In the shadow of the ivory tower: Experiences of midwives and nurses undertaking PhDs

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In the shadow of the Ivory Tower: Supervision Experiences of Midwives and Nurses Undertaking PhDs.

Abstract

Aims: The aims of this study were to gain an understanding of the experiences of nurses and midwives enrolled in a PhD and explore any barriers that PhD students encounter whilst completing the degree.

Background: It is important to understand what is happening at doctoral level education for nurses and midwives, and how those enrolled on PhD courses can successfully complete their studies and transition learning and the ability to undertake research into the clinical environments.

Design: The criteria for inclusion into the study was that participants were either a Registered Nurse or Registered Midwife enrolled in a PhD degree.

Methods: A mixed methodology, non-experimental design approach was used with purposive sampling in an anonymous survey, that included both qualitative and quantitative questions to collect data in 2017.

Findings: Supervisors and supervision were the focus of participant’s responses and issues were identified in negotiating the right supervisors for nurse/midwife PhD students. PhD students would benefit from specific teaching and the opportunity to discuss issues that occur as part of the PhD process.
**Conclusion:** Academia needs to consider new approaches to more effectively integrate teaching time into supervision, thereby optimising PhD completion for nursing and midwifery PhD students.

**Keywords:** Midwives; PhD; Post-graduate; Nurses; Education
Introduction

The role of midwifery and nursing academics is currently undergoing a major change worldwide; until recently, what academics lacked in learning and teaching skills was tempered with the vast clinical and managerial experience brought to the novice academic role 1. Nurses and midwives are also encouraged to produce research and contribute to the body of nursing and midwifery knowledge in both clinical and academic roles 2. This has led to a global rise of nurses and midwives embarking on and obtaining Doctor of Philosophy (PhD) degrees 3. Undertaking a PhD in any discipline is challenging, and there are high attrition rates and the possibility of failure after many years of study 4. The professional disciplines of Nursing and Midwifery value a PhD qualification, as it is a requirement in most academic positions, and provides opportunities to engage in leadership and policy making, and enhances teaching, research and clinical practice 5, 6.

However, Australia’s university attrition rate is high, with one in three students failing to complete the course they began within six years of enrolling 7. In 2014, over 6,200 Doctoral students graduated from Australian Universities 8, however there are no recent statistics showing failure to complete PhDs in Australia. In the international context, the United Kingdom (UK) currently has a 40% failure to complete Higher Degree by Research (HDR) studies, and the United States of America (USA) has a 53% failure to complete rate 9.
Therefore, it is important to understand what is happening at doctoral level education for nurses and midwives, and how those enrolled on PhD courses can successfully complete their studies and transition learning and the ability to undertake research into the clinical environments.

**Background**

This study was guided by the conceptual model of generic doctoral-level threshold concepts that provide a strong theoretical framework to support the learning of research and teaching at graduate level. Concepts and theoretical frameworks help PhD students make important links between theory and practice, and in the case of nursing and midwifery PhD students, increase the ability to complete doctoral studies. From the institution’s perspective, a greater understanding of the learning requirement process would help inform supervision and support, and help enhance the quality of the educational experience. Globally, nurses and midwives who obtain higher research degrees and doctoral degrees are usually most likely to contribute to nursing and midwifery development and research, therefore, it is essential to strengthen nurses and midwives with research skills provided by PhD preparation.

**Aim of the study**

The aim of this study was to gain an understanding of the experiences of nurses and midwives enrolled on a Doctor of Philosophy degree, explore any barriers that PhD students encounter whilst completing the degree, and develop recommendations for consideration in formulating support strategies to encourage completion. There are
currently no studies that have been identified that focus specifically on the experiences of nurses and midwives undertaking a PhD in Western Australia. The study could be significant as attrition rates between the various disciplines has been suggested as 11% - 68%, with higher attrition rates in the Humanities and Health Sciences Schools 13-15.

**Methodology**

A mixed methodology non-experimental design approach was used in this study, as there was no known published information regarding nurses and midwives enrolled in a PhD in Western Australia. The mixed methodology approach used both qualitative and quantitative questions in an anonymous survey, to understand the experiences of nurses and midwives who were enrolled on a PhD degree.

