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The Experience of Wellness for Counselor Education Doctoral Students Who are Mothers

Latoya Pierce
University of New Orleans

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THE EXPERIENCE OF WELLNESS
FOR COUNSELOR EDUCATION
DOCTORAL STUDENTS WHO ARE
MOTHERS

A Dissertation

Submitted to the Graduate Faculty of the
University of New Orleans
in partial fulfillment of the
requirements for the degree of

Doctor of Philosophy
in
The Counselor Education Program

by

Latoya Anderson Pierce

B.A., Loyola University New Orleans, 1999
M.S., Loyola University New Orleans, 2002

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DEDICATION

This dissertation is dedicated to my husband, Ryan, for his unconditional love and unwavering support and to my daughter, Nyla, for always being my rainbow in the cloud and my inspiration.

This document is also in loving memory of Reverend and Mrs. Donald Barrie, Sr.

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ABSTRACT

This is a phenomenological study on the experience of wellness of counselor education students who are mothers. The study used seven participants in two rounds of interviews and one focus group. Participants were of varying stages of motherhood and at different points in their doctoral journey. Findings included participants' views of motherhood and womanhood, sacrifices and rewards, counselor education program support, wellness, and dissonance of multiple roles. Findings were compared within and across cases using themes and categories. Suggestions for further research are made as well as implications for this population and counselor education.

CHAPTER ONE

INTRODUCTION

Overview

When I entered the counselor education doctoral program, I held a full time job, was a mother to a six-month-old daughter, and had a fiancé. After two semesters in the doctoral program, I got married. A few months later, I decided to give up my job to focus solely on my education and family. As I became more familiar with other students in the program, I began to make connections with others who, like myself, were mothers and full-time counselor education doctoral students. We engaged in many conversations and discovered we had much in common with respect to family responsibilities, support systems, and educational goals. I began to become aware of the distinct experience we shared regarding the doctoral journey. We seemed to experience unique feelings that did not seem evident in other students who were also completing the degree.

This led me to believe that the experiences of mothers who were full-time doctoral students may be worth examining. I specifically wondered about the wellness of this particular population. Because there seemed to be so many obligations that pulled us in many directions, I pondered how our attempts to balance those obligations might affect our holistic wellness. Spirituality, physical health, mental well-being, and social enjoyment were just a few of the aspects of wellness that frequently arose in our discussions. Many of us stated that our social time was spent primarily at doctoral events such as a gathering or dinner at a professor's house. I recall a fellow mother's statement that attending church services on Sundays was her spiritual renewal and her way of

centering herself. Physical health was a topic of conversation. I noticed an increase in the amount of times I visited my physician and the emergency room after I enrolled in the doctoral program and become a mother. Other mothers in the program suggested that their physical health had been influenced by the demands of doctoral study.

All of these occurrences and conversations piqued my interest in exploring the counselor education doctoral journey from the perspective of mothers and how it relates to their overall wellness. Although general research on wellness is abundant, there is limited literature on the topic of mothers and wellness or on counselor education doctoral students and wellness. My dissertation research sought to combine both topics. Findings from this research have enriched the professional literature and presented implications for counselor education programs and women in this population.

The following sections include a rationale for this study and a summary of literature pertaining to the topic. My conceptual framework is then detailed and a synopsis of the research methodology is presented. Key terms that pertain to this study are also defined.

Rationale for the Study

Counselor educators have a responsibility to be supportive and nurturing of the students they teach. They also have the responsibility to self-nurture so that their functionality in professional roles is not diminished or impaired. "The underlying philosophy of counselor preparation rests on a foundation of wellness for professionals and professionals-in-training" (Myers, Mobley, & Booth, 2003, p. 273).

Because the doctorate in counselor education prepares many graduates for the professorate, prospective counselor educators should be attuned to wellness or form a

wellness routine during their doctoral studies. A full-time professor is typically required to teach a full course load; supervise master's or doctoral students; depending on the type of institution, fulfill service obligations to the university, community, and profession; and participate in presentations at professional conferences. The rigor of a counselor education doctoral program entails some parallel obligations. Counselor education doctoral students who are mothers have the added issue of adjusting to role changes and role shifts.

When I reflect back on the time when I began my doctoral studies, I realize there was nothing that could have prepared me for the realm of academia that I was about to enter. Pursuit of a doctoral degree was like nothing else I had experienced. Coupling that with the demands of being a new mother and wife, I felt overwhelmed, frustrated, and in need of support. The wellness of women in this population is a concern due to time constraints, stress levels, and role strain.

There appears to be a gap in the literature specific to this particular population. No research studies were found that specifically addressed the experience of wellness for counselor education doctoral students who are mothers. Extant research detailed gender and wellness (Croese, Nicholas, Gobble, & Frank, 2001), counseling students and wellness (Myers et al., 2003), and experiences of female full-time psychology doctoral students who had families (Padula & Miller, 1999). Richardson (1993) offered an opinion piece on motherhood and societal roles. However, nothing was found that was specifically tailored to the intended population of this study and their responsibilities as full-time counselor education doctoral students. The literature on the topic of *mothers and wellness* focused on information about makeovers and day spas as means of self-care.

Because wellness is a holistic paradigm, this research was needed to address total wellness for mothers who have multiple roles. A summary of the relevant literature furthers detail the need of this particular study and the conceptual framework provides a theoretical foundation.

Summary of Relevant Literature

To provide a comprehensive understanding, the relevant literature regarding women, motherhood, and career is reviewed. This summary demonstrated the need for qualitatively driven research in this area and explicated how this research study contributed to expanding and enriching the literature.

