

DIALOGUE, DEBATE, AND DISCUSSION

Is 'Contribution to Theory' an Unhealthy Obsession for Management Research? A Response to Zhang and Chen

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The early months of the COVID pandemic prompted a flood of research aimed at illuminating all facets of the disease and its spread. Scholars sought to create and assess practical interventions that ranged from vaccines to government lockdown policies to workplace practices. To date, there are nearly a half-million publications on the pandemic, and more are in process.

Zhang and Chen (2024) recount their experience in shifting their research focus from management to the mental health correlates of the pandemic and the policies and practices that emerged to contain and mitigate it. Their article provides useful insights into what we can learn from the publication practices of our neighbors in medicine and public health, as well as opportunities for management scholars to contribute to adjacent fields.

From Management to Mental Health

Zhang and Chen (2024) share their journey researching the mental health consequences of the COVID pandemic and containment efforts in China, Latin America, the Middle East, and other regions. Almost immediately after COVID began spreading and governments mandated lockdowns to contain the pandemic, the authors fielded surveys to examine how people were responding to their new situation. They specifically focused on outcomes such as anxiety and depression, which spiked during the lockdowns. The results showed several factors associated with mental health symptoms, such as being out of work. Other studies focused on specific populations (e.g., healthcare workers), predictors (e.g., belief in conspiracy theories about the virus), and alternative outcomes (mask-wearing, handwashing, and burnout at work).

Methodologically, the challenge was minimal: distributing and analyzing online surveys, or conducting meta-analyses of published studies, entail a fairly general set of research skills. Online surveys look much the same whether one is asking about attitudes toward products or politics, or about anxiety and handwashing. The major differences were in the kinds of measures and scales used. There are many well-validated scales for mental and physical health, psychological distress, and life satisfaction, which eased the transition to conducting research in a new domain.

The major adaptation they report is in the publication norms in the journals where they published. Health journals are far less obsessed with theory than management journals and far more accepting of descriptive and exploratory research approaches. Some of these journals are also far more forgiving of practices such as reporting results from non-representative samples and data collection from a single point in time (e.g., Zhang et al., 2020f). These are vanishingly rare in management journals. The reporting formats also differed. For instance, practitioners might favor truncating scales into mild, moderate, and severe rather than relying on continuous variables.

Plain language is prized over the flowery prose that adorns so much of management research. Unlike in management, health research evidently does not require an intriguing framing or a spicy hook to draw readers in. (As I often point out, Watson and Crick managed to report one of the most consequential findings in the history of science in just over a page.) Last, there are field-wide

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standards to guide the conduct and reporting of different types of studies in medicine to encourage their commensurability and the ability to conduct useful meta-analyses – in contrast to management, where formats vary widely by journal and style of research.

Learning From the COVID Pandemic

The COVID pandemic produced an astonishing flood of articles in a brief period: the National Institutes of Health maintains a database of COVID-relevant publications with over 415,000 articles as of this writing (https://www.ncbi.nlm.nih.gov/research/coronavirus/). The need for rapid scientific insights to guide policy and practice was vast, and scientists rose to the challenge. Was this a one-off event? It is reasonable to imagine that the rush to gather evidence may have sped up the publication process and relaxed some of the standards that might have held otherwise. (Consider the speed and format of the vaccine approval process.)

The authors highlight an important aspect of management research that many of us in the movement for responsible research aim to take on: our obsession with 'contribution to theory' in every paper. In the academic field of management, the pathway to fame and glory comes from contributions to theory. 'Findings' are rarely as prized as ingenious framings, evocative metaphors, and memorable terminology. The fact that the *Academy of Management Review* routinely tops the rankings of most impactful journals is an indicator of what the field venerates. One 'absorptive capacity' trumps dozens of fancy fixed-effects regressions and randomized control trials. It is almost as if delighting one's readers was more important than reporting valid findings from rigorous scientific inquiry.

During the early months of the COVID pandemic, timeliness and quality of evidence took precedence over 'contributions to theory' when it came to research. Standards of rigor still applied, of course. Peer reviewers and other readers would ask about sampling, assignment to conditions, and threats to causal inference if that is what the paper was seeking to establish. Cook and Campbell's advice on research design still provided value. And if the best available evidence was less than perfect, then researchers and policymakers would take that into account. We were not likely to create national health policies based on horribly flawed studies of horse medicines (https://www.medicalnewstoday.com/articles/science-is-flawed-covid-19-ivermectin-and-beyond).

Research from the pandemic suggests a deeper parallel: perhaps the quest for timeless research insights into management is a mirage best abandoned by responsible researchers. The obsession with contributions to theory in management research is paired with an implicit notion that these contributions are built to last – that what we have to say about, say, a theory of online food delivery platforms will be recognized as a timeless truth. In the case of COVID, it is utterly clear that many research findings are specific to this disease, its mechanisms of transmission, treatment, and public health policies to contain it. No one expects to see a trans-historic theory of pandemics emerging from the 415,000 published studies on COVID. There will be lessons learned that apply elsewhere, but a pandemic is specific, not general.

What might management research look like if we recognized that its findings were inherently transient? That the right practices to address, say, work-from-home policies for Gen Z in the US might have a sell-by date? And that studies are inherently time-bound and place-bound? In the optimistic case, this might enable the field to look more like medical research during the early period of the COVID pandemic. That would be a useful lesson.

Reference

Zhang, S. X., & Chen, J. 2024. Responsible research: Reflections of two business scholars doing mental health research during COVID-19. Management and Organization Review, 20(3): 339–353.

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