I recently completed a chapter, titled “Writing for Publication,” (Smoyak, in press) for Lucille Joel’s new edition of *Advanced Practice Nursing*. One of the points of my advice to readers was to:

Gather your data, ideas, vignettes, case examples, notes about opinions and other material in a filing system that works for you. Younger folks are more committed to digital files and folders, into which they put their own documents, but also PDFs of articles to which they might refer, or news reports of interest, or other graphics which might be used at a future point. Older folks, such as I am, prefer the old-fashioned 3-cut file folders, which can be labeled and then put into large accordion folders. (chapter 22)

In the current editorial, I decided to practice what I preach and share with you some of the things in my “gathering” folder. One file is labeled “Best Editorials.” I’ve selected from the best of the best. Many of these selections are as relevant today as they were decades ago. They are presented in chronological order.

**JULY 1987, “THE BIRTH OF THE AMERICAN PSYCHIATRIC NURSES’ ASSOCIATION”**

This editorial (Smoyak, 1987) describes how I, as Editor-in-Chief of the *Journal of Psychosocial Nursing and Mental Health Services (JPN)*, and the Editorial Board of *JPN*, along with other psychiatric nurses representing other constituencies, founded the American Psychiatric Nurses Association. The inaugural convention took place in Baltimore, Maryland, at the Hyatt Hotel Inner Harbor from October 15-17, 1987. This specialty organization was developed because the American Nurses Association was no longer addressing the needs of the various specialty groups, which were growing exponentially.

**AUGUST 1989, “INTERVENING IN INTERVENTIONS”**

Psychiatric nurses need to act more like scientists, rather than assuming conventional practices should go unquestioned:

How often do clinicians ask themselves, “Why am I doing this? Is this the best way? How do I know? If I do this, or suggest that, will the patient get better?” The answer is, “Probably not often enough.” (Smoyak, 1989, p. 3)

**APRIL 1991, “BARRIERS AND RAMPS”**

Having made the case, in my editorial, that ramps for people who have physical disabilities are becoming more common and more visible, such is not the case for individuals diagnosed with mental illnesses. “The mentally ill have no ramps. Barriers are everywhere. No ramps exist...in emergency

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rooms...mental hospitals” (Smoyak, 1991, p. 5). Readers were invited to provide ramps and eliminate barriers as part of their mission.

**FEBRUARY 2001, ”THE DEFINITION OF THE SITUATION IS THE SITUATION”**

“The definition of the situation IS the situation” (Smoyak, 2001a). This statement has been in my head for more than 50 years. I can’t remember how it got there, but I find it very, very useful. I have used it as a parent, teacher, researcher, clinician, and traveler. A new perspective results from facing a challenging situation when I remind myself that I am in charge of defining, naming, reframing, or making a choice about what to make of it.

**OCTOBER 2001, ”FLORENCE NIGHTINGALE, INSANE NURSE”**

When the International Academy of Nursing Editors visited the Florence Nightingale Museum in London, I asked the museum director if Florence Nightingale had ever been a psychiatric nurse. His response was that no one had ever asked that question, and he invited me to peruse their newly digitized archives to find the answer.

I did so, and discovered that she really was an “insane nurse,” using the vocabulary of that period. Writing about the decades that she cared for soldiers in several wars, she often made note of their need for mental health care (our term). When I wrote this editorial (Smoyak, 2001b), and included a genogram from data I retrieved from the archives, the museum had it framed, where it stayed in the entrance area until a recent renovation.

**AUGUST 2002, ”A DIAGNOSTIC AID: CONSIDER STUPIDITY”**

We have all experienced these diagnostic dilemmas: Is this person bad or mad? mentally ill or a sinner? creatively energetic or careening toward a manic episode?.... Now there is a new designation to consider, rendered scientific rather than just folksy. (Smoyak, 2002, p. 6).

