As editor of the American Journal of Occupational Therapy, I have tried in my editorials to capitalize on the unique vantage point gained by reading all the AJOT literature extensively, not just published articles in selected topic areas. This approach allows me to comment on trends in our professional conversations and methods for communicating our viewpoints. The data for these editorial reflections are drawn as much from unpublished manuscripts as published ones because the less-than-failingly-successful efforts can be particularly informative. As my tenure as AJOT editor winds down, I am seizing this opportunity to summarize my observations and to leave readers with themes for growth in clinical scholarship.

The term clinical scholarship was coined by the Sigma Theta Tau nursing honor society and is defined as being "characterized by a high level of curiosity, critical thinking, continuous learning, reflection, and the ability to seek and use a spectrum of resources and evidence to improve effectiveness of clinical interventions" (as cited in Corcoran, 2003, p. 607). When this editorial proposing clinical scholarship as relevant to occupational therapy was first published, it drew criticism for the use of the word clinical. I was asked, Why not use practice scholarship or a term coined by Boyer (1990), scholarship of application? My preference for clinical scholarship is based on the relevance of its definition to a helping profession, as opposed to scholarship of application, which is steeped in the language of higher education. In addition, I did not want to invent a new term and reasoned that clinical scholarship works for occupational therapy because, like nursing, it reflects our health background despite the fact that we practice in arenas other than a traditional clinic.

With the construct of clinical scholarship as the backdrop, I looked back over 5 years of editorials to identify the trends in published and unpublished occupational therapy literature. What do these trends, as they are discussed in the editorials, suggest for growth as a profession of clinical scholars? Three themes were apparent and suggest the need for sustained effort in (1) precision, (2) knowledge translation, and (3) visibility.

Striving for Precision

Precision in thinking and writing is an elusive but worthy goal because efforts to be more precise usually reveal even more areas in which one could be more precise. In other words, there is always room for improvement, and precision in communication requires consistently focused attention. Precision in writing is a critical factor in the success of a manuscript. I can say unequivocally that a very precisely written manuscript matching the author guidelines will be published. Clinical scholars reflect on and critically appraise their own thinking and writing and, in doing so, become more precise. This appraisal process begins with the use of a conceptual framework to define the constructs that are central to the manuscript and their interrelationships. In a qualitative study, a conceptual framework is used to sensitize the investigator’s thinking to potential nuances and relationships in the constructs of interest (Charmaz, 2006). Precise qualitative research results in vivid descriptions of constructs composed of overlapping but highly differentiated components. Constructs in a quantitative paradigm may be built on these vivid descriptions, or the definitions may be drawn from other sources. In either paradigm, clinical scholars seek to precisely operationalize constructs before describing, measuring, or hypothesizing about them.

Reflection and critical thinking also support clinical scholars in improving precision during the manuscript preparation process. The vast majority of the feedback
Striving for Knowledge Translation

The term knowledge translation refers to an integrated system of discovery and application in which practitioners and researchers collaborate on identifying and answering research questions. Such an arrangement would be facilitated by a partnership of clinical scholars, with the only difference between the collaborating partners being their primary place of employment—practice or research. New knowledge that results from such a partnership is grounded in practice, rigorous in design, and readily applied. This process is likely to result in validation of evidence-based practice, a vital undertaking that supports our existence as a thriving profession.

Unfortunately, most of our knowledge-building models have been based on the concept of knowledge dissemination, which suggests making study-generated information available for use by others at the conclusion of the study. A knowledge dissemination model is focused on examining evidence, but the links to practice may not be explicit. Dissemination is the final stage of research, so it does not necessarily involve questions that spring from practice or study procedures reflecting the practice context. A profession of clinical scholars would avoid conceptualizing research in isolation and value knowledge representing a collaboration of many talents.

I feel hopeful about our growth as a profession in this direction because the winner of the Cordelia Myers Award for a first-time author for 2007 is Shawn Phipps, a practitioner at Rancho Los Amigos National Rehabilitation Center, who collaborated with Pam Richardson, a researcher at San Jose State University. My sense from reviewing manuscripts is that occupational therapists are quickly breaking down barriers to academic–practice partnerships and producing readily applied knowledge about evidence-based practice. Additionally, all manuscripts submitted to AJOT are reviewed for their ability to derive and discuss implications for practice and future research. Our profession has accomplished much in an effort to bridge the practice–research divide, yet much remains to be done. As we strive for better knowledge translation, a profession of clinical scholars also works to increase the visibility of those efforts.

Striving for Visibility

A significant challenge for occupational therapy involves its visibility within and beyond our profession. Internal visibility includes dissecting and describing processes needed by clinical scholars, such as accessing and critically appraising the evidence. Reflecting this belief, I have devoted several editorials and individual work with authors to synthesizing and evaluating evidence as the basis for clinical and scientific reasoning. This work allows the reasoning processes of clinical scholars to be more accessible for critique and available as a model to others. In addition, as AJOT editor, I have always regarded it as my responsibility to make the processes by which manuscripts are reviewed more transparent. I have undertaken to improve the visibility of the manuscript review process in an effort to help potential authors avoid common mistakes and produce more scholarly manuscripts.

AJOT is just one narrow medium for making our scholarly processes more visible; the challenge is to imbue this initiative in the workplace, classroom, and conference room. Similarly, a profession of clinical scholars must be more visible to external audiences. Sometimes reaching these two audiences seems at cross-purposes, but heightened visibility, both internally and externally, cannot be understated. Emphasizing visibility in our literature supports our identity and opens the doors to new arenas of practice and research. Moreover, making the outcomes of occupational therapy more visible to other professions, policymakers, and consumers requires a comprehensive strategic plan for placing our literature in the mainstream of information. AJOT’s journal impact factor is just one small indicator of our success in becoming more visible to an external audience; other indicators include consumer demand for services and newly emerging practice areas. A profession of clinical scholars must be committed to increasing visibility in every context, large and small.

In summary, when I accepted the position of AJOT editor 5 years ago, it was unclear where this journey would lead. The road has been bumpy, but the scenery has been fascinating, bringing into focus the idea of an entire profession of clinical scholars who work in many contexts but share a commitment to precision, knowledge translation, and visibility for occupational therapy. It has been a distinct honor to be the editor of AJOT.

References