Women, Motherhood, and Careers

One of the most important roles for a woman is motherhood. Motherhood is a significant role for many women. It affects their lives in many ways including how they relate to other people; their ideas regarding full-time, part-time, or no employment; and most importantly, how they view themselves or their identity. Furthermore, "...having a child provides us with new opportunities for personal change...it can bring greater vitality, fun and humor into our lives, as well as provide a different insight into the world" (Richardson, 1993, p. 1).

Motherhood holds an important role in women's lives and views of self and interplays in complex ways with career aspirations. This interplay affects not only mothers, but their families, friends, coworkers, and peers as well. Although the traditional societal or generational messages may imply that women and career don't mesh well, some literature suggests the opposite. For example, Crittenden (2004)

suggested not only that motherhood and work mix, but that mothers are better candidates for managerial positions because they have the skills to multitask in both arenas.

Many women who have children also have decided to further their education or pursue a career. This decision, which challenges the old values of society and its ideal for mothers, can be described as an evolution. In the past, “society defined motherhood and paid employment as incompatible: if you want a child then you should be prepared to stay at home and look after her, if you want to work then you ought not to have a child” (Richardson, 1993, p.19). Furthermore, if mothers had to work, their line of work should be compatible with and interfere only rarely with their motherly duties. In a recent study, Milkie, Bianchi, Mattingly, and Robinson (2002) examined division of labor and spousal support. Their research indicated that there has been a shift in the viewpoints of couples raising children, with men and women tending to have more egalitarian views of childrearing and each partner’s responsibility. However, “actual” involvement versus “ideal” involvement has been questioned. There appeared to be an incongruence between the couples’ egalitarian expectations for the father to be equally involved with childrearing and the mothers’ reports of less actual involvement of fathers. The implication is that most of the actual childrearing still falls on the shoulders of the mother. Although recent statistics are not available, studies conducted eight or nine years ago indicated that women still did approximately 80% of the household duties and childcare (Barrett & Rivers, 1996; Moen & Yu, 1997).

Mothers who decide to reenter the realm of academia (especially to pursue a graduate degree) may find the experience of balancing roles overwhelming at times. An exploration of four married women with children who were full-time psychology doctoral

students shed light on the unique experience (Padula & Miller, 1999). Common themes that arose were frustration from lack of time and not feeling understood, resentment from family members, and no flexibility in schedules to deviate in case a change was needed (e.g. a sick child). The participants in this study expressed high stress levels, exhaustion, lack of support, difficulty feeling connected to faculty mentors, and family relationship strain. The data suggested that this population experiences intense emotion about returning to school (Padula & Miller). Additionally, faculty mentorship simply did not occur for the participants in this research study. Implications included that reentry women need to manage stress, be realistic about goal setting, be supported and have collegial relationships, and be exposed to faculty mentorship (Padula & Miller).

Counseling Students and Wellness

A recent research study explored wellness for first-year counseling graduate students at the master's and doctoral levels (Myers, Mobley, & Booth, 2003). The WEL (Wellness Evaluation of Lifestyle; Myers, 1998; Myers, Witmer, Hattie, & Sweeney, 1997) was utilized which includes constructs such as spirituality, self-direction, work and leisure, friendship, and love. Doctoral students in the sample reported higher levels of wellness compared to master's level students, especially in the life tasks of Spirituality and Work and Total Wellness. Additionally, doctoral students scored higher on the Gender Identity, Cultural Identity, and Intellectual Stimulation subscales. The higher scores by doctoral students on the aforementioned subscales may be attributed to more developed awareness of multicultural issues and increased student commitment to the educational process as it parallels their future work setting as a professor (Myers et al.).

Conceptual Framework

The conceptual framework for my research study is feminist theory. I chose feminist theory because it encompasses many aspects of women, career, and motherhood. I believe it provided not only a strong foundation for understanding the population being studied, but its tenets were also congruent with qualitative methodology.

Feminist Theory

Feminist theory, unlike many other counseling theories, cannot be linked to one specific founder or person. Feminist theory and feminism came about more as a collective process and wave for change. Many events and people have contributed to its evolution such as the Feminist Movement of the 1960's; Betty Friedan, author of *The Feminine Mystique*; the National Organization for Women (NOW); and Gilligan's theory of female moral development.

Friedan's book, *The Feminine Mystique*, was groundbreaking for women and society. The book details personal accounts and conversations regarding women and their roles in society, psychological theory behind women's socialization, a definition of the elusive concept of *feminine mystique*, and a new vision for women. Friedan (1963) defined the feminine mystique as follows:

The feminine mystique says that the highest value and the only commitment for women is the fulfillment of their own femininity. It says that the great mistake of Western culture, through most of its history, has been the undervaluation of this femininity. It says this femininity is so mysterious and intuitive and close to the creation and origin of life that man-made science may never be able to understand it. But however special and different, it is in no way inferior to the nature of man;

it may even in certain aspects be superior. The mistake, says the mystique, the root of women's troubles in the past is that women envied men, women tried to be like men, instead of accepting their own nature, which can find fulfillment only in sexual passivity, male domination, and nurturing maternal love (p. 43).

The so-called *new* mystique is actually an embodiment of old world values whereas the housewife-mother role is the model for all women (Friedan, 1963). According to the mystique, women's roles have reached their finite end and domestic facets of feminine existence (e.g.. cooking, cleaning, and caregiving) are now a pattern to live by. Anything less would be to deny one's femininity (Friedan).

The feminine mystique was women's collective way of thinking and behaving in what was deemed a socially appropriate manner. It encompassed women's entrapment into certain roles and deterred any movement away from traditionalism. Friedan's book sought to illuminate this phenomenon and provide insight into the nature of women.

