ecology as critical social science.
Although the following theoretical discussion is somewhat lengthy I felt this was necessary to fully contextualise the later discussion.
Like Feminist theory, social ecology is not monolithic but possesses a diversity in thinking which is clearly situated in ecophilosophy. Social ecology conceived broadly applies scientific ecological principles to humans in terms of our interactions and the way we structure our society. Luchmann (1989) according to Rothenberg (1992) sees this as a way of conceptualising how societies are structured rather than a vision for change.
On the other hand Tokar (1988:133) is clear in his statement that Bookchin as early as 1960 argued for a 'radical social transformation and an evocatively naturalistic vision for how such a transformation could come about.'
Some discussion around Bookchin's conceptualisation of social ecology is important as he has been viewed as one of the most eminent thinkers in ecopolitics and ecophilosophy. (Nash 1990, Biehl 1991)
Bookchin is an eco-anarchist (Biehl 1991) and according to Albrecht (1990:238-239) 'identifies the origins of Social Ecology in the 'decentralist' thinkers in the Anarchist tradition, the 'solid organismic tradition in Western philosophy' and 'the critical approach of the famous Frankfurt School'. Hierarchy and domination are critiqued and attention is draw to the historical embeddedness of ecology and concerns of society.
Dialectical method and critical social theory concepts such as historicity, contradiction, logical reasoning, scientific practice and an allusion to praxis and transformative change is put foreword. He states quite forcefully:
'To use the term social ecology without examining the evolution of social structures is to misuse the term.' (Bookchin 1982:61)
Further to this he states the examination of the social structures 'makes social ecology one of the most powerful disciplines from which to draw our critique of the present social order.'(Bookchin 1982:61)
Social ecology seeks to reveal the way in which nonhuman and human nature (which he refers to as first and second nature) are patterned in a web of interdependence. And, Bookchin (1982:62) clearly locates organicity within his concept of ecology with a definition of social ecology by referring to 'a distinct human and natural community, the social as well as organic factors that interrelate to provide the basis for an ecologically rounded and balanced community.' Therefore the aim of social ecology is 'wholeness' which is viewed as 'completeness' rather than 'oneness'. Completeness is conceptualised as pertaining to natural spontaneity as a function of complexity diversity, self actualisation, potentiality and mutual interdependence.
The epistemology of social ecology puts foreword a non-hierarchical, antidualistic view of reality in both the social and natural context. Self-consciousness appears to be the key to a free and stable human social system and he challenges the accepted role of hierarchy as a stabilising social factor. Epistemologically the argument is well founded but is ontologically limited. For example, in a discussion of institutionalised dominance and submission in the context of hierarchy Bookchin (1982:70-74) alludes only to 'self-perpetuating' bureaucracies and bureaucrats as the root cause of the problem, suggesting it is social ecology's challenge to this situation that defines it as liberatory. As I have, Mary Mellor (1992:109) also questions this limited conceptualisation of social ecology as liberatory, suggesting that in 'condemning all hierarchies, Bookchin leaves us no means of deciding which is worst, or where to begin our struggles against them.'
It is obvious in the intervening years Bookchin has attempted to ground his epistemology of social ecology in the tension between human society and the natural world and is critical of various explanations that have been developed in ecophilosophy to account for this. In his book The Philosophy of Social Ecology', Bookchin (1990) puts foreword his argument against what he sees to be the emotional and metaphysical explanations and visions for dealing with modern problems concerning the environment. As indicated earlier Bookchin is a rationalist, but rejects what he terms conventional reason, which he views as instrumental, analytical and manipulative in the 'true' positivist sense. Putting foreword a case for dialectical reasoning he draws on the early Greek scholars and the work of Engels, Hegel and Marx to develop Dialectical naturalism as the philosophical basis of social ecology.

Bookchin states:
'I believe that dialectical naturalism forms the underpinning of social ecology's most fundamental message: our basic ecological problems stem from our social problems.' (1990:47)

According to Biehl (1991:117) dialectical naturalism views both the organic and the social as a developmental phenomena which has as its basis states of transition which arise from a contradiction between 'what is' and 'what-should-be'. The term phenomena refers to identity, causality and stratification in the context of both the human and non human.

