

Part III

Nursing Theory and the Philosophy of Science

Introduction

In a 1973 lecture to the *American Nurses Association Nursing Research Conference*, Walker argued that the practice theorists had an overly broad conception of theory. She quoted Ellis' definition of a theory as "a coherent hypothesis, or set of hypotheses, or a concept, forming a general framework for undertaking something" (Ellis, 1969, 1434). She also mentioned Dickoff and James' slogan that a theory is a conceptual structure built for a purpose. Walker pointed out that these conceptions of theory are unsuitably broad. According to them, any kind of activity-directing metaphor counts as theory. For example, tennis players and golfers are sometimes told to swing through the ball, as if the ball was not there. This is a conceptual structure with the purpose of helping the player perform well. It would be absurd, however, to think of this metaphor as a scientific theory. Walker concluded that nursing should adopt a "tighter use of 'theory' more in line with its conventional use in the sciences" (Walker, [1973] 1997, 74). Walker's critique thus raised for nursing a fundamental question of the philosophy of science: What is a scientific theory?

Walker was among many nurse scholars in the nineteen seventies who wanted to develop the empirical, scientific side of nursing knowledge. In their vision of the discipline, nursing was analogous to other basic sciences in the academy. Nursing would have its own conceptual apparatus, laws, and subject matter. It would develop a distinctive body of knowledge from which practitioners could draw, thus supporting nursing's claims to professionalism. In their philosophical thinking about what a basic science should be like,

nurse scholars articulated views about the character of scientific theories, concepts, methods, and evidence. This philosophical view of science became the center of the seventies consensus about the character of the nursing science.

Chapter 2 argued that nurse scholars came to regard nursing as a basic science because of a philosophy of science known as “the received view of theory.” It is ironic that as nurses were discovering and adopting this view, philosophers of science were abandoning it. If, as Chapter 2 argued, the relevance gap is a consequence of the philosophy of science adopted by nurse scholars, it is crucial to understand the received view of theory, how it influenced nursing, and why philosophers rejected it. The chapters of this Part will address that task. Chapter 8 will unpack the philosophical ideas that surround the received view of theory. By necessity, this chapter will be rather detailed and technical. Chapter 9 will trace the influence of the received view on nursing scholarship. Nurse scholars have debated how this philosophy of science influenced nursing theory (Suppe & Jacox, 1985; Gortner, 1993). With the elements of the received view in hand, we will be able to show that the influence of the received view is much deeper and more pervasive than has been previously imagined. It is all the more important, then, to understand why philosophers of science rejected the received view of theory. Chapter 10 will present some of the important arguments. Since most contemporary philosophical views about science take their starting point from these criticisms, it will be important to treat the arguments in some detail. The chapters of Part III will begin to trace the positive consequences for nursing conceptions of theory.