

GUEST EDITORIAL

## **Shifting the Rhythm of Chronic Illness Care**

**Carol Jillings and Sally Thorne**

It was not difficult to find inspiration for a guest editorial given the wonderful set of submissions we were privileged to review for this issue of *CJNR*. The range of manuscripts — focusing on such diverse dimensions as illness narratives, cognition and self-awareness, management/intervention strategies, and knowledge translation — surfaced the broad scope of knowledge that is being generated as well as the creative practice applications that are emerging at the core of chronic illness care.

This issue of the Journal differs from previous issues dedicated to the topic of chronic illness in that it highlights a new conceptual “spin” on the theme of documenting the chronic illness experience. The articles that make up this volume describe research that takes us well beyond an understanding of discrete disease categories and into the domain of chronic disease management. They reflect a trend towards theorizing the problem of chronic disease as a system dysfunction being enacted at the level of individual experience. In conceptualizing the problem of chronicity within a health-care system centred on the management of acute illness, the researchers contributing to this issue explore dimensions of illness awareness and self-care management from unique yet intersecting perspectives.

Additional inspiration for these introductory comments came from an unlikely source: a Sunday broadcast on CBC Radio 2 of a program in Gary Cristall’s series *The People’s Music*. This particular instalment described the genesis of English-Canadian folk music in the early 20th century. Cristall’s discussion of ballads was especially striking: folk ballads have always reflected events in history and their impact on our everyday experiences and emotions. Every kind of music expresses and comments on the human condition, but the folk genre is perhaps most intimately linked to lived reality and context. In our attempts to understand chronic illness — through research that describes, discusses, measures, and extends theoretical understandings — we are invariably led back to the client context and to the lyric and rhythm of the illness experience. In effect, we seek to analyze and understand the ballads that clients render for us,

so that we may be inspired to meaningfully improve the systems of care that variously constrain or support their lives. We draw upon their voices as the heart and soul of what this work is all about. And, as Alison Phinney urges in her Knowledge Translation contribution in this issue, we must move beyond formulaic KT rhetoric as we attempt to mobilize the knowledge we have gained towards meaningful social action and a better way of caring for those whose circumstances have not been a priority for the systems in which we operate. We must take what we know and craft it into applications that ultimately make a difference to people's health.

We have enjoyed the process of watching this issue of the Journal find its own harmonic rhythm. We have found it inspiring to learn how many brilliant minds have been devoted to the problem of chronic illness and are creating evidence-informed means of improving the systems that enable the chronically ill to live as well as they can. We believe that each article in this collection has an important role to play in the broadened thinking and inspired action of our readers as we apply a research perspective to addressing the complex issues inherent in the chronic illness management challenge we face together.

---

*Carol Jillings, RN, PhD, is Associate Professor, School of Nursing, University of British Columbia, Vancouver, Canada. Sally Thorne, RN, PhD, is Professor and Director, School of Nursing, University of British Columbia.*