**Methods**

**Setting**

The study was conducted at one University in Western Australia, and participants were recruited from a School of Nursing and Midwifery within this University.

**Participants**

Purposive sampling was used for this study, and the criteria for inclusion into the study was that participants were either a Registered Nurse or Registered Midwife enrolled in a PhD degree within the School of Nursing and Midwifery, at one University in Western Australia. The participants were all at different stages of their PhD journey, and were recruited through posters in the department, invitations at PhD social events and through PhD social media networks. The participants were emailed a link to the survey,
and supplied with an invitation letter that introduced the study and purpose of the study. As this was an anonymous online survey, responses could not be attributed to any participants, guaranteeing there would be no consequences and no recriminations.

**Ethical Considerations**

Ethical approval was granted by the University Ethics Committee. There were no identifiable costs to potential participants, other than up to twenty minutes of their time for completion of the survey. Participants were informed that they had the right to decline participation by simply disregarding the link to the online survey. Informed consent was implied by all participants who completed the online survey; which reflected the participants’ willingness for involvement in the study. Anonymity and confidentiality of all participants was assured in the invitation letter and was maintained by the researchers; nil identifying factors or information of the participants have been disclosed throughout this study and publication.

**Data Collection**

The data was collected using Qualtrics software via an online self-administered anonymous survey, and this approach was implemented as it offered a cost effective and time saving approach in comparison to interview style approaches. The survey comprised of 22 questions to enhance the likelihood of survey completion. The online survey comprised of closed and open ended questions requiring a brief response providing quantitative data, and short answer questions providing qualitative data. The
questionnaire included questions that focused on their experiences of being enrolled as a student enrolled in a PhD and supervisor interaction, as well as demographic data such as age, gender, and current clinical employment. In addition, information was collected on how participants were coping with studying and how the PhD experience could be improved. Finally, an opportunity for wider comment was provided. The participants were given a six-week period to complete the survey.

**Data Analysis**
In this study the data was analysed using Qualtrics software, that provided question summaries and results from the survey, as well as viewing the individual survey results of each participant. Descriptive statistics were used to analyse the data using percentages and proportions. A thematic interpretive process was used for the qualitative data, with the participant responses entered into an Excel spreadsheet. Manual thematic analysis was used to code and categorise the responses, in order to establish common themes, and also to identify distinguishing links between participant’s experiences.

**Validity / Rigour**
Prior to administration to the ethics committee, the online survey was submitted to two recently graduated PhD former students for peer review. Positive feedback was yielded from peer review of the online survey, and the survey was found to be user friendly and appropriate and some amendments were recommended and utilised.

**Findings**
The online survey was completed by 16 participants, from a survey sample of a possible 44 participants, giving a survey response rate of 36.6%; this is a significant aspect as the average response rate for online surveys has been reported as 25% \textsuperscript{16}. Demographic statistics revealed that 15 participants were female and 1 participant was male; 12.5% of participants were aged 25-34 years (n=2), 37.5% aged 35-44 years (n=6), 25% aged 45-54 (n=4), followed by 25% aged 55-64 years (n=4). Thirteen participants were part-time PhD students, and three were full time PhD students.

**Supervision**

Findings from this study indicated that fifteen participants reported face-to-face supervision as being weekly (n=2), fortnightly (n=6), every 3 weeks (n=1), monthly (n=4) and ‘when I request’ (n=1). One participant commented that face-to-face supervision was often unavailable:

‘Not often enough [face-to-face supervision]. I get frustrated that they are often unavailable due to their teaching commitments or only working at the University a few weeks per year. One supervisor works between two Universities’ (PhD3).

Supervisors and supervision were the focus of participant’s responses within the findings. Most participants gave positive comments regarding supervisors:

‘I’ve been very fortunate with the allocation of my supervisors. They are very supportive, give me a push, but also realistic in terms of time frame’ (PhD1).

