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Journal Update

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Journal Update

by Ronald J. Chenail

The Qualitative Report, Volume 1, Number 1, Summer, 1990

The following is a formal proposal for a prospective journal entitled *Qualitative Reflections on Clinical Practice*. The proposal, written by Ron Chenail, has been submitted to Sage Publications, Inc. for their consideration as new journal. Sage already publishes some journals which concentrate on qualitative, critical, or clinical topics such as *Journal of Contemporary Ethnography*, *Journal of Family Psychology*, and *Theory, Culture & Society*; therefore they seem to be a logical choice as someone to publish a qualitative journal which focuses on clinical work. Presently, the proposal is being circulated by Sage among a group of outside reviewers. Marquita Flemming, the contact editor with Sage, believes that there should be some news on Sage's decision regarding the *Qualitative Reflections on Clinical Practice* proposal sometime this fall. The latest news of the journal's progress will be reported in future Journal Updates. In the mean time, we at the *The Qualitative Report* are interested in hearing comments on any and all aspects of the proposed journal.

Qualitative Reflections on Clinical Practice

Statement of Purpose

The journal is dedicated to the exploration of clinically-relevant scholarly activity of a qualitative and critical nature. The editors are primarily concerned with examining the particularities of family therapy, clinical social work, counseling psychology, and clinical psychology from alternative and innovative perspectives. The pages are devoted to interdisciplinary, dialogic, didactic, and practical discourse for researchers and clinicians alike. The aim of the journal is to foster interdisciplinary discussion between qualitative researchers and mental health clinicians in order to create meaningful and relevant means of reflection on the clinical experience.

Statement of Need

In the field of mental health (e.g., family therapy, clinical social work, counseling and clinical psychology, etc.) there is no journal which focuses on the broad range of qualitative research methods (e.g., phenomenology, ethnography, discourse analysis, rhetoric of inquiry, narrative analysis, etc.) and philosophies (e.g., positivism, post-positivism, constructivism, critical theory, post-modernism, etc.) as applied to the study of the therapy experience. Most mental health journals divide their pages between theory, practice, and research articles. For the most part, "research" has meant logical positivist inquiry of a quantitative nature. Currently, qualitative pieces in mental health publications form a very small minority of the total journalistic output. There is no forum in the clinical field for discussions on innovative and creative qualitative inquiry. Given this situation, the pages of *Qualitative Reflections on Clinical Practice* can become the medium for this much needed debate.

Statement of Relation

In the field of mental health, *Qualitative Reflections on Clinical Practice* is most closely related to three journals: one, *Psychotherapy Research*; two, *Family Therapy Case Studies: A Journal for Therapists at the Front Line*; and three, *Psychotherapy: Theory, Research, Practice, and Training*. All four journals focus on the clinical experience, but *Qualitative Reflections on Clinical Practice* is the only one of the group to concentrate solely on the interaction between qualitative methods/orientations and clinical practice. Other mental health journals such as the *Journal of Marital and Family Therapy*, *Family Process*, *Social Casework*, *Journal of Family Psychology*, and *The Counseling Psychologist* occasionally publish qualitative pieces; however, all of these journals must divide their pages between theory, practice, and training articles, as well as dividing the research papers between quantitative and qualitative inquiry. Another unique feature of *Qualitative Reflections on Clinical Practice* is its dedication not only to publish papers from a positivist perspective, but also to present work which explores non-positivistic methods and approaches to research (e.g., post-modernism, critical theory, post-positivism, etc.).