I first came upon this idea of stupidity as an alternative diagnosis when I heard a sermon preached in New York City. The homilist wished that Jesus had said a little more about stupidity directly in his parables. Later that year, Sternberg’s (2002) book, *Why Smart People Can Be So Stupid*, was published. I mention this book and other scientific articles in the editorial (Smoyak, 2002).

**DECEMBER 2004, ”OUR CHOICE: TO BE MEDICATED OR TO BE RESPONSIBLE”**

Quoting from the editorial (Smoyak, 2004):

I was asked to evaluate a young man who had been in federal prison for a drug-related offense involving taking a minor across state lines. The man was under house arrest, wearing a monitor, and needed permission from his parole officer to travel to my office. (p. 7)

After spending several sessions with this young man, including doing a genogram, I wrote my report, which I shared with him. I also wrote him a personal letter. An excerpt follows (S.A. Smoyak, personal communication, June 2004):

You are fully aware that you are able to produce your own natural endorphins, by exercise and workouts. I also suggested to you that endorphins can be released when a person engages in doing good things for other people. For instance, I can get an endorphin “high” when I have taught something very difficult to a student or patient. You do not need cocaine, or ecstasy, or heroin, or marijuana to do this for you. Nor do you need medications.

**OCTOBER 2007, ”WHAT’S NEW IS REALLY OLD”**

Please read the paragraph below, and try to determine (a) the context in which it was written, (b) who wrote it, and (c) the year:

All persons employed in this hospital...are enjoined to treat the patients with uniform attention and respect, greet them with a friendly salutation, and exhibit such other marks of kindness and good will as denotes interest and sympathy. They shall speak in a mild and persuasive tone of voice, and never address a patient coarsely or by nickname. When nurses or attendants receive insults and abusive language, they must keep cool and forbear to repress them...are enjoined to treat the patients...with uniform attention and respect, greet them with a friendly salutation, and exhibit such other marks of kindness and good will as denotes interest and sympathy. They shall speak in a mild and persuasive tone of voice, and never address a patient coarsely or by nickname. When nurses or attendants receive insults and abusive language, they must keep cool and forbear to repress them. Violent hands shall never be placed upon patients under any provocation, and a blow shall never be struck.

Of course, the somewhat archaic language would be a give-away and set the time at least in the 19th century. (Smoyak, 2007, p. 8)

The actual year was 1876, and the person who wrote the paragraph was the first superintendent of Greystone Park Psychiatric Hospital, Dr. Horace Buttolph. It served as the hospital’s mission statement, and was printed in the first annual report of the hospital (Mikels, 1916). The language is archaic, but the message is clear.
2016 FINAL SELECTIONS
The last two selections are editorials that appeared this year, one on coddling versus challenging (Smoyak, 2016a) and the other on the new alphabet soup (Smoyak, 2016b), about acronyms in use today. The points in each of these editorials are complex and do not allow selecting a few sentences or paragraphs to illustrate the messages. Therefore, my suggestion is that you read them in their entirety.

RETURNING TO THE CHAPTER ON WRITING FOR PUBLICATION
As I conduct workshops, during Q & A periods, a question I am frequently asked is if I ever do or did ghostwriting. My answer is “Yes.” If I am then asked whether it bothers me if what I have written is a grant that a Dean submits, or a report to the President that is forwarded from the Dean’s Council, I say “No.” I explain that my background is having written for a squirrel.

When I was in elementary school, a teacher asked if I wanted to develop and write a column for the Broadcaster, the newspaper at the Samuel E. Shull School. I thought a bit, and then offered, “I want to write as if I were the school’s mascot, Squiffer E. Squirrel.” The teacher was a bit surprised, but gave me free reign. My first column was about what Squiffer saw in the teachers’ lounge when he visited there. Teachers were smoking! Of course, in those days, teachers were allowed to do this, but many students did not know that the teachers smoked, nor that they ate lots of candy and sweets. A big tribute to my teacher, Miss Drysdale, is that she did not alter what I wrote. And, after some chagrin, the teachers laughed.

So, if I can write for a squirrel, writing for a Dean is no problem.

REFERENCES

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