‘The student-supervisor relationship is key to a PhD completion. Supervisors showing keen interest in the PhD project, and believing in their students, is important in the psychological well-being of the PhD student’ (PhD5).
Participants recognised the importance of good supervision, and many commented on how choice of supervisor influenced the PhD process:

‘The supervisors have the biggest impact on your journey, it can be pleasant, enriching, a learning journey or a solo trek. I was very lucky, not all are. Care needs to be taken with the choice of the supervisor (PhD9).

However, not all participants were able to report that they had a good supervision experience, as was demonstrated by this comment:

‘I don’t think students like to criticise allocation of supervisors. They might make your life even worse’ (PhD16).

It would seem that there are issues in negotiating the right supervisors for PhD students, and it would appear from the participant’s comments in this study that selection of supervisors is largely a random and haphazard process:

‘I wish I had been able to properly choose my supervisors. I had no idea what constituted a good supervisor, or how important this choice would be to me completing. My supervisors were allocated to me, simply on the basis of who was available and suitably qualified. Why does the department not have a website dedicated to advertising supervisors and what they are interested in? I wish I had someone who thought my PhD was important - and not just a vehicle for my supervisors to get publications’ (PhD3).

Feedback

Participants were asked about feedback regarding submitted work to supervisors, and 50% said that feedback was consistent from supervisors (n=8). One respondent commented:
‘The feedback is consistent to the strengths of each supervisor – for example, feedback on writing from one and perhaps methodology from another. The detail and help of the feedback is fairly uniform’ (PhD7).

However, 50% of participants (n=8) responded that there was not always consistent feedback from supervisors:

‘My supervisors look for different things and at times can give conflicting advice. I tend to just go to my principal supervisor with issues’ (PhD12).

Participants also alluded that feedback was not always helpful, and this comment suggests that this participant has had difficulty understanding feedback:

‘Sometimes the feedback is unhelpful. It doesn’t feel like my study anymore. I’m frustrated by over critical comments - from people who haven’t been in clinical practice for years. Sometimes the feedback has no detail - just the words ‘expand’. I need to be taught how to do that’ (PhD5).

Another participant also highlighted that feedback was not useful and commented:

‘I get annoyed that feedback often consists of ‘read this’ - instead of helping me understand what I have already read. There is not enough teaching time at all from my supervisors’ (PhD16).
The participants reported that feedback was usually timely, and 50% (n=8) stated it was delivered electronically through tracked changes, 12.5% (n=2) specified that they had received verbal feedback, and 37.5% (n=6) described receiving a combination of both electronically tracked changes and verbal feedback.

**Peer support groups**

The majority of the respondents, 81.25% (n=13), described being guided to seek out peer group support by supervisors, with 18.75% (n=3) suggesting they had not received any guidance or recommendations from their supervisors to engage with a peer support group. Peer group support was not highly rated by the participants; 2 participants stated it was extremely useful, 4 participants described it as being moderately useful, 8 participants reported that it was slightly useful, and 2 participants said it was neither useful or useless.

**Supervisors: expectations / viewpoints**

Nine of the participants (56.25%), reported that they understood their supervisor’s expectations and viewpoints. Seven of the participants (43.75%), stated that they were not sure of the expectations or viewpoints of supervisors. Interestingly, 6 of the participants reported that they had experienced a change of supervisors during the course of the PhD. This did not appear to be at the request of the participants, as one participant comments:

‘Changing supervisors has been the most frustrating part of my journey and has resulted in a lot of delays. My original supervisors left the University to work elsewhere, and my current supervisors were not at the beginning of this journey with me’ (PhD7).

There are two types of PhD available to participants in this study; traditional PhD via thesis (up to 100,000 words), and an integrated PhD, where the first year consists of six units and
assignments, and whereby a minimum of five publications and small thesis (up to 30,000 words) is required. Participants expressed confusion over supervisor’s expectations regarding publications, with one participant commenting:

‘Supervisors need to make it much earlier clearer about the necessity for early publications, and tell students that 5 papers are a standard expectation’ (PhD4).

