

LETTER TO THE EDITOR

In her paper "Knowledge in Nursing: Contemplating Life Experience," Will (2001) presents and comments on some of my (Kikuchi, 1992) published ideas. She states:

Kikuchi (1992)...suggest[s] that it is only the body of nursing knowledge that members of the profession are responsible for developing. She dismisses what she calls preclinical knowledge as taken on assumption and outside the discipline. And she dismisses personal knowledge as subjective, incommunicable and *publicly unverifiable*.... Kikuchi's articulate argument against knowledge gained outside the discipline is a powerful barrier to explicit articulation of life-informed knowledge. (p. 111)

Life-informed knowledge is precisely what Kikuchi (1992) argues against. It is knowledge that is intensely personal, private, and subjective... It is knowledge acquired during a lifetime of non-clinical as well as clinical experience, a well-established personal ontology. We cannot disregard it, and it is naive to suggest that we can. (p. 111, 112)

In the above passages, Will omits vital related ideas set down in my paper, and therein gives the erroneous impression that I do not consider preclinical knowledge nor personal knowledge to be important, nor knowledge that nurses use in their practice. Here are my words:

It is only the body of nursing knowledge that nursing is responsible for developing. Nursing is not responsible for developing the other kinds of knowledge nurses use, such as the preclinical and personal knowledge nurses use to do their work. By *preclinical knowledge* I mean that knowledge that nurses use or take on as assumption, which lies outside their discipline; by *personal knowledge* I mean that knowledge described by Carper (1975) as subjective, incommunicable, publicly unverifiable, and therefore not possessed by anyone other than the one whose direct knowledge it is. Indeed, how could nursing be held responsible for developing such private knowledge? (Kikuchi, 1992, p. 33)

Also, Will states, "Kikuchi (1992) argues that because a nurse's ontological and epistemological perspectives are private, subjective, and exclusively her possession, they cannot be shared, and therefore educators are not responsible for them" (p. 111). Nowhere in my publication do I express these ideas!

In conclusion, erroneous presentation of any author's ideas is problematic because it cannot be undone and expunged from the literature.

Consequently, others, unaware of the errors, may propagate them in their publications.

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References

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