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Method of Participatory Action Research for Nursing

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Complex problems in health care systems require a variety of types of research. Increasingly it is thought that the method of participatory action research (PAR), by those who are closest to a problem, may be extremely beneficial as a complementary source of new knowledge and information. The daily work of nurses, doctors, managers, nutritionists, information specialists, and others involves face-to-face contact with many stakeholders and community groups who have something to gain or lose depending on their participation in systematic problem identification, data collection, and analysis.

Participatory action research, a form of applied research, is a methodology designed to foster creative contextually-relevant investigation and problem-solving by a community of active practitioners and scientists. “Community-based action research seeks to change the social and personal dynamics of the research situation so that it is noncompetitive and nonexploitative and enhances the lives of all who participate” (Stringer, 1999, p.21). Formal research, as typically conducted, often operates at a distance from the everyday lives of nurses who are caring for patients. Consequently, research and knowledge in the health and nursing sciences sometimes seems irrelevant to the problems nurses find at work. There is a need for valid, scientific research that is immediately and clearly relevant to nursing practice.

PAR is an alternative worth considering. This research method is based on the assumption that describing events and formulating explanations by an uninvolved researcher may not result in solutions adapted to real-life problems. People typically described as “study subjects” should be involved as equal and full participants at every stage of the research process to extend their understanding and expand their problem-solving capacity (Whyte, 1991). This premise is especially cogent for nursing with its need for nurses’ development and evidence-based practice. The majority of nurses in every country have a great deal to offer and to learn about scientific approaches to solving health problems. Nurses, like those in many fields, are more apt to function effectively when they understand new procedures because they have actively participated in their development. Nurses and patients may fail to adhere to the authoritative dictates of outside “experts” who take as their job solving other people’s problems for them. In action research, recognition is given to the fact that health systems are dynamic and change continuously, and that nurses participating cooperatively with others are highly capable of active involvement in these changes.

A principle of participatory action research is that researchers studying with participants develop a fuller understanding of the how and why of health systems, the issues at stake, and their relevance to health. Through ongoing dialog, all participants working together produce agreements that provide a platform for the development of practical actions in peoples’ healthcare. The activities of the groups entailed are facilitated and coordinated by a small group of researchers who provide gentle direction (Whyte, 1991).

The main steps in participatory action research methodology are summarized in Table 1. Identifying key stakeholders -- people whose lives are affected by a researchable problem -- is one of the first steps. Nurses come in contact with many individuals and groups. They participate in health care activities nearly continuously with medical doctors, teachers, social workers, and administrators. Nurse researchers using action research, therefore, include these stakeholders in exploring and defining the nature of the research problem and its specific questions. Charting the social dimensions of the research context helps in identifying primary stakeholders sometimes known as the “critical reference group”. For example, in a 3-year research project currently in progress at Okinawa Prefectural College of Nursing (Henry, Ueda, Kato, & Yoshikawa, 2003)
Table 1  Main steps in participatory action research

Preliminary Activities

- Identify key stakeholding groups
- Identify key individual stakeholders in these groups
- Establish the researcher role as non-threatening but legitimate
- Establish the focus of research activity in general terms
- Build a preliminary picture of the context, problem, need, and significance

Constructing the Vision

- Enable stakeholders to jointly construct accounts of the situation in context
- Gather information using interviews, questions, observations, and documents
- Develop descriptive accounts of the context and need through community profiling
- Organize intra-group sessions with established ground rules and agendas
- Convene inter-group meetings such as public forums, colloquiums, conferences
- Keep all stakeholders regularly informed using minutes, bulletins, and interim reports
- Make accessible descriptive accounts in written form

Interpreting and Analyzing

- Use interpretive processes to extend and clarify problems and priorities
- Ask interpretive why, what, how, who, where, and when questions
- Link concepts through concept mapping
- Review the mission, operation, problems and context of healthcare organizations
- Describe antecedents and consequences of the problem of interest
- Analyze by categorizing using valid content analysis methods
  - Apply standards of rigor appropriate for naturalistic inquiry: Strengthen credibility through prolonged engagement, triangulation, and peer debriefing; strengthen transferability, dependability, and confirmability
- Describe steps to protect rights, privacy, and ownership, and to ensure cultural sensitivity

Formulating Solutions

- Inform stakeholders and the public of research activities then invite feedback
- Connect people in mutually supportive networks on the topics being addressed
- Use appropriate, understandable, and non-technical language

Evaluating

- Review project purpose, plan, and projected outcomes throughout project
- Describe and confirm project activities
- Gather data to enable people to judge the extent research activities were successful in achieving the project's purpose
- Enable participants to make judgments about the effectiveness of their activities
- Prioritize solutions and future activities

to identify the required roles, responsibilities, and outcome competencies for beginning and advanced professional nurses, the critical reference group includes medical doctors and nurses who are teachers, administrators, and practitioners, employed in governments, health services, professional associations, and academic institutions. Leading stakeholders from each of these critical reference groups participate actively in our study.

Once stakeholders have been determined, they are brought together as a group to improve understanding of the situation being addressed. Typically at this stage, sessions are held to profile the community of interest and gather information to clarify the problem and plan of action. Questions to determine the characteristics of the community might include those about major events and developments, the effect of governmental policies, economic conditions -- especially employment, access to health services, and the availability of education resources. Simultaneously, documents and observational data are assembled for use by all participants. Then interpretive questions are asked, such as, “What is the problem?” “What is happening?” “How does it affect the population served and nursing care?” “With what results?”

Once data are collected, quantitative and qualitative methods can be used for interpretation and analysis. As noted in Table 1, an essential analytic activity is providing evidence that the research has been carried out rigorously and that all procedures have minimized the possibility that the investigation was superficial, biased, or insubstantial. Traditional criteria of objectivity, reliability, and validity are usually replaced with criteria for establishing rigor in interpretive inquiry. In formulating solutions for a research problem, informing stakeholders and others, including the public, about project activities is a main requirement. For the Okinawa 3-year nurse competency research, results in years 2 and 3 will be placed on the World Wide Web, presented to local nursing and medical associations, and published in journals. Stakeholders are kept informed of project activities through meeting minutes, interim reports, and special bulletins or announcements.

Formative evaluation is done at critical points during the project and summative evaluation is done on its completion. In all evaluations, which are both written and oral, original plans for the research are revisited: Research activities and outcomes are assessed for their effectiveness and participants' satisfaction. Then plans are revised as necessary, unresolved issues are prioritized, and achievements are celebrated. Usually at this stage, too, the principles of participatory action research are restated and methodological questions are discussed.

In conclusion, for every scientific investigation, the research method which is selected depends on the context in which the research occurs. Participatory action research can be used to resolve either straightforward or complex problems, in organizations and communities, locally and internationally. Participatory action research is especially helpful in nursing where working together is uppermost to enhance people's health and health care through harmonious development of a leaning community. Democratic inclusion of those involved and the empowering of action research methods generate participant commitment to practical yet creative research results.

References

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