Critiquing other views of these phenomena Bookchin presents an organic, developmental approach to our thinking about the biosphere. In this non-mechanistic approach identity is in the process of becoming and this self-formation is graded and increasingly differentiated and directed towards ...'self-realisation of potentiality.'(Bookchin 1990:31,38)

Therefore, a society based on social ecological premises would be characterised by community, complementarity, respect, love, reciprocity, cooperation, sharing, sustainability, de-centralisation, freedom, fecundity and diversity. (Tokar 1988, Mellor 1992) These characteristics are what Albrecht (1990:244) refers to as associative 'goods'. He suggests that dissociative qualities such as selfishness, exploitation, hierarchy and authoritarianism are seen to act against these 'goods'. (Albrecht 1990:241)

Bookchin argues against the dualistic relationships common to our thinking about our relationships both with each other and nature. Extending this argument he states:-

'Hierarchy, in effect, would be replaced by interdependence, and consociation would imply the existence of an organic core that meets the deeply felt biological needs for care, co-operation, security and love. Freedom would no longer be placed in opposition to nature, individuality to society, choice to necessity, or personality to the needs of social coherence.' (Bookchin 1982:318)

And, although the first part of the statement hints at just another type of thinly veiled biological determinism and functionalist views of humans and society he qualifies these concepts stating:

'External factors, internal arrangements, accidents, even gross irrationalities may distort or foreclose a potentially given development and must be “factored” into it.' (Bookchin 1990:39)

For Bookchin (1982,1990) human identity is located within the process of becoming and self realisation, by its very nature, is ethical. This is particularly relevant when one considers that for both Janet Biehl and Murray Bookchin human nature and reason are conceptualised as gender-neutral.(Plumwood 1992a) The work of Carol Gilligan (1982) and Nel Noddings(1990) on women's moral development and ethics,Belenky et al's (1986 ) research on women's
cognitive development and Roberts (1981) work on horizontal violence within oppressed groups, point to gender specific development and outcomes. Therefore on that basis, the question must be asked:- Why then is ecofeminism fundamental to a world view which would apply ecological principles to human interactions and the organisation of human social structures?

In other words what can feminism bring to the ecology movement.

**Ecofeminism and Social Ecology.**

Ynestra King (1989b:19) answers this by stating:

“Feminist analysis supplies the theory, program, and process without which the radical potential of social ecology remains blunted.’

But, should ecofeminism be considered as just another epistemology alongside other epistemologies of social ecology? Or should it be seen as a platform upon which an ecosphere should rest?

Tokar (1988) suggests that ecofeminism is able to provide relevant and significant perspectives which would assist social ecologists in achieving their aims. But, Simmons, (1992:3) although suggesting there are many shared views, warns against the move to ‘coopt’ ecofeminism into social ecology. In a very strong statement she warns:

“The attempts to absorb ecofeminism into other ecological theories and to compartmentalise gender issues is an attempt to minimize the possible impact of feminist agitation and preserve the status quo.’ (Simmons 1992:3)

This is further supported by Mary Mellor (1992:52) who states that 'In unifying ecology with feminism, however, there is danger that the balance of the partnership may tip towards saving the planet at the expense of the politics of women's liberation...'

There is no doubt that there is convergence of thinking in ecofeminism and social ecology. A major theorist in ecofeminism, Ynestra King, according to Plumwood, (1992b:36) and contrary to Simmons warnings, refers to herself as a social ecologist. King (1989b) identifies and validates the contribution social ecology has made to the critique of our relationships with each other and the environment but she describes social eclogy as incomplete. Without a feminist analysis, she comments, social ecology will be unable to achieve its ontological goals of a free and ecological society.

Bookchin (1990) puts foreword a rationalist epistemology that is highly critical of some voices in ecofeminism. He, along with Janet Biehl (Bookchin 1990, Biehl 1991) condemns what is seen to be the excessive emotionality, spirituality, incoherence and inconsistency of ecofeminism, referring to this as ‘mystical ecology.’

But as Plumwood (1992b) points out this appears to be related to a lack of understanding of the diversity of thinking in ecofeminism. Plumwood (1992a:10) commenting on this diversity states:

'Since the theory of ecofeminism results from the application of feminist perspectives to the problems of ecology, it is as complex and diverse as feminism itself. Ecofeminist have a common vision of society beyond militarism, hierarchy and destruction of nature. But although ecofeminists are broadly in agreement about these goals, they often have different analyses and political strategies in mind for achieving them.'

