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Prioritising Doctoral Students' Wellbeing In Qualitative Research


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Prioritising Doctoral Students' Wellbeing In Qualitative Research

Abstract

As novice researchers, doctoral students undertaking qualitative research become well-versed in strategies that should be adopted to minimise risk to participants. But what happens when a researcher is confronted with the complex, emotional account of a participant? Despite the consistent emphasis on participant safety, many doctoral students are not explicitly prompted to consider how they will negotiate their own emotional wellbeing throughout the research process. This is particularly important when conducting qualitative research with vulnerable populations. In these situations, sensitive and difficult topics are often discussed, with numerous risks to participants and researchers alike. However, concern for researcher wellbeing is seemingly ignored or addressed in an ad-hoc manner across all levels of the research process. This oversight is reinforced by ethics applications that require a compelling response surrounding potential burdens to participants, without prompting any explicit consideration of those individuals actually undertaking the research. While previous research acknowledges multiple vulnerabilities of doctoral students, with respect to generic anxiety and exhaustion, we suggest that researcher wellbeing might be further compromised due to the nature of the study. In this paper, we argue that current research training processes and university support structures are generally not sufficiently robust to protect novice researchers and participants and call for advances in research and practices to this end.

Keywords

Researcher Wellbeing, Vulnerability, Qualitative Research

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Prioritising Doctoral Students' Wellbeing in Qualitative Research

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As novice researchers, doctoral students undertaking qualitative research become well-versed in strategies that should be adopted to minimise risk to participants. But what happens when a researcher is confronted with the complex, emotional account of a participant? Despite the consistent emphasis on participant safety, many doctoral students are not explicitly prompted to consider how they will negotiate their own emotional wellbeing throughout the research process. This is particularly important when conducting qualitative research with vulnerable populations. In these situations, sensitive and difficult topics are often discussed, with numerous risks to participants and researchers alike. However, concern for researcher wellbeing is seemingly ignored or addressed in an ad-hoc manner across all levels of the research process. This oversight is reinforced by ethics applications that require a compelling response surrounding potential burdens to participants, without prompting any explicit consideration of those individuals actually undertaking the research. While previous research acknowledges multiple vulnerabilities of doctoral students, with respect to generic anxiety and exhaustion, we suggest that researcher wellbeing might be further compromised due to the nature of the study. In this paper, we argue that current research training processes and university support structures are generally not sufficiently robust to protect novice researchers and participants and call for advances in research and practices to this end. Keywords: Researcher Wellbeing, Vulnerability, Qualitative Research

Across many disciplines in education, health, and the social sciences, qualitative inquirers seek to capture and explore the lived experiences of the participant (Grbich, 1999; van Manen, 1997). This inherently subjective endeavour demands that researchers develop comprehensive research plans and commit to an uncompromising level of ethical integrity throughout the research process, including participant recruitment, data collection, and data analysis. Ensuring participant safety is central to this process. Doctoral students, as relatively young and/or inexperienced researchers, are quickly introduced to key concepts surrounding ethical responsibilities to ensure participant wellbeing (van den Hoonaard, 2002). These ideas are reinforced through university research training programs and the process of formulating a rigorous research proposal. Ethical responsibility is further emphasised at an institutional level via funding and ethics applications whereby doctoral students are required to explain how risks to participants will be managed from the outset and how informed consent will be achieved (Dickson-Swift, James, Kippen, & Liamputtong, 2007). However, despite the emphasis on participant safety, it is our experience that many doctoral students are not explicitly prompted to carefully consider how they will negotiate their own emotional wellbeing throughout the research process. Researchers undeniably must be sensitive to the needs of their participants, but what of their own?

It is important to highlight that this discussion stems from our own prior experience as doctoral researchers working with child participants. The impetus for this work was a casual discussion about the personal challenges we both encountered as students as we attempted to deal with fluctuating levels of emotional wellbeing during and after our interviews with participants. We have personally reflected on numerous challenges arising from our research

in the areas of children's sport and health, and we have discussed several coping strategies we adopted organically throughout the research process. This led us to consider our experiences in the context of the broader literature. We were surprised to uncover a gap in the literature pertaining to the emotional wellbeing of doctoral students researching with vulnerable populations. In this paper, we seek to give doctoral students a voice by opening up a dialogue. We argue that university support structures are generally not sufficiently robust to protect novice researchers and participants, and we emphasise the importance of valuing their wellbeing by offering our suggestions and calling for advances in research and practice.