Gilligan also contributed to the wave of feminism. She split with Kohlberg, her mentor, because she believed his theory did not take into account the differences between male and female moral development. Gilligan believed that women try to avoid hurting others and solve conflicts in a way that no one will be hurt, which she termed as the *ethic of care* (Gilligan, 1982). Since the ethic of care was not always feasible, women sometimes opted to take a more traditional route and defer to the judgment of men. Women may have felt the price to pay for making moral judgments or decisions could have come with harsh consequences from men "on whose protection and support they depended and by whose names they were known" (Gilligan, 1982, p. 67).

Gilligan's book, *In a Different Voice* (1982), describes a psychological theory and theory of development of women. It details women's socialization in a male-oriented world, women's moral development, and women's rights and responsibilities to self. Gilligan has articulated the different developmental processes of women and how these affect who they are and who they become, and how women's voices have been silenced for decades because we have listened so often to the voices of men.

Feminist theory is utilized as the conceptual foundation of this proposed study because it embodies the members of the research population. Feminist theory emphasizes the uniqueness of the individual, the egalitarian relationship, honoring women's experiences, and the idea of self-nurturance. All of these concepts are relevant to women and motherhood. First-year counselor education doctoral students who are mothers are a unique population because they are juggling not only the demands of family but also the demands of pursuing a counselor education doctoral degree. The first year in this program requires new focus, adjustments, and fulfillment of obligations such as supervising individual students, supervising groups, and assisting in research in addition to completing coursework. And even though this group may share many commonalities, there are individual differences and each woman's circumstance vary.

The egalitarian relationship is an emphasis of feminist theory. Women in the research population may or may not have or strive for this type of relationship with a spouse or significant other with respect to childrearing and household duties, depending largely on their ideas of motherhood and familial values. The nature of the relationship was examined in the current research study due to the heavy workload and adjustment of a beginning counselor education doctoral student. Honoring women's experience is

important because the women in the research population have an entirely different set of experiences than counselor education doctoral students who are males or women who are not contending with simultaneous responsibilities of parenting. Self-nurturance is also relevant for mothers and counselor education doctoral students because of the possibility of role overload. With so many obligations to family and education, mothers may find it hard to make time for self-nurturance or even lose a sense of self as they attempt to fulfill each role. All these factors lend support to the notion that women in this population are truly unique and their experience should be explored. Feminist theory provides a basis for such an exploration. To fully understand the theory, a brief overview is provided.

There are many constructs of feminist theory. The first construct is that the person is political. Much of what female clients bring to counseling can be linked to a political or social context. Messages work like a funnel system, beginning with the media or society, then trickling down to family and the culture that exists within, and finally to the individual (self). The second tenet is the idea of the counseling relationship being egalitarian:

One of the roots of women's problems is the unequal distribution of power between women and men, and between other dominant and subordinate groups. Thus, it is important for feminist counselors or therapists to establish counseling or psychotherapy relationships, in which clients are viewed as equal partners in the therapeutic endeavor...(Herlihy & McCollum, 2003, p. 338).

As mentioned earlier, honoring women's experiences is an additional construct of feminist theory. Feminist counselors value and embrace the uniqueness of each individual woman. Furthermore, feminist theory follows the ideals of counseling by

upholding the wellness model and rejecting the medical or disease model. By utilizing the wellness model, women's problems can be reframed in a more positive, therapeutic manner. Many problems or issues women face are products of their environment and at certain points in life, these issues may interfere with the individual's ability to function at an optimal degree of wellness (Herlihy & McCollum, 2003).

The goals of feminist theory are equality, empowerment, valuing diversity, and self-nurturance. Furthermore, feminist theory encompasses gender role socialization and gender role stereotypes. Gender role socialization refers to assumptions about men and women that have been passed down from generation to generation. From birth, girls and boys are supported and encouraged in very different ways by a myriad of people (Herlihy & Watson, in press). Gender stereotypes or stereotypical beliefs are emphasized by types of clothes, toys, games, language, television, and other resources provided to young children. Similar to the way societal messages are funneled down to women, so are gender messages funneled down to children. Boys are taught to be aggressive and competitive, while girls are expected to be nurturers and work for the betterment of the family system. Feminist theory challenges these messages and works collaboratively with the client to restructure them in a more appropriate way.

Lastly, feminist theory links to qualitative methodology. Feminist theory and qualitative methodology are aligned in that they both seek to explore the uniqueness of an individual (or group of people) in an in-depth, personal manner. Parallel to feminist theory, qualitative methodology seeks to understand, honor, and value an individual's experience. Both concepts work to allow individuals to be storytellers and illuminate

their experience. An overview of qualitative methodology and phenomenological research is presented to further support this point.

Overview of Methodology

Qualitative Design

According to Creswell (2002), qualitative researchers explore and seek to understand a central phenomenon. Qualitative research utilizes a plethora of nonquantitative methods in an effort to study participants' behavior and experience. It seeks to describe rather than quantify a phenomenon or process. A philosophical assumption underlying qualitative research is that knowledge is environmental and in order to fully comprehend it, one must understand the background or environment in which it is experienced (Rubin & Rubin, 1995). In qualitative research, the participants have the knowledge that will enrich the literature and the researcher is the instrument used to obtain the data (Groenewald, 2004).

Phenomenology

In a phenomenological research design, the researcher's objective is to describe a phenomenon. The researcher's aim is to stay close to the facts and not deviate into preconceptions or previously formed hypotheses. A phenomenologist is engrossed in understanding a phenomenon from the research participants' perspectives. Because I studied the experience of wellness for counselor education doctoral students who are mothers, a phenomenological research design was the most appropriate type of design to utilize. I believed that members of this population were storytellers and that only they had the information to enrich the literature.