Cultural ecofeminism aims to combine spiritual and political activities, but still see the spiritual ones as central. (Plumwood 1992a:10) Mellor (1992) on the other hand speaks about affinity ecofeminism which she suggests overlaps with cultural ecofeminism. Contrary to this Social ecofeminist de-emphasise the spiritual
aspects and emphasise the social structures and political nature of the struggle to resolve our problematic relationships. (Plumwood 1992a, Mellor 1992)

It is perhaps Bookchin’s failure to bear in mind this context which has resulted in his angst against what he describes as mystical, intuitive thinking in ecology. In plain terms ecofeminism is about the connectedness or interrelatedness of all things on this planet. That, we are all part of an enormous web, and, what happens in one strand is very likely to effect all the strands to a lesser or greater degree. This is similar to the deep ecology view of the connectedness of all organisms in the galaxy. (Matthews 1988)

Ecofeminism has been defined in several different ways, although there does tend to be some merging and overlap. Predominately this diversity of definition is dependent on an individuals commitment to either a cultural (radical) or socialist-anarchist viewpoint. Ursula King (1989a) asserts that ecofeminism is a blending of the political and the spiritual. It has also been described ..."as a social movement that connects the devastation of the earth with the exploitation of women." (Wyman in Hallebone, 1989) For Ynestra King (1989b:19) 'Ecofeminism finds misogyny at the root of ...[women's] oppression.' She also believes that there is a relationship between the types of denigration and dehumanisation of certain groups, for example women, people of colour, the working class, animals, nature and the environment. (King1989a) Ecofeminists assert that ecological perspectives therefore, connect various forms of oppression. Moreover they suggest that the four interlocking pillars which support a patriarchal society are sexism, racism, classism and naturism.

As pointed out earlier ecofeminism is not monolithic and American and Australian theorists tend to differ in the degree of emphasis they give to the basis for women’s greater ability to save the planet and establish a free and ecological society. An understanding of the theories of ecofeminism requires an exploration of our conceptualisation of non-human nature. Boulding (1981 cited in King,U 1989) drawing on the earlier work of De Beauvoir as expounded in the Second Sex (Biehl1991:14) asserts that the world view of non human nature is that it is seen in terms of the ‘Other’. Further more, she suggests the very basis of ecofeminism is the need to re-conceptualise the ‘Other’, the not ‘Us’. Mellor (1992:267) contextualises this idea in terms of human relations as ‘Transcending the me-World’. There is a need to transform the world view of domination, hierarchical relationships, anthropocentrism, scientific objectivity and neutrality and the mind body split. Warren (1987) extends this argument by identifying what she sees to be the patriarchal world view which creates the nature/culture dualism. This is characterised by value-hierarchical thinking, normative dualism and the logic of domination.

Warren (1987) asserts that there is an urgent need for a reconceptualisation of how we view ourselves and non human nature. Although Biehl (1991) argues that ecofeminism appears to lack any coherent theoretical frame work I believe Integrative/ Transformative Feminism as suggested by Warren (1987, Miles 1981,1986) to be the most appropriate framework. The basic premise of this theory asserts that the liberation of women is fundamental to the elimination racism, classism and naturism. The removal of all forms of oppression necessitates a fundamental change in world view which involves the acceptance of several other premises. One of the main theoretical stances is the validation of women’s diversity of experience. And, Warren (1987) refers to this as the ‘politics of difference’. It also supports the social construction of knowledge. The ‘self’ is viewed as a co-member of an ecological community which is characterised by
values such as caring, friendship, appropriate trust and diversity and reciprocity. (Warren, 1987)
The relationship between the theoretical frameworks presented is finally realised
in Judy Pinn's (1989:3) explanation of social ecology.

"Social Ecology will be challenged to think and act in a way through:
  i. understanding the nature of interconnections - within ourselves, between
    ourselves and others and between ourselves and the natural world.....
  ii. transforming and so improving our world."

**Speaking the Unthinkable**

*Silence renders our experiences invisible and we cannot heal what we cannot
hear or see.*

As Jenny Howe suggests

"Power relations in nursing practice are not only defined in relation to patriarchal
underpinnings and rigid organisational structures , but noticeably a major feature
is women against women."(Howe 1991:57)

We had discovered features of a non-collaborative decision making process
concerning student allocation to client care and therefore learning experience had
led to features which were increasingly stressful to teachers , students and
registered nurses. The stresses concerned questions related to who was finally
responsible for client care, teachers inability to actually teach due to high client
care responsibilities and high levels of student anxiety. The end result was poor
quality relationships between all involved.