Literature Review

Qualitative researchers face a number of emotional risks whilst undertaking research (Dickson-Swift, James, Kippen, & Liamputtong, 2008). The literature on researcher wellbeing explains how researchers experience and cope during the qualitative research process upon entering the worlds of their participants. One of the important elements of qualitative research is building trust and rapport with participants (Liamputtong, 2006). Investing in this developing relationship requires the researcher to actively minimise power imbalances whilst building a comfortable, safe environment. Inherent to this process is researchers actively engaging with the personal stories of their participants, which indeed might expose them to physical or psychological harm (Dickson-Swift, James, & Kippen, 2005). Some researchers also share their own stories as a way of building rapport (Dickson-Swift, James, Kippen, & Liamputtong, 2006). Given the intimate nature of this undertaking, it is not surprising that many qualitative researchers struggle with listening to participant stories, and experience feelings of guilt, vulnerability, and exhaustion (Dickson-Swift et al., 2007). Qualitative researchers can experience fatigue (Johnson, 2009) and feel emotionally "drained" from listening to highly intensive stories (Pocock, 2015). They may also experience difficulty releasing their own tensions, concerns, fears, and anxieties (Pocock, 2015) and might face the prospect of reliving such emotions during the transcription and analysis of data. One potential consequence is that qualitative researchers carry research stories around with them which can lead to burnout (Dickson-Swift et al., 2006, 2007). This very concept is concerning because it highlights the all-consuming nature of qualitative research and its impact on researcher wellbeing.

Research indicates that wellbeing is especially compromised when researching sensitive issues such as death or illness (Dickson-Swift et al., 2007; Watts, 2008) or when working with vulnerable populations (Liamputtong, 2006). It is difficult to define a vulnerable population since the notion of vulnerability is socially constructed and is thereby subject to various interpretations (Liamputtong, 2006). For example, we argue that listening to children's voices is, in an Australian context, likely to engender emotional, sympathetic reactions, based on the dominant concept of children as vulnerable beings. However, Field's work (1995) provides a clear example of cultural variability in childhood ideologies. In Japan, for example, a strict disciplinary regime, a focus on competition, and an arduous study schedule are central to children's education. Children are not necessarily afforded special treatment due to their age (James, 1998), which provides a contrast to modern Western philosophies that highlight the importance of play amongst youth (Cross, 2013). Accordingly, in such contexts, children might not be viewed as a highly vulnerable population.

While an assessment of vulnerability is inherently subjective, Liamputtong (2006) conceptualises vulnerable groups as those who are "hard to reach; they are the silent, the hidden, the deviant, the tabooed, the marginalised and hence invisible populations in society" (p. 4). The Australian National Statement on Ethical Conduct in Human Research (National Health and Medical Research Council, 2007) reflects this sentiment by citing pregnant women, children, people with a cognitive impairment, people engaging in illicit activities, and

Indigenous Australians as examples of potentially vulnerable or powerless population groups. Evidently, when working with such populations, with whom sensitive and difficult topics are often discussed, the risks to participant and researcher are heightened. We posit that wellbeing is even more compromised in the case of less experienced doctoral scholars, who are very much “learning the ropes” of research.