Another participant commented:

‘My integrated PhD process has been structured, so I complete steps in a very rationale order, therefore meeting supervisor’s expectations. I am happy with the structure, although some of my choices have been governed by due dates and the requirement to pass ethics in time - rather than do the project I may have intended to do (PhD10).

The PhD journey

According to the results of this study, participants used commonly occurring words and phrases to describe being enrolled in a PhD, these included: ‘rewarding’, ‘challenging’, ‘hard work’, ‘juggling work, family and PhD is hard’, ‘demanding’ and ‘stressful’. One participant commented that ‘it is a process that I have to go through so I don’t expect it to be enjoyable’ (PhD2). Another participant added ‘I have to obtain a PhD to keep my job’ (PhD1).

Overall, participants reported that the PhD journey had been enjoyable most of the time, with only 2 participants stating that it was not an enjoyable experience:

‘No - it hasn't been an enjoyable experience. I work full-time and find the support from supervisors’ poor. Other PhD students have helped me more to be honest’ (PhD16).

Another participant stated:
‘I thought I was going to be part of the next generation of researchers, but I feel I am constantly working with no reward. My supervisors don’t seem to have time to help me publish - so my PhD journey has been very stressful’ (PhD3).

Despite some of the criticisms identified, participants did also state that learning had occurred, and some participants felt that more learning could have been achieved if supervisors were able to dedicate more teaching time to the supervision role. Participants commented that:

‘I would like my supervisors to be more like teachers - I want to learn with guidance. But I’m told I am not part of my supervisor’s teaching time. I think that is very odd’ (PhD8).

And another participant stated:

‘There is a lot of time wasted trying to write chapters without guidance, to then be told it isn’t correct’ (PhD12).

Clearly, the learning part of the PhD process is important to participants, and is valued in the goal towards completion. One participant commented:

‘In addition to learning about my topic and research methods. I have learned a lot about myself and had to learn how to manage a large project. It has been a long journey and without the support and encouragement of my supervisors and other PhD students, I’m fairly sure I would have given up’ (PhD10).

Overall, 50% (n=8) of participants in this study thought the PhD had been a positive learning curve; 18.75% (n=3) thought it had been a moderate learning experience, 18.75 (n=3) reported it had been a slightly positive experience, and 12.5 (n=2) thought the PhD had been a negative learning experience.
Discussion

At the time of commencement of this study, a literature search revealed it was the first to examine the experiences of nurses and midwives undertaking a PhD in Western Australia. The findings of this study revealed that supervision and selection of supervisors is a vitally important aspect of undertaking a PhD for students. This suggests that students and supervisors need to be cognisant about matching the potential supervisor's expertise with a students' proposed study.

A good match between supervisors and PhD students has previously been recommended for successful PhD completions \(^{17, 18}\), however, the students in this study implied that supervision was often matched with availability of a supervisor. A good working relationship between student and supervisors is known to be vital in PhD completions \(^{19}\), and nurses and midwives undertaking PhDs require supervisors who understand the complexity and intricacies of clinical practice. One of the main motivations that practicing nurses and midwives have for undertaking a PhD study, is the chance to influence and achieve best practice in the clinical environments. Therefore, the choice of supervisor becomes critically important in matching skill-base, knowledge and understanding, in order to create a significant impact clinically. This becomes an essential component in the transition from nurse or midwife practitioner to scholar and requires specific support from the beginning of enrolment. Hence, it becomes vitally important that academia should critically examine current educational
strategies, and consider new approaches to more effectively integrate the clinical environments, thereby optimising PhD completion 20.

Inconsistencies in arranged meetings with supervisors were also revealed in the findings of this study. Despite all participants being enrolled in a PhD in the same department, supervision meetings varied widely. All participants in this study had at least two supervisors, and all were employed as nurses or midwives, either part-time or full-time. Participants reported satisfaction with frequency of supervision meetings, however some would have preferred more face-to-face time. Due to busy work schedules of both participants and supervisors, perhaps more use of internet meetings via a synchronous web-conferencing tool, could be utilised for time-poor student / supervisor relationships. Recent research suggests that there is higher student satisfaction with PhD supervision that incorporates blended-learning 21, to facilitate the implementation of one-on-one meetings, which are known strategies that support the research activities of postgraduate students 22.