A deliberate move to formalise a more collaborative decision making process was
initiated to improve students learning experience and heal the split between
'talking' and 'doing' An anticipated effect of collaborative decision making was that
it would reverse the previous situation. Initially there was an enhancement of
positive relations between teachers, clinical staff and students, improvement in the
quality of teaching and learning, and reduced student and teacher anxiety.
A contradiction though, became evident as we reflected on our collaborative
strategy. As successful as this strategy was, later on we were to discover that in
many situations the quality of the experience depended very much on individual
personalities and attitudes of both those in the health care institutions and the

**The taken-for-granted nature of the social relations.**

Historically there has been a dichotomy between those who practiced at the
bedside, clinical nurses (real nurses) and those who taught in the nursing school
(established nurses). Lawler in her 1984 study of the resocialisation of clinical
nurses to the academic setting indicates that there has been ...'powerful social,
historical and political forces which have shaped nursing, and which continue to
do so, and which have contributed to, if not caused, the chasm between educators
and clinicians.' (1984:iii) This is supported by Street's (1990) study and our own in
that there is a taken-for-granted reality of conflict between those who do nursing
and those who only talk about it which continues to perpetuate the theory practice
split nearly 10 years after Lawler's ground breaking work.

Outlined below is a diagrammatic presentation which explains this situation. It is an
adaptation of several theories situated within critical social science, Boulding's
(1981) concept of 'otherness' the 'not I' and Warren's (1987) concept of the
patriarchal world view is offer as an explanation for the findings of this research.
(Fig. 1)

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1. I am indebted here to Jenny Howe and her workshop of that title which I attended at the
Dismantling the dualisms but living in the tension.

The contradiction
Reconnecting the dualisms, (thesis [doing]-antithesis[talking]) is the process of creating the synthesis (collaboration). Adjustments to the collaborative process occurred over the three cycles of the research. It was a dynamic, flexible, dialectical and precarious process rather than static and inflexible and predictable. We often altered decisions concerning the degree of collaboration and with whom the collaboration would occur. These decisions were dependent upon the attitudes of clinicians and our own feelings of acceptance. The precarious nature of the relationships was frustrating and discouraging at times. Our reaction to the frustration and powerlessness to positively influence the situation led to meetings that would just erupt into laughter.

Hill (1991:45) presenting a Marxist view of the dialectic and echoing Bookchin's concept of 'becoming' states that it is a process of 'perpetual change' where the thesis itself produces its own contradictions. Within this view of the dialectic...

...the antithesis emerges from within the thesis; antithesis is therefore intrinsically connected to the thesis, and it is out of the dimensionality of relationship (as opposed to undirected opposition) that synthesis is cast, this synthesis becoming in turn a new thesis producing its own contradictory antithesis in a continual process of 'becoming'" (Hill 1991:45)

The continual movement between thesis (doing)-- antithesis (talking)-- synthesis-(doing/talking) -- new thesis(collaboration) -- contradictory antithesis (non collaboration, doing--talking) -- synthesis in a cyclic fashion created the new dialectic.

We were in fact moving from 'what is' to to 'what-should-be' with all its contradictory tension. (Fig.2)

Will the 'real nurses' please stand up..
"Nurse educators are academics who have lost touch with practice."(Street 1990:18)

The contradictory nature of this phenomena was also revealed by the interesting finding that once teachers took on a consultancy in clinical practice but continued to teach students during practicum at the same institution, the nature of the relationship changed. They were perceived as 'real nurses' with 'real' understanding of the practice setting. On the other hand we also found that once registered nurses in the health care institutions took up tertiary studies both teachers and students were considered resource people who could assist in the negotiation of the difficult task of studying at degree level. But this was not constant and tended to revert to the previous state where emotional dumping and petty picking at students use of first names, state of students dress (whether or not they wore a petticoat) differences in workloads was a phenomena of the dialogue. There is no doubt that again becoming a 'clinical nurse' as mentioned above certainly on an interpersonal level provided the teachers with credibility and reduced the 'Them' and 'Us' dualism but the thesis-antithesis-synthesis-new thesis with its contradictory tension had re-emerged as part of this process. We were again situated in the transitional contradictory stage of 'becoming' with the developmental tension located in the self realisation of potentiality within 'completeness'.

The understanding of this phenomena is assisted by Retsas's (1988:30-31) discussion of Aristotle's rules of dialectical thinking. The whole can only be understood in terms of its contradictory relationship to the parts, and as a
consequence, the relationship is dynamic and always changing to become a new form.