There is little doubt, then, that qualitative researchers would benefit from some form of emotional protection whilst undertaking their work with vulnerable groups (Watts, 2008). Some researchers have identified drawing professional boundaries to actively separate themselves from their participants as a form of self-protection (Dickson-Swift et al., 2006). However, managing boundaries can be incredibly difficult for some researchers, particularly for novice scholars who are less experienced with research. For doctoral students specifically, the most widely recommended strategy is liaising and debriefing with supervisors (Blythe, Wilkes, Jackson, & Halcomb, 2013). Debriefing with supervisors can assist researchers to articulate their journey as an insider in qualitative research, to process their emotions. However, this approach is limited in a number of ways. While many supervisory teams may see this role as fulfilling a “duty of care” (Moncur, 2013), not all doctoral students have access to supervisory support in this capacity. Alternatively, some students might not feel comfortable debriefing with their supervisors and/or colleagues on a deeply personal level. It is also possible that supervisors do not feel confident in guiding doctoral students through emotional difficulties, due to a lack of prescribed guidelines and/or limited experience. Consequently, some doctoral students might seek informal support through colleagues, trusted friends, and family members. Dickson-Swift, James, Kippen and Liamputtong (2009) assert that this form of support cannot be taken for granted because the concept of emotional work is undervalued within university culture. As such, drawing on trusting relationships with people beyond the university might arguably comprise a fundamental component of supporting researcher wellbeing. However, this strategy is also constrained by the availability and level of emotional support friends and family members can offer, alongside the researcher’s ethical duty to safeguard participant confidentiality. Many international students, for example, might find this particularly challenging in light of language barriers and lack of social support whilst studying away from home. Other researchers have discussed the careful planning of an interview schedule, to allow adequate time for doctoral students to process information shared to avoid “burnout,” alongside regular debriefing with colleagues (Elmir, Schmied, Jackson, & Wilkes, 2011), but more research is certainly warranted in this space.

Discussion

While the literature cites some strategies that could assist doctoral students in managing risks, considering alternative aspects of the research higher degree process might shed light on other potential modes of support. Here we briefly discuss the role of institutional doctoral training programs, research higher degree culture, and institutional ethics boards.

Institutional Doctoral Training Programs

Institutional doctoral training programs provide candidates with wonderful opportunities to develop research skills such as writing a literature review, preparing a thesis, coding and analysing data, and software utility (i.e., NVivo and Endnote). Many institutions provide these classes as a core requirement of doctoral training programs, while other universities offer them as free elective workshops that can be taken in the student’s own time. By completing these workshops, doctoral students might believe that they are one step closer to entering the field of qualitative research and initiating data collection. However, in our

experience, many doctoral training programs fail to prepare novice qualitative researchers with strategies and techniques necessary to cope when working with vulnerable populations. Further attention in this regard is therefore critical if doctoral students are to be truly prepared for fulfilling their instrumental roles in qualitative research. We propose that universities could focus on a series of topics that could be suited to their own doctoral training programs. For example, a workshop series within a doctoral training program might address some of the following ideas:

Workshop 1: Preparing for research with vulnerable populations and/or research on sensitive issues.

- How to schedule interviews (timing, location etc.)
- Appropriate language/strategies to employ during interviews
- How to navigate difficult conversations that arise during data collection

Workshop 2: Navigating the blurred lines between ethical responsibilities and mandatory reporting.

- Introduction to national research ethical guidelines/code of conduct
- Values, morals, ethics, confidentiality, and the law
- Mandatory reporting responsibilities; abuse, neglect, criminal activities etc.

Workshop 3: How to approach debriefing with your supervisor: A workshop for doctoral students and their supervisors.

- Questions that supervisors should be prepared to ask and answer
- Where to debrief and how?
- What happens after the debriefing?

Workshop 4: Regulating emotions during qualitative work.

- Introduction to mindfulness
- Recognising stress signals
- Self-care techniques to promote wellbeing throughout the research process

Doctoral training programs could also prompt researchers to provide evidence of planned preparatory measures (i.e., strategies to enhance wellbeing), during the development of their written research proposals. Preparatory measures could reasonably include the identification of appropriate debriefing measures and support networks available to the student, as well as practical self-care techniques to adopt throughout the research process (e.g., mindfulness strategies or physical exercise). Such an inclusion to current proposal requirements could also prompt doctoral students to better understand their legal and ethical responsibilities, which can be a difficult and often conflicting part of data collection (i.e., mandatory reporting, when to keep information confidential as part of ethical responsibilities).