The students in this study identified that problems occurred when expectations and viewpoints were not met, or when students expected more of a teaching role from supervisors. Consequently, it would be beneficial to PhD students, if supervisors could adapt different support strategies depending on students' requirements or needs. This has been referred to as adaptivity 23, where goals and tasks are aligned. Currently, in the University where this study was conducted, the supervision of PhD students is not
classified as teaching within supervisor’s workloads. Supervision is classified as research, and supervisors must include all student supervision under this aspect of their workloads.

Therefore, supervision is not regarded as teaching, or requiring teaching time, which is an aspect that needs exploration. Undertaking a PhD is a learning experience in how to conduct research, consequently it can be assumed that a certain amount of teaching occurs on behalf of the supervisors. A positive strategy to improve supervision, would be the fostering of mentorship, which may be construed as part of a teaching role. Mentoring has been found to be more likely to occur where a collaborative, teaching and collegial network exists to support scholarly productivity\textsuperscript{24, 25}. Certainly, nursing and midwifery PhD students would benefit from promoting the understanding, empowerment, and skills building required to reach completion of a higher degree by research. The PhD students in this study identified that working full time, maintaining family commitments and trying to complete a PhD without specific teaching and mentoring, had caused physical and emotional exhaustion and frustration with not grasping concepts or understanding what was required.

Previous studies have identified that certain attributes and competencies, including debriefing, providing constructive feedback, mentoring and support in practical elements of a PhD, are essential skills that supervisors require\textsuperscript{26}. Some of the students in this study reported issues with receiving feedback that could be linked to lack of teaching time. Students commented about being told to read or expand on issues that
they thought required deeper explanation on the part of supervisors. However, the students in this study are suggesting that they would benefit from being taught specific skills for PhD completion. This is an important issue identified, as nurses and midwives are expected to be critical thinkers and have problem-solving skills that need to be utilised within the clinical environments.

Participants in this study also reported feelings of ‘isolation’ and one participant suggested that it would have been useful to have someone to debrief with, or to discuss issues that occurred as part of the PhD process, that was not a nominated supervisor. As support has being previously identified as a predictor of PhD completion \cite{11}, it may be advantageous to appoint a ‘champion’ within the School to advocate and support all higher degree by research students. The development of an environment and culture that students find supportive and nurturing, will optimise higher degree by research completions \cite{27}.

**Limitations**

It is noted that there are several limitations of this study, as the understanding of the experiences of nurses and midwives enrolled in a PhD are only from one University in Western Australia. However, the sample size indicates that the results are possibly representative, and may have generalisability in application to other University settings, therefore, further research is recommended to build on the body of knowledge.
The researchers also acknowledge that there are limitations associated with online surveys, in that research suggests there may be restrictions on the quality and depth of the data obtained. Therefore, it is anticipated that a future PhD study using an in-depth interview method or focus groups, may be a more effective method of data collection of obtaining richer data.

**Conclusion**

Understanding what is happening at doctoral level education is important to the nursing and midwifery professions. There are many nurses and midwives undertaking PhDs worldwide, in order to assume academic positions, engage in leadership and policy making, enhance clinical teaching, and conduct research to transform clinical practice. The findings from this study identify the importance of matching students and supervisors with the appropriate clinical expertise and knowledge. This study also suggests that PhD students would benefit from a champion, within the institution where the student is enrolled, to be available and advocate on students’ behalf. This would allow for debriefing and the opportunity to discuss issues that occur as part of the PhD process. The nursing and midwifery professions need an academic workforce to continue to provide leadership and implementation of evidence-based research into clinical practice. Therefore, academia needs to critically examine current supervision strategies, and consider new approaches to more effectively integrate teaching time into supervision, thereby optimising PhD completion for nursing and midwifery PhD students.
References


2. Braidford L and Terry M. From Contributor to Leader: How a Nurse can Undertake the Role of Principal Investigator (PI) in Clinical Research in the UK. *GSTF Journal of Nursing and Health Care (JNHC)*. 2015; 3.