Research Question

The purpose of the research question is to illuminate what participants want to share about a given phenomenon. My research question was, "What is the experience of wellness for mothers in a counselor education doctoral program?"

Role of the Researcher

As a qualitative researcher, I served as the primary vehicle to collect and analyze data. As a result, it was extremely important to be aware of my own personal assumptions and biases that may impede the research process. By being self-aware, I attempted to be cognizant of when too much of myself was merging into the true data. I detailed my biases and assumptions in Chapter Three.

Selection of Participants

The participants for the proposed research study were female counselor education doctoral students with at least one child lived at home and was under the age of 18. Research participants were recruited from CACREP- accredited counselor education doctoral programs in the southeast region of the United States. The states included were Louisiana, Georgia, and Arkansas. Although I am a doctoral candidate at the University of New Orleans (UNO), UNO was included for two reasons. Because I have completed all my coursework, I was not taking classes with research participants. Additionally, UNO is the only program that meets the criteria in the state of Louisiana and participants there should be and were given the opportunity to participate in the research. At UNO, participants were recruited via the counselor education doctoral electronic mailing list. At other selected universities, a letter that explained the nature of my study was sent to counselor education department chairs to disseminate to doctoral students who met the

specified criteria. Included with the letter was a more detailed introduction letter specifically addressed to potential participants, which specified how to respond via email if interested. Additionally, snowball techniques were used.

Data Collection

Data collection included: (a) two rounds of individual interviews, (b) focus group, (c) essays and journaling, and (d) memoing. I asked participants to volunteer for an initial, in-depth interview lasting approximately 90 minutes and one follow-up interview to clarify, confirm, and allow for new information to emerge. Each interview participant was asked to read and sign an informed consent form. Initial interviews were face to face, with the exception of one participant who participated via telephone due to distance, and included participants from different locations. Follow-up interviews were conducted via telephone. In-depth interviewing was utilized to elicit a rich description of the phenomenon.

After all individual interviews had been conducted, participants were asked to participate in a 60-minute focus group. Again, each focus group participant was asked to sign an informed consent form. The purpose of the focus group was to allow participants to meet and have an informal discussion about the topic and themes that had surfaced as a result of data analysis procedures.

All participants were requested to write an essay or keep a journal for one month. The participant essay allowed the research participant to record her viewpoint, perspective, or feelings regarding the research topic. The participant journal allowed the research participant to record the same information as the essay but on a more consistent, daily basis.

Data Analysis

Data analysis in qualitative research has been summarized by Merchant: "raw data collected are reduced through summaries, codes, and clustering. Then these (codes or clusters) are displayed through various means such as diagrams, structured summaries, and vignettes in order to verify, draw meanings, and reach conclusions" (1997, p. 10). The process is inductive and the researcher pulls themes from the data rather than testing a hypothesis. Lastly, the researcher attempts to apply verification procedures to confirm, clarify, and verify findings.

Trustworthiness

Because qualitative research involves so much of the researcher as a part of the process, it is important to ensure research findings are trustworthy. Multiple measures were taken to safeguard trustworthiness of the data including peer debriefing, reflective journaling, member checks with participants, and cross comparison of data or data triangulation. By utilizing a multitude of measures, rigor and consistency were established, making the findings more trustworthy and credible.

Definition of Terms

The following definitions provide a common language and dialogue for some of the terms used within and throughout this investigation. The definitions are comprised of information from professional literature and personal experience. Terms are defined for the purposes of this research study.

Counselor

A trained professional, who typically has acquired a minimum of a master's level degree in counseling (or a related field). The counseling professional provides clinical or mental health services to clients in an effort to assist in equipping clients with coping skills and helping clients to self manage their concerns.

Counselor Educator

A trained professional who teaches or educates students seeking to obtain a graduate-level degree in counseling. Counselor educators' realm of professionalism is inclusive of teaching, supervising, consulting, researching, and presenting at conferences at the state, regional, and national levels.

Feminist

One who believes in the basic tenets of feminism, equality for women, freedom and liberation to deviate from society's definition of femininity, awareness of gender role/sex role stereotypes and their effects, and a basic appreciation for the uniqueness of each woman.

Wellness

Myers, Sweeney, and Witmer (2000) defined the concept of wellness as an alternative to the traditional medical model. It is “a way of life oriented toward optimal health and well-being in which body, mind, and spirit are integrated by the individual to live more fully within the human and natural community” (p. 252).

Summary

The purpose of this chapter was to introduce the research study, provide a conceptual framework, and clearly define terms that were utilized throughout this

document. The literature presented in this chapter indicates the need for more research regarding mothers, counselor education doctoral students, and wellness. Exploratory research, specifically a phenomenological research design, illuminated the experience of wellness for counselor education doctoral students who are mothers.

In chapter two, I present a detailed summary of literature pertinent to my proposed research topic. In chapter three, the qualitative methodology is explained in detail. Chapter four provides a description and interpretation of findings that emerged from the data. Chapter five discussed the findings and their implications for the population, counselor educators, and future researchers. Lastly, chapter six presents a manuscript to be submitted for publication in a professional journal.

CHAPTER TWO

LITERATURE REVIEW

Introduction

The purpose of this chapter is to provide a review of the literature pertinent to the research topic, which is the experience of wellness for counselor education doctoral students who are mothers. The focus begins with a general overview of motherhood and steadily narrows to my research topic. This provides a foundation for understanding the implications of my research study.

