EDITORIAL

A Matter of Choices

Being the editor of a nursing research journal requires one to be both reactive and visionary, but the former is the greater requirement by far. Topics for each focus issue are selected 5 years in advance. Some topics are selected because we know they have and will continue to have a profound impact on nursing and patient care. Others are barely perceptible issues when we begin the planning process but are predicted to become of major importance to society and hence to nursing science.

Choosing to devote an issue of CINR to the economics of nursing was a "no-brainer." This was not a "visionary" decision. We were reacting to the major force that had been driving nursing and health-care decisions for a decade. When we made the choice, nursing was in the midst of absorbing the effects of downsizing. Although nurses and nursing were invisible, in many ways, in the decision-making arenas, the cost of nursing was highly visible in health-care budgets and could not be easily ignored. Nursing budgets were drastically slashed without thought to or understanding of the effect of the cuts on the nursing workforce, health-care services, or patient care. Many believed that the cuts were a way of holding nursing accountable. Nursing leaders welcomed the opportunity to demonstrate nursing's significant contribution to society — this time, however, with a price tag attached. Granting agencies encouraged applicants to include an economic analysis. When we scheduled this issue, therefore, we believed there would be a proliferation of studies eager to report their findings on the economic costs of nursing, and we invited Dr. Gina Browne to serve as the guest editor.

Gina was an obvious choice, an easy choice. I have known Gina since the mid-1970s when Canadian nursing research was in its infancy and we were the "new kids on the block" — mere babes. Even in those early years, we all knew Gina would make a profound difference. She was a visionary, not just sensing trends but creating them. Gina was also a mover — she thought "big," knew how to get things done, and knew how to envision a problem beyond the confines of nursing.

Almost a decade ago I was intrigued to learn about the establishment of the Systems-Linked Research Unit on Health and Social Services Utilization at McMaster University, a unit developed to evaluate models of care and their ability to meet the needs of the vulnerable,

the heavy users of the health-care system. It was an innovative idea, breathtaking in its scope and ambition. I was not surprised to learn that Gina was its founder and director. She and her team had the foresight to "cost out" health-care utilization long before the dollar sign became predominant in health-care decision-making. Thus Gina had not only the requisite specialized knowledge and expertise to be a guest editor, but also the credibility and connections within and outside of nursing to assemble this important focus issue.

Given the timeliness and importance of the topic, we expected to be deluged with manuscripts. Experience has taught us that we need to review at least 12 manuscripts in order to select four that reflect the range and depth of the field being featured. You can imagine our surprise when the deluge failed to materialize and we received only three submissions, one of which came from the McMaster unit. It was unclear why there were so few.

After some investigation and reflection, the answer became obvious. Although the nursing scientific community and the nursing administrative community place high value on costing the effectiveness of nursing care, in reality few nurse-scientists had included a cost analysis in their grant applications, and those who had — these notable exceptions are outlined by Sochalski in the Discourse — did not have the data ready for publication. We were faced with a dilemma. We could either cancel the issue or put one together relying heavily on the expertise and research of the McMaster Systems-Linked Research Unit. Gina and I debated the pros and cons, but in the end it was I, as *CJNR* editor, who decided that the topic was too important, too timely, to postpone; there was much to be learned from the few pioneers in the field.

Gina and I worked closely together to build an issue that would maintain the Journal's integrity and high standards. Gina stepped aside when it came to submissions from the Systems-Linked Research Unit team. All unsolicited manuscripts were blind, peer-reviewed. As with other focus issues, we invited scholars in the field to write the Discourse and Designer's Corner. We also departed from convention by creating a new section, called Translating Research. An important aspect of a research program is deciding when to disseminate the findings and when to make them understandable to a larger audience. After 10 years of accumulated evidence, Gina's team is at this stage. We created a new section to feature their work, and this section will be another standard feature of CJNR, appearing from time to time.

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The take-home lesson taught to me by Gina is that economics is not about dollars — yes, dollars are involved, but economics is really about choice, how we use resources when faced with competing alternatives. It is a recurrent, underlying theme of every article in this focus issue. Rodney and Varcoe argue for the importance of conducting ethical inquiry concomitantly with economic inquiry if we are to make choices that are in the best interest of the public. They point out that value clarification is critical in making "good" choices — which are not always the least expensive ones. Roberts and her colleagues costed out different types of postpartum services to different groups of mothers. Although a few mothers "cost" the system more, it may be that the provision of early detection and treatment will actually translate into enormous savings in the long-term health of both mother and infant. In the Discourse, Sochalski asks two fundamental questions — namely, how many resources need to be allocated to nursing to create and maintain a well-qualified and effective nursing force, and how should these resources be allocated to most effectively meet the evolving health-care needs of the public. An economic framework is needed to address these questions and to outline the different choices available. Gafni, in Designer's Corner, provides an insightful analysis of the construct of willingness-to-pay and its measurement. This important construct will only gain in significance as the public and policy-makers decide who will foot the bill, and for what aspects of health-care services. Browne and her colleagues are at an enviable point in their research program. After conducting 12 well-controlled randomized trials, asking basically the same questions and using the same measures but with different populations, they have arrived at patterns of findings that are robust as to drive policy. They have translated their findings into language that is comprehensible to policy-makers and the public. Finally, Guerriere and Murphy, in Happenings, cite much promising work on the economics of home care that is now underway in Canada.

This issue of the Journal is about choices and choosing. In choosing to publish this issue devoted to nursing economics, we hope that the word *economics* will conjure up new images and stimulate new ways of making ethical choices in the best interest of the public.

Laurie N. Gottlieb Editor