



**Citation:** McKelvie, R. (2021). Pushing the boundaries: Consciousness and concerted action in times of quantum change. *Nursing Praxis in Aotearoa New Zealand*, 37(1), 46-47.  
<https://doi.org/10.36951/27034542.2021.015>

## Pushing the boundaries: Consciousness and concerted action in times of quantum change

**Rhonda McKelvie, PhD RN**, Senior Lecturer, Coordinator - Master of Clinical Practice (Nursing), Te Kura Tāpuhi School of Nursing, Massey University Te Kunenga Ki Pūrehuroa, Turitea Campus, Palmerston North, Aotearoa New Zealand

Jill Wilkinson's analysis (2008a, 2008b) illuminated how the fundamental tensions in polarised discourses within nursing impacted on the work of the 1998 Taskforce and were consequential for the collaborative effort and pace of progress towards advanced practice roles. Employing a Foucauldian lens (1977), Wilkinson identified how discourses connected to power, underpinned by assumptions and characterised by normative behaviours, construct positioning in relation to the issue at hand.

Quantum changes such as implementing advanced roles and new scopes of practice, initiatives like the Care Capacity Demand Management programme, and graduate entry to nursing programmes, will and always should be subject to critique and challenge from inside and outside the nursing profession. Debate provoked by quantum change reveals a tendency (for some) to rush to the edges of our territory and defend our scope, adopt rigid positions on our boundaries, decry our subordination to medical and managerial hegemony, and pull against the omnipresent tensions of individualism and collectivism. While such tensions and defensive actions can be problematic, they can also be protective of the terrain gained for individuals and the collective of nursing through hard won professional and industrial endeavours.

Debate, robust discussion, argument, and advocacy for a perspective may be experienced as difficult or annoying, but I do not suggest we absolve ourselves of the need for a considered approach to such developments. What I do argue for is that we know what is organising our thinking and our positioning when we enter these boundary negotiating milieus, as was occurring in 1998. A deep interrogation of what is organising our consciousness is the place to start because nurses and the nursing profession navigate a complex terrain of social, gendered, political, institutional, neoliberal, and professional



priorities that are powerful and inescapable. Space must be made for differing world views and discursively organised positions, but we must also support each other to get out of our own way. Only then can we make progress at the boundary in the interests of patient care, of nurses, and of nursing. Only then can nurses and the profession push to its full professional potential. Only then, to paraphrase Brene Brown (2017), can we *all* rise strong.

### References

- Brown, B. (2017). *Rising strong: How the ability to reset transforms the way we live, love, parent, and lead*. Random House.
- Foucault, M. (1977). *Discipline and punish: The birth of the prison*. Pantheon Books.
- Ministry of Health. (1998). *Report of the Ministerial Taskforce on Nursing: Releasing the potential of nursing*. Author.  
[https://www.moh.govt.nz/NoteBook/nbbooks.nsf/0/380F282D7CAEDADC4C25669B007C00CA/\\$file/report-ministerial-taskforce-nursing.pdf](https://www.moh.govt.nz/NoteBook/nbbooks.nsf/0/380F282D7CAEDADC4C25669B007C00CA/$file/report-ministerial-taskforce-nursing.pdf)
- Wilkinson, J. (2008a). The Ministerial Taskforce on Nursing: A struggle for control. *Nursing Praxis in New Zealand*, 24(3), 5-16. <https://doi.org/10.36951/NgPxNZ.2008.008>
- Wilkinson, J. (2008b). Constructing consensus: Developing an advanced nursing practice role. *Nursing Praxis in New Zealand*, 24(3), 17-26. <https://doi.org/10.36951/NgPxNZ.2008.009>