Motherhood

Motherhood is a unique experience, different for every woman. Its meaning may be shaped by any combination of the following: a woman's feelings about being a mother, family, past experiences, her relationship with her own mother or guardian, self-identity, and society. The experience itself is very complex. Different women experience motherhood in different ways. Some feel it is important in establishing their identity. As Richardson (1993) stated, "It (motherhood) is an identity which, in our society, is necessary for full adult status as a *normal, feminine* woman" (p. 1). For some women, motherhood may be viewed as membership in a certain group and may provide feelings of belongingness. It could also mean the culmination of being defined as a *real woman*. Women may feel more worthwhile and purposeful once they have a child or children. There may be a tendency to believe that children provide purpose and meaning, which may translate into a reason for being. Furthermore, children can provide opportunities for personal growth. "Having children can bring greater vitality, fun, and

humor into our lives, as well as providing us with a different insight into the world" (Richardson, 1993, p. 1).

Women experience motherhood in different ways. Some women become fully engrossed in their role of being a mother and find it mostly enjoyable. Others find the work of childcare to be repetitive and tedious. "The endless stream of daily tasks- bathing, dressing, feeding, putting their children to bed at night, tidying up after them, responding to their demands for attention was an exhausting and predominantly frustrating and irritating experience" (Boulton, 1983). Additionally, mothers who stay at home with a new baby may be more susceptible to depression due to the hormonal changes associated with childbirth and feelings of isolation. Many women may expect to experience the emotional fulfillment of having a child immediately after childbirth, which may add to their anxiety or angst.

Whether motherhood is viewed as a role, identity, or relationship, its meaning can be defined only by each individual woman. Her experience and expectations shape her idea of motherhood and what type of mother she will be. Motherhood can involve conflicting emotions such as love, anger, joy, fulfillment, or frustration. This may explain why it is hard to find a universal definition of this phenomenon.

Family/Career Conflict

Recent statistics show that 70% of all women are working and women make up 46% of working Americans (Costello & Stone, 2001). Most women will be a part of the labor force at some point in their lives (Betz, 1994). Many women who have children have also decided to further their education or pursue a career. This occurrence actually challenges the old values of society and its ideal for mothers. This change in the times

can best be described as an evolution, which is not fully completed. In the past, “society defined motherhood and paid employment as incompatible: if you want a child then you should be prepared to stay at home and look after her, if you want to work then you ought not to have a child” (Richardson, 1993, p.19). Unlike choices for men, the decision to work or be a parent appeared to be a choice of one or the other, not both. Furthermore, if mothers had to work, their line of work should be compatible and interfere only rarely with their motherly duties. Because such a goal is unrealistic, the question arises as to who will provide childcare for the children of these working women. Our society has yet to provide adequate and affordable childcare for working mothers (Atkinson & Hackett, 2004). High quality childcare can be very expensive and hard to find, and may consume a large part of a mother's salary.

Some companies have begun to respond to the need for childcare for working mothers. Some businesses offer flextime, parental leaves for fathers, maternal leaves for mothers, and childcare for employees (Atkinson & Hackett, 2004). However, support services are still limited. Therefore, much of the burden of pulling a double shift (worker and mother) still falls to the mother and consequently is reflected in earnings and achievements (Hewlett, 1986; 2002).

Milkie, Bianchi, Mattingly, and Robinson (2002) examined division of labor and spousal support. Their research indicated that there has been a shift in the viewpoints of couples raising children, with men and women tending to have more egalitarian views of childrearing and each partner's responsibility. However, “actual” involvement versus “ideal” involvement has been questioned. There appeared to be an incongruence between the couples' egalitarian expectations for the father to be equally involved with

childrearing and the mothers' reports of less actual involvement of fathers. The implication is that most of the actual childrearing still falls on the shoulders of the mother. In fact, women still do approximately 80% of the household duties and childcare (Barnett & Rivers, 1996; Moen & Yu, 1997).

Mothers who decide to reenter the realm of academia (especially to pursue a graduate degree) may find the experience of balancing roles overwhelming at times. An exploration of four married women with children who were full-time psychology doctoral students shed light on the unique experience (Padula & Miller, 1999). Common themes that arose were frustration from lack of time and not feeling understood, resentment from family members, and no flexibility in schedules to deviate in case a change was needed (i.e. a sick child). The participants in this study reported high stress levels, exhaustion, lack of support, difficulty feeling connected to faculty mentors, and family relationship strain. The data suggested that this population experiences intense emotion about returning to school (Padula & Miller). Additionally, faculty mentorship (due to any number of possibilities) simply did not occur for the participants in this research. Implications included that reentry women need to manage stress, be realistic about goal setting, be supported and have collegial relationships, and be exposed to faculty mentorship (Padula & Miller).

Raddon (2002) explored the lifestyle of a university professor who was also a mother. The study utilized a biographical approach to explore one woman's narrative of juggling what was deemed a successful career as a university professor and being a good mother. The successful academic was defined as someone who is an avid researcher, networker, mentor, and productive professional with many publications who devotes

much of her time and energy to the university. The many activities of a successful academic leave little time for actual mothering. Research productivity was noted as a particularly difficult goal to achieve. Research is typically completed after normal work hours, which is also family time. "Women's research output is likely to suffer due to the double whammy of being required to perform a *second* shift, in the private sphere of the home, as well as in the public sphere of paid work" (Goode, 2000, p. 252).