Research Higher Degree (RHD) Culture

The privilege associated with undertaking doctoral research is reinforced in Australian university culture. Many doctoral students receive stipends and scholarships to undertake their research and additional opportunities to present preliminary work at national and international conferences. These privileges do, however, come at a price to the individual. For instance, doctoral students typically need to demonstrate a track record in academic and research excellence and a capacity to complete their thesis in a timely manner. In other words, doctoral students need to engender productive, hardworking, and resilient characteristics to negotiate the proverbial “highs and lows” of completing a doctoral thesis. From this perspective, one consequence of RHD culture is that it might fail to accommodate doctoral students who experience setbacks as a result of emotional distress during data collection. While sick leave, bereavement leave, and maternity leave are supported by some universities and scholarship schemes, allowances are not made in the same way for doctoral students who are emotionally compromised from their qualitative work (i.e., mental health days). This is further reinforced by scholarship conditions and supervisory pressure to complete the degree, which might confront novice researchers with additional challenges if they are struggling emotionally due to the nature of their qualitative research. RHD culture in this regard might benefit from the appointment of university staff to specifically support doctoral students throughout the research process. A support officer could be available to assist students to develop strategies to navigate difficult situations, outside the bounds of the professional supervisory relationship. Another suggestion is for institutions to take a broader proactive stance to promote supportive messages around mental health and emotional wellbeing. Such efforts play a critical role in rearticulating university culture.

Institutional Ethics Boards

Doctoral students seeking to undertake projects that involve human participants are required to submit an application for ethics approval. This process can be quite cumbersome, but it plays an important role in preparing qualitative researchers for their responsibilities in safeguarding the wellbeing of the participants (National Health and Medical Research Council, 2007). However, despite an emphasis on participant safety, most ethics applications ignore the researcher’s own wellbeing. This is evidenced by the nature of applications in which researchers are required to respond to questions about participant information and recruitment, participant-oriented burdens and risks, and participant confidentiality and anonymity, without accounting for potential risks to self (Dickson-Swift et al., 2005). In fact, a majority of university ethics committees do not actively prompt researchers to reflect on the personal implications of undertaking the research (Dickson-Swift et al., 2005). However, Dickson-Swift et al.’s research in this space (2005) also sheds light on a small number of Australian university ethics boards that explicitly place emphasis on the physical, emotional, and psychological safety of the researcher through the inclusion of discrete questions. The following statement from an existing Australian university ethics form, serves as an exemplary example of good practice:

Risk to participants (and to researchers) can be real but does not need to be physical. Risk includes things such as self-esteem, regret, embarrassment, civil or criminal liability, disease, physical harm etc. Please consider such possibilities carefully... Please describe the risk you perceived and the protective measures to be taken. (p. 578)

Echoing Dickson-Swift et al.'s sentiment, we believe that the inclusion of this type of questioning constitutes one important and straightforward strategy that many university ethics committees could easily adopt to prompt doctoral students to prepare for the emotional rigours of undertaking qualitative research with vulnerable populations. A revised process indeed carries the risk that some projects might not proceed if risks were too great to researchers, however we believe this to be a necessary process. We re-assert that it is important for doctoral students to be trained in appropriate courses of action to take when sensitive information is revealed in an interview, for example, how to navigate mandatory reporting guidelines in the broader context of one's ethical duties to safeguard privacy (Cater, Machtmes, & Fox, 2013).

Overall, research supervisors and students acknowledge multiple vulnerabilities of doctoral students, with respect to generic anxiety, timely completion, professional standards, and emotional exhaustion (Ballamingie & Johnson, 2011; Hunter & Devine, 2016). We suggest that researcher wellbeing might also be compromised in terms of the focus of the study itself, particularly in the case of research that involves vulnerable populations. Emotional wellbeing demands careful consideration and planning for doctoral students, given that they are novice researchers. Currently, not much is known with regard to the best practices of supporting doctoral students who are undertaking qualitative research with vulnerable populations. Developing a greater understanding of how novice researchers experience and cope during the qualitative research process will enable us to provide better recommendations for students in conjunction with suggestions for effective training processes and university support structures. We also highlight institutional ethics boards, RHD culture, and doctoral training programs as critical points for intervention to better support emerging qualitative researchers. We argue that this is a necessary step forward for developing doctoral students' research capacity and readiness for the field.