Summary
I have clearly taken the position that ecofeminism provides for social ecology the ontological basis for the achievement of a nursing community in the process of 'becoming' that which it should be. That is, moving towards completeness. It could be said that all nurses are nursing not actors within it as if some how nursing existed apart from all those individual nurses who compose nursing. The patriarchal discourse which sets women against women, or sees one group of women or one individual women as 'other' can only be overcome through firstly recognising dualistic relationships embedded in nursing culture. And, secondly, the implementation of action strategies aimed at disconnecting these dualisms. The epistemologies of social ecology clearly indicate that the 'self' is viewed as a co-member of an ecological community which is characterised by such values as caring, appropriate trust, diversity, reciprocity, connectedness and interrelatedness. The collaborative strategies we implemented were an attempt to achieve an ecologically grounded relationship between those who 'talk about' and those who 'do' nursing. I have conceptualised the epistemological/ontological relationships in the following way. The praxis of social ecology is demonstrated in any actioned strategy which is aimed at dissolving dualistic relationships embedded in the alienation of human from self, other humans and the biosphere, and, which seeks to 'enhance the power of people to shape their own history' (Tokar 1986:140) in a manner which validates human dignity, diversity, freedom and creativity. A prolonged continuation of a world view that encourages and supports an excessive human self interest and alienated stance towards all that is 'other' or 'not I' can only lead to further alienation, oppression and lack of connection and completeness.

Conclusion.
I believe firstly that as individual nurses we must begin to think ecologically, and secondly, structure our nursing community ecologically. Having first put our own house in order. I believe we will have created a foundation for an authentic relationship with both human and nonhuman nature which moves beyond an environmentalist framework. It will be a practice which has as its basis a vision for transformative change and emancipatory praxis. I also believe that transformative change which is organic and developmental will be characterised by a contradictory tension. Learning to live in the tension maintaining, articulating and acting out the vision of the process and outcomes of transformative change is as Val Plumwood (1992a:10) suggests 'an exciting political project which would shake the foundations of systems of domination around the world.'
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FINDING VOICE, BEING HEARD AND LIVING IN THE TENSION: NOVICE NURSE ACADEMICS CRITICAL ENGAGEMENT WITH A PROBLEM ORIENTATED CURRICULUM IN THE ACADEMIC AND PRACTICE SETTING.

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Master of Science (Hons) (Social Ecology)

November, 1993

A thesis submitted to the University of Western Sydney, Hawkesbury.
PLEASE NOTE

The greatest amount of care has been taken while scanning this thesis,

and the best possible result has been obtained.
Summary

The thesis is an account of the lived experience of doing research in the critical paradigm in the context of the discipline of social ecology. It is a story with actors, a plot, and actions over time. The Worldview of social ecology has embedded within its epistemology the scope for the creative act of narrative therefore this thesis is a critical conversation told in four voices. The research was embedded in critical social science methodology and method, and attempted to understand and transform the problematics concerning the social relations, practice, language and discourse which were uncovered when five novice nurse academics engaged in teaching a problem-orientated curriculum in the practice setting. It was a critical action research project based predominantly on the Kemmis and McTaggart Model (1988).

The research also debated the nature of participative, collaborative action research undertaken in the context of gaining an educational qualification. Relevant to this point, two other contexts of the research were uncovered. The lived experience of 'doing' critical action research with colleagues and friends in the context of gaining an educational qualification revealed both the praxic nature of ethical research and the reclaiming of an authoritative women's voice in the academy.

The ethical nature of research in critical social science and the degree to which it is argued that critical action research is by its very nature more ethical than any other paradigm was considered. The nature and role of human identity especially as situated in the academy was explored in an effort to conceptualise both a methodology and a self identity which was embedded in a context of mutual growth. This growth was similar to Bookchin's (1990) transitory states of 'becoming' what we wished to become in the academy. It was, what is known in organisations as professional development.

I have named this becoming, 'Finding a Women's Voice and Being Heard.' Although 'finding voice' is situated in the personal, 'being heard' involves the 'not I' together with structural features of institutions. As a collaborative group we actioned strategies in an attempt to deal with the structural limitations to our 'becoming'. These strategies, together with the consciousness raising nature of this particular action research project enabled participants to speak of their own empowerment within an academic context in which they were often rendered powerless.
Certificate of Originality

To the best of my knowledge and belief no material previously published or written by another person, except to which due reference is made in the text is included in this report.

Neither this research nor this thesis have been submitted to any other University or Institution for the award of a higher degree.

J.M. Davis
Lismore
21.11.93.
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LIST OF ABBREVIATIONS

ARR  Action Research Reader
CR   Consciousness Raising
EN   Enrolled Nurse
HCI  Health Care Industry
HRP  Human Response Pattern
NANDA North American Nursing Diagnosis Association
ND   Nursing Diagnosis
HRP  Human Response Patterns
NUM  Nursing Unit Manager
RN   Registered Nurse
USA  United States of America