The research participant's words were quoted throughout the article to provide meaning and concrete definitions of her experience. She defined the *good mother* as "selfless, subordinate, caring, mothering, giving, emotional, cooking proper meals, concentrating on home and family" and someone who knew that "it's okay to have a nice little job, but it can't take precedence" (p. 390). The *proper female partner* (or wife) encompassed selflessness, subordination, caring, and mothering. *Working* mothers were characterized as "selfish, putting their interests before those of their child but also working to support their child, independent, and has a life outside of the home" (p. 390). The *career woman* was defined as "independent, has mobility, intellectual, possesses strength and confidence, and selfish" (p. 390). The theme seemed to be that for women, any role inside the home (that of wife and/or mother) incorporates selflessness while any paid job or career entails some degree of selfishness. These themes reflect two opposing polarities and can be conflictual. One of the participant's reflections highlights this point:

At work I am completely different to how I am at home. When I'm at work I don't feel like a mother at all, and sometimes I feel guilty. I think, *God, I've hardly thought about Daisy all day* because I know that somebody else is doing that, in a way. But the minute I get to the nursery, it's changed. Then as soon as Daisy's

gone to bed, I'm different; I'm still the mother but I'm different. I'm more myself again (p. 392).

This narrative detailed the variety of emotions involved in being a mother, especially a working mother. "The difficulty is that the child-nurturing years are also the career nurturing years" (Moen, 1992, p. 133). This is particularly true for front-loaded careers (Denmark, 1992) such as careers in academia, law, medicine, and business management.

Due to the number of roles and obligations a working mother (or a mother who is a counselor education doctoral student) may have, the question of self-care arises. Self-care of mothers may become neglected or at least decreased when so much time must be devoted to career and family obligations. Thus, the question arises as to whether women who are mothers and doctoral students can achieve and maintain personal wellness. In the following section, wellness will be explored in terms of its origination, the concept of holistic wellness, wellness models, the Wheel of Wellness, and the Indivisible Self.

The Concept and Origination of Wellness

The term *wellness* was first used by Dunn in 1961. He defined wellness as "an integrated method of functioning which is oriented toward maximizing the potential of which the individual is capable" (Dunn, p. 4). Dunn (1961) also suggested that wellness incorporates relatedness among mind, body, family, and community. He defined high-level wellness as optimal functioning and viewed the process as a journey or quest that follows a hierarchy or continuum to that person's potentiality. Other theorists (Ardell, 1977, 1982; Hettler, 1980, 1984; Hinds, 1983; Jourard, 1963, 1971; Maslow, 1968;

Travis, 1981b; Travis & Ryan, 1988) concurred that wellness is a lifestyle choice in which individuals play a vital role in determining their level of wellness.

Wellness is a holistic concept that involves every dimension of the person (Gross, 1980). Wellness is not fixed in time; rather, it is an ongoing process. It rarely remains constant and is typically an ideal, dynamic, fluctuating state of being (Ardell, 1985; Cowen, 1994). Wellness is often viewed on a continuum that exists throughout the developmental lifespan (Cowen, 1991; Myers et al., 2000). It is attained through purposeful efforts rather than corrective action to repair a deficit.

Wellness as a Holistic Paradigm

Historically, the mental health professions have espoused the medical model which is reparative and focused on the pathological (Cowen, 1994). The traditional medical model was reactive instead of proactive (Cowen). Science and medicine separated mind and spirit from the body (Ryff & Singer, 1998). The medical profession defined health according to disease that was either present or not present and health education typically focused on the physical dimension of health.

Over time, the mental health professions began to recognize a more holistic paradigm of wellness and to focus on the social, emotional, and occupational well-being of individuals (Chandler, Holden, & Kolander, 1992). Progressively, many dimensions of wellness or a holistic viewpoint of wellness have become widely acknowledged in many fields inclusive of medicine, psychology, counseling, and health education.

Deliberate efforts in the human health fields such as medicine and mental health have extended health care beyond the disease model and have attempted to comprehend the many dimensions of human functioning (Ryff & Singer, 1998). Currently, health is

being conceptualized as more of a state of well-being rather than a lack of illness.

Coupled with the wellness movement, Ardell (1985) has addressed the state of national health problems and how they can be resolved. He stated that purposeful efforts to understand wellness or positive health may provide an opportunity to resolve the nation's health dilemma.

Historically, some psychologists incorporated the idea of *wholeness* or *holism* into their theories. Alfred Adler emphasized the importance of assessing a client's well-being in terms of both physical and psychological dimensions. Carl Jung defined wellness as a deepening of the personality (Schwartz, 1999). Abraham Maslow is noted for his *hierarchy of needs*, which represents each individual's requirement to fulfill basic needs, such as safety, before being able to satisfy higher-order needs of self-esteem and self-actualization. Therefore, his concept of wellness may have followed a vertical continuum. Finally, Carl Rogers' person-centered theory emphasized that people are naturally inclined towards self-regulation and self-fulfillment and incorporates the *whole* person (Schwartz, 1999).

Wellness Models

The four most widely used and known wellness models of wellness are those that have been developed by Hettler (1980), Ardell (1989), Zimpfer (1992), and Myers, Sweeney, and Witmer (2000).

The first holistic wellness model was proposed by Hettler (1980). His model was designed for the specific purpose of assessing wellness of college students. Hettler believed that colleges and universities should make efforts to encourage healthy lifestyles among the student body. He also believed that the lifestyle behaviors one establishes as a

young adult or adolescent set a foundation for lifestyle behaviors in middle or older adulthood. Hettler's wellness model is based on six dimensions: (a) intellectual, (b) emotional, (c) physical, (d) social, (e) occupational, and (f) spiritual.

Ardell's (1989) definition of wellness incorporates physical and psychological/spiritual health. Ardell's wellness model is composed of the following five dimensions: (a) self responsibility and medical self care, (b) nutrition and physical fitness, (c) stress management-boredom immunity, (d) ethics/values and purposes, and (e) norms and rules.