In the field of qualitative research, *Qualitative Reflections on Clinical Practice* would be the only journal dedicated to the study of clinical work and the only publication which would attempt to publish articles which would reflect a broad range of methods and perspectives. Most journals in the qualitative area are either grounded in one discipline's world-view [e.g., *American Anthropologist* (anthropology), *Evaluation Review: A Journal of Applied Social Research* (evaluation), *Sociological Inquiry* (sociology), etc.] or are focused on one general method [e.g., *JBSP: The Journal of the British Society for Phenomenology* (phenomenology), *The American Journal of Semiotics* (semiotics), *Journal of Contemporary Ethnography* (ethnography), *Discourse Processes* and *Discourse and Society: International Journal for the Study of Discourse and Communication in their Social, Political, and Cultural Contexts* (discourse and communication analyses)]. Very few journals have attempted to focus a qualitative perspective on a particular discipline [e.g., *Anthropology & Education Quarterly* and *International Journal of Qualitative Studies in Education* (education); and *Sociology of Health & Illness: A Journal of Medical Sociology*, *Social Science & Medicine*, and *Evaluation & the Health Professions* (medicine)], but none so far have chosen mental health as a concentration.

Statement of Contributors and Reading Audience

There would be two distinct types of contributors to the journal: one, researchers and practitioners from the mental health field (e.g., family therapists, clinical social workers, psychologists, mental health counselors, etc.) and, two, researchers and practitioners from a variety of qualitative research fields (e.g., anthropology, sociology, communication, philosophy, literary criticism, etc.).

The reading audience would be those individuals from both of the aforementioned fields who are interested in interdisciplinary discussions, innovative methods, and relevant/practical information. Other readers would come from related fields such as medicine and education. These consumers would be cross-over readers interested in examining new applications of qualitative research which could be germane to their own fields of endeavor.

Statement of Structure

Gadamer (1960/1989, pp. 106-107) wrote that "every game has its own proper spirit" and "the reason for this is that the to-and-fro movement that constitutes the game is patterned in various ways." Each journal has its own patterns and thus its own spirit. A unique sense of play primarily emerges from the structuring of a journal's editorial board as well as from the format of a journal itself.

Suggested Editorial Board

The editorial board for *Qualitative Reflections on Clinical Practice* should be a community of scholars dedicated to difference and dialogue. All efforts should be made to include critical voices from a wide and divergent range of disciplines, perspectives, and philosophies. At the same time, these diverse personalities should be willing to engage in lively discussions meant to stimulate further conversations rather than to stifle and suppress creative and unique talk. Probably the most important factor to contemplate in choosing editorial board members is to consider those scholars, researchers, and clinicians who are serious about play: a to-and-fro movement (see Gadamer, 1960/1989, p. 103) dedicated to an on-going, reflective, and even self-critical play on words of research and therapy.

The editorial board should have representatives from across the varied fields which make up clinical practice and qualitative inquiry. There should be a balance of clinicians, researchers, and clinician-researchers. The clinicians should be chosen from the fields of clinical social work, marriage and family therapy, the psychologies, psychiatry, nursing, and other related groups of mental health counselors. The researchers should represent the broad spectrum of methods, perspectives, and philosophies which are found in the qualitative inquiry of today: ethnography, discourse and communication analyses, rhetoric of inquiry and rhetorical criticism, phenomenology, hermeneutics, literary criticism, frame analysis, feminist criticism, post-modern criticism, cybernetic approaches, process/outcome methods, narrative analysis, post-positivism, constructivism, metaphor analysis, poststructuralism, etc. The clinician-researcher representatives would be those individuals who regularly live and play in both the clinical and research worlds and have unique, binocular visions which would preclude from isolating them in either a clinical field or a research domain.

The structure of the board itself would consist of an editor or co-editors, a small group of associate editors, a large assortment of consulting editors, a managing editor, and assistants to the editor(s). The editor or co-editors would oversee the general running of the journal, help to create an environment which fosters dialogue and interaction, and coordinate efforts across the different departments of the journal. The associate editors would assist the editor(s) by sharing in the responsibilities of the journal's various sections. Associate editors could have a section for which they have editorial responsibility or associate editors could rotate the sections to which they would contribute. Consulting editors would assist with the reviewing process of papers, contribute to the various sections of the journal, and guest-edit special issues of the journal (e.g., an expert on narrative could assemble a special issue on the analysis of the shape of story-telling across the mental health field). The managing editor would be responsible for copy editing,

formatting, and layout of the journal. The assistants to the editor(s) would help support the overall editorial process.

