

## FROM THE EDITORS - Margaret McMillan and Jane Conway

### A DIVERSITY OF INTELLECTUAL AND PRACTICE ENDEAVOUR

Former Associate Professor Judith Townsend is an RN and midwife with experience in nursing practice and education. In this issue's guest editorial she draws on her experience as an educator, a clinician, and person who has experienced illness to raise a number of questions about the nature of the relationship between nurse education and nursing practice.

While Townsend asks why nothing has changed in relation to the complexity of managing the education/practice interface, the papers in this edition of *AJAN* present a diversity of intellectual and practice endeavour, demonstrating that a great deal of change has occurred in other aspects of nursing over the 30 years that Townsend draws upon.

In this *AJAN*, Roberts reflects on the way in which former nurse clinicians have adapted to the university environment and the extent to which they have acquired university values. She concludes that it is research and the development of skills in analytical thought and writing that led to an increase in scholarly enterprise in nursing. She argues this scholarship needs to be fostered early in a career if the scholarly productivity of nurses is to improve dramatically.

Cummins et al focus on the issues facing nurses who are working with clients who are trying to manage the symptoms of HIV/AIDS. The paper reveals the extent to which nurses have aligned their roles and functions more closely to the typical behaviours of their clientele. Of particular interest to nurses in this area of practice are patterns of adherence to medication regimes and the extent to which this impacts on quality of life. In this area of practice, the nurses' functions centre on an intermediary, facilitative education role, as a necessary response to a change in the context of practice, disease patterns and symptom management.

In contrast to the focus on clients, Campos and Jalaludin's study centres on the extent to which nurses engage in preventive self-care. They questioned the values behind nurses' unwillingness to accept immunisation for influenza. They examine the theory of reasoned action and planned behaviour, and ask questions about the beliefs and perceptions and the benefits and costs of changing health behaviours of patients when health professionals exposed

themselves to the risk of contracting influenza in the health service environment.

Clearly, one of the major developments in health service is the reliance on evidence to support changes in practice. In this edition, Evans highlights the growing interest in the synthesis of interpretive research in systematic reviews. He argues that whilst further methodological development is needed, there is potential for meta-evaluation to meaningfully contribute to the shape and form of evidence for better care that is oriented to consumer needs.

Another significant change in nursing has been the use of technology in health care. Anderson et al question the extent to which the human dimension is part of technological interventions. In their study, they examine the experience of a person who is reliant on a cardiac pacemaker. It is important to explore the ways that people respond to technological interventions. They suggest that nurses and other health professionals need to be more aware of client reactions to and expectations about illness modalities. While many health professionals assume that cardiac pacemaker implantation is a routine and trouble free procedure. For the client such an encounter with technology is potentially life changing, complex and emotionally charged event.

Recognition of the factors nurses continue to consider when providing care are typified in the paper by Rogers Clarke. She argues that along side the trauma related to diagnosis of breast cancer, the context in which clients live can pose extra problems for symptom management, particularly if they live in a rural setting and have limited access to health service personnel and a social support network that can identify with their needs.

The range of papers in *AJAN* draws attention to both the diversity and complexity of contemporary health service delivery and nurses' roles within it. Furthermore, the papers exemplify the multiple manifestations of nursing care activities. Perhaps the ongoing challenge for nursing is to determine how the continued need to manage and deliver care proactively through activities such as those described in this edition, while still meeting the expectations of clients that nurses be highly visible in the health care team.