Canadian Journal of Nursing Research, 2000, Vol. 32, No. 3, 103–107

# <u>Happenings</u>

# Off the Shelves and Into the Streets

## Sally Thorne

There is a firmly established tradition within nursing research on clinical phenomena that recognizes that what we learn through our inquiries might have relevance not only for the scholarly and practice communities but for all those affected. In the case of chronicity, we fully recognize that persons with chronic diseases and their loved ones may find many of our conclusions immensely interesting, empowering, and even therapeutic.

Sadly, the pressures of academic life and our traditional understanding of what constitutes a credible research portfolio often take precedence over our inherent sense of what might be the most appropriate way of disseminating the knowledge we develop. While it has become relatively common in grant proposals to profess an interest in creative dissemination approaches such as publishing our findings in a daily newspaper, writing a column for a women's magazine, or arranging to be interviewed on talk shows, far too few dedicated researchers put such lofty ideas into practice (Stoddard, 1997).

In many instances the need for truly creative dissemination strategies is most felt within the qualitative research community. Because quantitative research is designed to build upon a particular kind of science, the results of a single study often make little sense outside the context of the evolving body of knowledge in that field. Further, while the results of such studies may have potential at the level of informing treatment refinements or policy decisions, and thus be highly relevant clinically for the practitioners involved, they may not have particular relevance for health-care consumers. In contrast, qualitative research is often designed specifically to obtain a better theoretical understanding

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of a particular human phenomenon, in order to allow health-care professionals to work more effectively and sensitively with those who are intimately involved. It tends to make visible the intricate human relational dynamics, the communications subtleties, the psychological twists and turns that characterize an illness experience and reveal its complexities and variations as different kinds of people experience similar situations in different ways. It is rather difficult to do justice to the findings of a really good qualitative study in a 15-page scholarly manuscript, so the appeal of methods that afford more depth and more accessibility to all concerned is a particularly high priority (Morse, 2000; Sandelowski, 1998).

In addition, it is worth noting that many researchers have adopted social and feminist underpinnings that lead them to critique, throughout the research process, the social structures that influence the phenomena under study. In some instances they capitalize on this directly through participatory action research methods, while in other instances they simply believe that their findings will create information that, if people could grasp it, might change something in their collective thought. Although the attitudes and insights of health-care professionals are a common target for this new information, it is also quite common for researchers to suggest an urgent need for changes in public attitudes, those general understandings about something that have a profound effect on how it is experienced in the social contexts that shape people's lives (Flaskerud & Anderson, 1999; Traynor, 1999).

Two Canadian initiatives have at last produced convincing evidence that creative, innovative research dissemination strategies can be both well received and highly respected. Research teams led by Vangie Bergum in Edmonton and Ross Gray in Toronto have managed to transform their qualitative research conclusions into theatrical productions that both entertain and inform. In so doing, they have effectively bridged the gap between the research community and the public at large, and have set a very high standard for the rest of us.

Vangie Bergum is a well-known Canadian nurse researcher and ethicist. Using knowledge acquired over an extended program of research and scholarship (Bergum, 1989, 1997; Ross & Bergum, 1990), Dr. Bergum has collaborated with Dr. Jeffrey Nisker, an obstetrician from London, Ontario, to bring the social message of that research into focus through a theatrical production. Set in the delivery suite of a hospital, *A Child in Mind* captures the wonder and excitement of becoming a mother by juxtaposing the experiences of six very different women as they make the transition. The stories reflect the complexities and contradictions inherent in social and economic disparities as well as the challenges posed by new reproductive technologies and genetic engineering. The audience is encouraged to share the experiences with the women and to ponder the implications of the contemporary social context in which they take place. The play highlights issues of ethics, social justice, and self-exploration, and it stimulates thoughtful deliberation. At the conclusion of the performance, the audience is invited to participate in a discussion with the authors/researchers and actors.

Ross Gray, a psychologist practising within the Ontario cancer-care system, has collaborated in a program of research involving a number of partners, including oncology nursing leader Marg Fitch. Dr. Gray, Dr. Fitch, and others have brought the findings of their qualitative research to the experience of metastatic breast cancer (Gray, Fitch, Davis, & Phillips, 1997; Gray et al., 1998) and developed a marvellous theatrical production to portray the findings in all their complexity. Their production, Handle with Care?, was developed in a series of workshops during which the researchers collaborated with an artistic director. members of an established theatre group, and women living with metastatic breast cancer. Using transcript excerpts, thematic analyses, and ongoing discussions within the group, the team developed a script and wrote the play in two formats, one intended for health-care professionals, the other for community audiences. The play has been performed across Canada and in the United States to great acclaim, and the researchers have systematically evaluated its impact using feedback forms distributed to various types of audiences. They have been able to use that evaluative material to extend theorizing about the issues and implications of theatre as a means of disseminating research findings (Gray et al., 2000) and plan to extend this method into the field of prostate cancer.

It should come as no surprise to researchers that professional and lay audiences have responded enthusiastically and warmly to these productions. Both plays synthesize difficult and profound human experiences into a format that permits us to appreciate variation and diversity as well as common threads. Neither tries to convince us of a particular universal understanding, and indeed both are oriented towards enhancing our sense of what is possible. In each case, the reception by professional and community audiences indicates that the research has captured the essence of an experience without reducing it to a stereotype. People who have had the experience feel heard, their caregivers gain new ways of understanding them, and both parties come away with a new appreciation for the nuances and complexities of the experience. Audiences see this as research towards some socially relevant thinking, and a bridge is built between researchers and those whom they study.

In both of these instances, the team includes seasoned and reputable researchers who have established credibility within their field and also have something important to say. They have taken considerable risks in devoting the exhaustive time and energy required to convert their findings into a theatrical form that is both scholarly and entertaining. They have had to develop new partnerships, extend their skills into a new domain, and retain a commitment to the nature of the knowledge being disseminated while also respecting the demands of the artistic form. Such efforts are clearly not for the faint of heart or the neophyte researcher.

Drs. Bergum and Gray and their partners have clearly demonstrated to us that there are ways of bringing our research findings to life if we truly believe in them and have a passionate commitment to responsible and effective dissemination. The effectiveness of their work challenges the rest of us in the research community to break free of our scholarly strongholds and give serious attention to the range of possibilities that are out there for communicating the knowledge that our research generates. When we become more active and creative in our dissemination efforts, we will truly be able to do justice to the wonderful forms of knowledge that nursing research so frequently yields.

Because chronic illness is a substantive field with many communication challenges between health-care consumers and professionals and many intricate psychological and social dimensions, one would hope that chronic illness researchers will take up the challenge and invest in truly creative forms of dissemination.

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