Journal Format

Frequency: Quarterly (January, April, July, October); First Issue: January, 1991

Sample Issue (120 to 180 pages per issue):

Each issue would consist of four major sections: one, interview/dialogue; two, original papers; three, review essays; and four, researching research and therapy.

Interview/Dialogue (One per issue):

This section would feature an interview with a prominent researcher or theorist from within the clinical field or from another discipline; a dialogue between researchers and clinicians, or between researchers from contrasting perspectives; or any other configuration which would stimulate interesting conversations regarding clinical work and qualitative research. Examples: Interview with members of the Project for the Rhetoric of Inquiry on how therapy may be studied from the perspective of rhetoric, metaphor, and narrative; Round table discussion on the contrasts between post-positivist and positivist inquiry; Dialogue between anthropologists and home-based family therapists concerning the integration of ethnography and therapy.

Original Papers (Two to three per issue):

This section would consist of papers presenting applications of qualitative modes of inquiry in the study of clinical practice, and/or papers exploring theoretical, rhetorical, aesthetic, ethical, political, etc. aspects of qualitative research and clinical practice. The format could be paper/rebuttal/re-rebuttal, a series of unrelated papers, or papers grouped along thematic or subject lines.

Examples: Case study descriptions as therapy evaluation for HMO reports; High Drama: Literary Analysis of family violence narratives; Interpretations of interpretations: Towards a hermeneutical understanding of supervision of supervision; Act so as to increase choice: The ethical imperative of alternative methods.

Review Essays (One per issue):

This section would consist of two parts: the first part would be an essay summarizing or organizing a particular method, theory, or perspective, and the second would be reviews of books, articles, and/or presentations which relate to the opening essay. Other reviews of books, conferences, journals, etc., unrelated to the opening essay, would then round out this section. Examples: The post-modern condition comes to therapy (an essay on Lyotard and post-modernism with reviews of Steve and Martha Tyler's study of family therapy training and Tullio Maranhao's criticism of "therapy of stereotypes"); How to do therapy with words--Speaking about speech acts (a review of Austin's and Searle's understanding of discourse with reviews of papers which have employed speech acts to understand the phenomenon of therapy); Figures of

Speech: Tropical understandings of clinical talk (an introduction to the master tropes--metaphor, metonymy, synecdoche, and irony with reviews of George Lakoff's work on metaphor and Anthony Wilden's utilization of metaphor and metonymy in understanding human interaction).

Researching Research and Therapy (Five subsections per issue):

This section would present up-to-date and relevant information that researchers and clinicians would need in order to stay current with the latest trends and happenings in the worlds of qualitative research and clinical practice.

Grants and Grant Writing: A precis of potential funding sources for clinicians and researchers (e.g., federal grant RFP's and RFA's, foundation support, and other funding possibilities), suggestions for successful grant writing, and recently awarded grants.

Works in Progress: Reviews of on-going research studies, projects, theses, and dissertations; reports of innovative therapy programs; and announcements of soon-to-begin projects.

Hardware and Software: Reviews and suggested applications of new and not-so-new programs and equipment for researchers and clinicians (e.g., the latest ethnographic software, tips on buying transcription equipment, and new technology for audio/videotaping therapy).

Read More About It: Suggested readings for clinicians and researchers (e.g., seminal readings in post-positivism, previous attempts at integrating discourse analysis with clinical research, and developments in case study methods).

Conference Update: A clearinghouse for upcoming meetings and conferences which would be pertinent to researchers and practitioners interested in the qualitative/clinical interface.

Editor's Note: Sage subsequently passed on the idea of doing the journal. The publishing company had just launched a new qualitative research journal, *Qualitative Health Research*, and was not ready to commit to another qualitative publication at that time. As a result, we at *The Qualitative Report* decided to continue to publish the journal without corporate support.

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