
From the editor

Janie Brown Nowak, a member of the review board, has served as consulting editor for this issue on nursing history. Dr. Nowak has broad experience in nursing practice and education and received a doctoral degree in curriculum and teaching in nursing education from Teachers College, Columbia University, New York. Her doctoral thesis was titled "History of Master's Education in Nursing, 1945-1969." She has since had several publications related to nursing history. Dr. Nowak is chairperson of the History of Nursing Museum in Philadelphia and a charter member of the Society of Nursing History in New York City and of the American Association of the History of Nursing. She has recently been appointed to the Heritage Committee of Sigma Theta Tau. To assist in the review and selection of articles for this issue, Dr. Nowak graciously shared with members of the review board the "Criteria for Evaluating Historical Research," adapted from work of the Heritage Committee, Sigma Theta Tau.

—Peggy L. Chinn, PhD, FAAN
Editor

ALL FROM THE SAME HANDIWORK . . .

There came a time near the beginning when a nurse found nursing without form, and there was concern on the face of the nurse. And the nurse said, "Let there be research." And the research was divided into empirical and historical. And the nurse saw that it was good.

And for the next four days the nurse brought forth the analysis of numbers of every kind. And these numbers were fruitful and multiplied. And nursing was again with form and body of knowledge. And the nurse saw that it was good.

And the nurse brought forth the analysis of nursing through words of every kind. All things great and small were interpreted and described. And the nurse was not certain that this was good. And this caused a great firmament.

And on the final day, while the nurse was resting, a great sleep overtook the nurse. And when the nurse awoke, it was decreed both numbers and

words were all from the same handiwork and both should be part of future generations of nursing research.

This scenario alludes to the wide variety of approaches and methodologies available in nursing research. They all contribute to defining nursing: its past, present, and future. The development of empirical research has made significant progress in the past four decades. There are now many nurses skilled in the use, interpretation, and application of statistical data. There is concomitantly, broad acceptance of this methodological approach. Historical research methodologies have been slower in scholarly development in nursing. A cadre of experts in historical research has emerged only within the past six or seven years. There has also been, however, a general misunderstanding of the purposes of historical research and its relevance to nursing and a distrust of its methodologies as scholarly.

The general purpose of research is a systematic inquiry using scientific methods to answer questions or solve problems.¹ Historical research is an interpretive study of past events, to investigate origins of movements such as master's education in nursing, patterns of events such as nurse recruitment patterns or admission criteria in nursing education, and motives of nursing leaders.

Historians have not usually been eyewitnesses to these events, so they use critical judgment in weighing and balancing the evidence to establish authenticity of events, patterns and relationships of events, and motives of nursing leaders. The methodologies include the use of external and internal criteria to evaluate the authenticity of written documents. External criteria validate the authenticity of such information as the author and date. Internal criteria validate the statements within the document. The same rigorous examination of oral reports and interviews is accomplished.

In empirical research, the data are compared statistically; for example, the probability of

margin of error is determined to be less than .05, .01, or .001. Similarly, there are three levels of truth in historiography (writing of history).

1. $P =$ less than .05 is called historical probability; that is, based on all of the data available, the historian provides the best explanation possible.
2. Verification indicates that the historian can convince others of the authenticity and rationality of these conclusions.
3. With decisive proof, the strongest case, the evidence confirms the historian's view and denies those of rivals.²

Another aspect of historical research that is similar to empirical research is the place of moral judgment or ethics. Quantitative research actively manipulates variables, so the protection of human subjects is essential. It involves the nature and purpose of experiments as well as the use of the subjects. Historical research, on the other hand, manipulates facts to determine truth, and these revelations may cause damage to the reputation of nursing leaders or organizations. In determining a moral judgment, the historian asks: Is the information essential for the study? Do the data provide additional evidence of authenticity?

As nursing historiography matures, the place of moral judgment assumes more importance. It is no longer necessary to portray historical and present nursing leaders as flawless, ideal role models. For example, to explore the motives of Florence Nightingale's extended seclusion would go beyond the simple explanation of personal sacrifice. Nurse historians would explore other complex possibilities such as her understanding of the use of power. Nightingale did not fit the frail, swooning image of the Victorian woman. In-

stead, she allowed men to do her work. She wrote articles and prepared reports, and men presented these documents in the English Parliament.

As scholarly nursing histories emerge, the relevance of nursing history becomes clearer. The past is the prologue to the present "[It] tells us more than the story of the past. It reveals . . . the beginnings of movements in which we are participating today."^{3(p77)} It is the archives of the growth and development of the nursing profession. History also provides us with a source of professional identity.⁴

Professional identity emerges from collective past experiences, is imbued with specific values, and encompasses personal philosophy. Plato has said that a philosophy gives a person the ability and the knowledge to distinguish the life that is good from the life that is bad. The people who embody personal philosophy and therefore reflect professional identity become models, ie, heroes, heroines, and leaders.

As historians have said, those who do not learn from the past are condemned to repeat it. Nursing must embrace a respect for its history and use its resources to build a better future.

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—Janie Brown Nowak, EdD, RN