Zimpfer's model (1992) is primarily based upon his work with individuals diagnosed with cancer. Similar to Hettler's model, Zimpfer's model includes social, medical, and spiritual aspects. His model encompasses an individual's medical health, life-style management, immune function, psychodynamics, spiritual beliefs and attitudes, energy forces, and interpersonal relations.

Witmer and Sweeney's lifespan model (1992) is founded on developmental theories over the human lifespan. This model has been purported to be the most applicable for mental health professionals desiring to include a wellness component in their work (Granello, 2000). Myers, Sweeney, and Witmer (2000) defined the concept of wellness as an alternative to the traditional medical model. It is "a way of life oriented toward optimal health and well-being in which body, mind, and spirit are integrated by the individual to live more fully within the human and natural community" (Myers et al., p. 252). The Wheel of Wellness offers a holistic paradigm of wellness over the lifespan (Sweeney & Witmer, 1991; Witmer & Sweeney, 1992). The next section describes the Wheel of Wellness and its tenets.

The Wheel of Wellness

The original model of the Wheel comprised five life tasks: (a) spirituality, (b) self-regulation, (c) work, (d) friendship, and (e) love. The life task of work was later divided into work and leisure. Self-regulation was changed to self-direction and now includes 12 subtasks instead of the original seven.

Spirituality is defined as “an awareness of a being or force that transcends the material aspects of life and gives a deep sense of wholeness or connectedness to the universe” (Myers et al., 2000, p. 252). Spirituality is the core characteristic of healthy people (Seaward, 1995). It is also the source upon which all other dimensions of wellness are based (Chandler, Holden, & Kolander, 1992).

Self-direction refers to a sense of purpose and intention in meeting the major life tasks. The subtasks are (a) sense of worth, (b) sense of control, (c) realistic beliefs, (d) emotional awareness and coping, (e) problem solving and creativity, (f) sense of humor, (g) nutrition, (h) exercise, (i) self-care, (j) stress management, (k) gender identity, and (l) cultural identity.

Work and leisure offer an opportunity for enjoyable experiences that are inherently satisfying and provide a sense of achievement (McDaniels & Gysbers, 1992). The friendship life task is necessary according to Adler (1927; 1954). He believed that social interest was a natural tendency for humans who all need to feel connected to others (outside of marriage, familial, or sexual commitments). The last life task, love, is defined as “relationships that are formed on the basis of a sustained, long-term, mutual commitment and involve intimacy” (Myers et al., 2000, p. 257). The five life tasks interact with life forces such as education, business/industry, family, government,

community, religion, and media. Global events have an effect on both life tasks and life forces.

The components of the wheel are mutually influencing. If one area of wellness is affected by change, another area also will be influenced. Healthy functioning occurs on a continuum over the lifespan; consequently, healthy behavior at one point in life has an impact on later functioning and development (Myers et al., 2000).

The Wheel of Wellness (Myers et al., 2000) has been further expanded into The Indivisible Self (Myers & Sweeney, 2004). The Indivisible Self is an evidence-based model of wellness, which utilizes holism as its foundation. Similar to the Wheel of Wellness, it is based on Individual Psychology.

The Indivisible Self

The Indivisible Self model (Myers & Sweeney, 2004) is an evidenced-based model founded on the Wheel of Wellness. The model consists of a higher-order wellness factor, five second-order factors, and 17 third-order subfactors. The higher-order wellness factor was composed of certain items designed to measure it in the WEL (Wellness Evaluation of Lifestyle; Myers, 1998; Myers, Witmer, Hattie, & Sweeney, 1997) inventory. Based on Adler's concept of holism (indivisible self), understanding human behavior required "an emphasis on the whole rather than the elements, the interaction between the whole and the parts, and the importance of man's social context" (Ansbacher & Ansbacher, 1967, pp. 11-12).

The five second-order factors of the Indivisible Self model include (a) Essential Self, (b) Creative Self, (c) Social Self, (d) Physical Self, and (e) Coping Self. The Essential Self is comprised of four components: spirituality, gender identity, cultural

identity, and self-care. Spirituality, which is different from religiosity, has benefits for better quality of life and longer life span. Gender identity and cultural identity provide lenses through which we view and respond to experiences. Self-care means being proactive and preventative in caring for ourselves.

The Creative Self consists of thinking, emotions, control, positive humor, and work. Thinking has an effect on emotions and the body. Control represents the perceived ability or power to influence events or occurrences in one's life. Positive humor has multiple effects including physical and mental functioning. Positive humor has been medically linked to positive changes in the human immune system (Bennett, 1998).

The Social Self is comprised of friendship and love. The two concepts may be conceptualized as existing on a continuum and are not easily differentiated. Similar to the spirituality component of the Essential Self, both friendship and love may enhance quality of life and positively affect longevity. Support systems have been identified as a strong predictor of positive mental health over the life span (Lightsey, 1996; Ulione, 1996).

The Physical Self includes exercise and nutrition. These two components are widely emphasized often to the point of excluding other components of holistic wellness (Myers & Sweeney, 2004). Research has shown that those individuals who live the longest incorporate diet/nutrition and exercise into their lives (Bernaducci & Owens, 1996).

The Coping Self consists of realistic beliefs, stress management, self-worth, and leisure. Because unrealistic thinking or beliefs can be a source of frustration and

disappointment, realistic beliefs are emphasized. Stress is a factor of life that is inevitable but can be managed with certain coping techniques and skills. Similarly, self-worth can be developed through a variety of effective coping strategies. "As self-efficacy is experienced through successful experiences, self-worth increases as well" (Myers & Sweeney, 2004, p. 239). Leisure is an essential component of wellness. Allowing oneself to become fully engrossed and immersed in an activity aids in coping with life's stressors and requirements.