References

- Ballamingie, P., & Johnson, S. (2011). The vulnerable researcher: Some unanticipated challenges of doctoral fieldwork. *The Qualitative Report*, 16(3), 711-729. Retrieved from <http://nsuworks.nova.edu/tqr/vol16/iss3/5>
- Blythe, S., Wilkes, L., Jackson, D., & Halcomb, E. (2013). The challenges of being an insider in storytelling research. *Nurse Researcher*, 21(1), 8-12.
- Cater, M., Machtmes, K., & Fox, J. E. (2013). A phenomenological examination of context on adolescent ownership and engagement rationale. *The Qualitative Report*, 18 (16), 1-13. Retrieved from <http://nsuworks.nova.edu/tqr/vol18/iss16/1>
- Cross, G. (2013). Play, games, and toys. In P. S. Fass (Ed.), *The Routledge history of childhood in the Western world* (pp. 267-282). Milton Park, Abingdon, Oxon: Routledge.
- Dickson-Swift, V., James, E. L., & Kippen, S. (2005). Do university ethics committees adequately protect public health researchers? *Australian and New Zealand Journal of Public Health*, 29(6), 576-579.
- Dickson-Swift, V., James, E. L., Kippen, S., & Liamputtong, P. (2006). Blurring boundaries in qualitative health research on sensitive topics. *Qualitative Health Research*, 16(6), 853-871.
- Dickson-Swift, V., James, E. L., Kippen, S., & Liamputtong, P. (2007). Doing sensitive research: What challenges do qualitative researchers face? *Qualitative Research*, 7(3), 327-353.
- Dickson-Swift, V., James, E. L., Kippen, S., & Liamputtong, P. (2008). Risk to researchers in qualitative research on sensitive topics: Issues and strategies. *Qualitative Health Research*, 18(1), 133-144.

- Dickson-Swift, V., James, E. L., Kippen, S., & Liamputtong, P. (2009). Researching sensitive topics: Qualitative research as emotion work. *Qualitative Research*, 9(1), 61-79.
- Elmir, R., Schmied, V., Jackson, D., & Wilkes, L. (2011). Interviewing people about potentially sensitive topics. *Nurse Researcher*, 19(1), 12-16.
- Field, N. (1995). The child as laborer and consumer: The disappearance of childhood in contemporary Japan. In S. Stephens (Ed.), *Children and the politics of culture* (pp. 51-78). Princeton, NJ: Princeton University Press.
- Grbich, C. (1999). *Qualitative research in health: An introduction*. St. Leonards, NSW: Allen & Unwin.
- Hunter, K. H., & Devine, K. (2016). Doctoral students' emotional exhaustion and intentions to leave academia. *International Journal of Doctoral Studies*, 11, 35-61.
- James, A. (1998). "From the child's point of view: Issues in the social construction of childhood." In C. Panter-Brick (Ed.), *Biosocial perspectives on children* (pp. 45-65). Cambridge, UK: Cambridge University Press.
- Johnson, N. (2009). The role of self and emotion within qualitative sensitive research: A reflective account. *Enquire*, 4, 23-50.
- Liamputtong, P. (2006). *Researching the vulnerable: A guide to sensitive research methods*. London, UK: Sage.
- Moncur, W. (2013, April). The emotional wellbeing of researchers: Considerations for practice. *Changing perspectives: Proceedings of the SIGCHI Conference on Human Factors in Computing Systems* (pp. 1883-1890). Paris, France: ACM
- National Health and Medical Research Council. (2007). *National statement on ethical conduct in human research*. Canberra, Australia: Commonwealth of Australia.
- Pocock, N. (2015). Emotional entanglements in tourism research. *Annals of Tourism Research*, 53, 31-45.
- van den Hoonaard, W. C. (Ed.). (2002). *Walking the tightrope: Ethical issues for qualitative researchers*. Toronto, ON: University of Toronto Press.
- van Manen, M. (1997). *Researching lived experience: Human science for an action sensitive pedagogy* (2nd ed.). London, ON: The Athlone Press.
- Watts, J. H. (2008). Emotion, empathy and exit: Reflections on doing ethnographic qualitative research on sensitive topics. *Medical Sociology Online*, 3(2), 3-14.

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