The Indivisible Self model is "affected by and has an effect on the surrounding world" (Myers & Sweeney, 2004, p. 240). Therefore, contextual variables have been included in the model because environmental factors may affect personal wellness. The four contexts or contextual variables are local, institutional, global, and chronometrical. The local contexts encompass Bronfenbrenner's (1999) micro-system. These include the systems in which we live the most often: family, neighborhood, and community. Institutional contexts affect individuals in either a direct or indirect manner. These contexts include religion, education, business/industry, and government. The global contexts include politics, culture, global events, environment, media, and community. The chronometrical context acknowledges that people evolve and change over time.

Gender and Wellness

A review of the literature revealed that significant differences have been exhibited between women and men in regards to wellness. Aspects that have been considered include biological well-being, physical and mental disorders, multiple-role stress, vocation or career, social support, and spirituality. With differences in reproductive health, women may experience more physical problems due to menstrual cycles,

pregnancies, births, cesarean sections, abortions, and menopause (Croese, Nicholas, Gobble, & Frank, 1992). For unisex disease or medical conditions, women tend to be hospitalized longer and more frequently (Travis, 1988a). Women are more likely to suffer from a debilitating disease, whereas men suffer from more life-threatening diseases.

Regarding mental health, women are more likely to be diagnosed and prescribed medication than are men. They are twice as likely to be diagnosed with an affective, anxiety, or phobic disorder (George, 1990; Travis, 1988b). Stressors also have received attention related to gender. Men's stress may be regarded as more one-dimensional and typically may be related to work. For women, multiple-role stress may be comprised of work and family. There have been mixed findings in the literature regarding stress and gender. Men's greatest stress may be centered on work, but their psychological stress depends more on marriage and family. Additionally, women's stressors of family and work may be more focal, but work may actually serve as a buffer and self-esteem booster (Barnett & Baruch, 1987; McBride, 1990).

Women may have more diverse work histories and less economic resources than men later in life (Croese et al., 1992). However, women tend to have an advantage in social supports. Men tend to belong to larger social networks, but women build closer, intimate relationships which can be utilized in times of need. According to Schwarzer and Leppin (1989), poor health is usually more pronounced in those who lack social support.

Connections and contacts with other people provide the basis for spiritual well-being. Studies have shown that women tend to be more religious than men; however,

when they begin a career, women tend to report less religious tendencies and consequently parallel the religious orientations of men (DeVaus & McAllister, 1987). A career may serve as an important source of identity for the woman and therefore replace part of the function that religion previously provided.

Wellness in relation to Career and Graduate Education

A symposium focusing on the challenges faced by female counselor educators (Ashton, Gaffney, Christensen, McCollum, & Herlihy, 2000) provided presenters' opinions on the topic as well as coping strategies. One doctoral student panelist discussed the balance of simultaneously juggling family needs, personal needs, career goals, and wellness as a requirement of a female counselor educator. She also noted that this is contrary to the traditional gender roles of women (as wife and mother). Another doctoral student panelist described the profession of counselor education as immensely rewarding but still pondered how family and children will fit into her chosen career.

The symposium also offered coping strategies for overall wellness of female counselor educators. One suggestion was to make an effort to take personal time and relax. Another emphasis was that being "superwoman" is simply not possible. Self-awareness of strengths and limitations as well as being attuned to the body was also highlighted. Lastly, learning to say no may be of benefit to female counselor educators who have to manage and balance many roles.

Graduate Women's Reentry Experiences

Padula and Miller (1999) conducted a qualitative case study which explored the reentry experiences of four married women who were mothers and full-time psychology doctoral students. Purposeful sampling was utilized to select participants. The criteria

for participation were: (a) be enrolled as a full-time student in one of the psychology programs at a major Midwestern research university, (b) be a reentry graduate student after absence for career, family, and childcare obligations, (c) be married with children (ranging in age from two to 16 years of age), and (d) be willing to discuss reentry experiences. The age range for participants was 32 to 48 years old. One participant was African-American while the other three were European American. All were of middle class socioeconomic status and participants were at different stages in their doctoral programs.

The research methodology was both exploratory and descriptive case study. The researchers wanted to investigate a phenomenon that had been relatively unexplored (exploratory) and give a description of the participants' experience so that they could be better understood (descriptive) (Padula & Miller, 1999). The three data collection methods were interviews, participant observation, and document collection. Semi-structured interviews were the primary data collection method. Initial interviews ranged from 60 to 90 minutes. Participant observation was conducted for a length of one semester to two and a half years. Participants were observed by the primary researcher in and out of classroom settings. Document collection included participants' graduate school application and autobiographical and goal statements (Padula & Miller). The data were then analyzed by using transcripts, notes, documents, and observations to code for themes. Verification strategies were used and trustworthiness was established by using methods of triangulation, member checks, and peer review.

The data suggested that the participants shared common experiences in their return to graduate school (Padula & Miller, 1999). The themes identified by participants

were decision to return, expectation vs. reality, measuring up, frustrations and difficulties, changing family relationships, necessity of organization, and rewards. Some of the key concepts that participants discussed were feeling disappointed in relationships with faculty, comparing self with other (younger) students, high stress levels, exhaustion, strained family relationships, difficulty maintaining intimacy with spouse, and being a servant to the date book. However, participants also reported the rewards of this experience as career advancement, learning, increased positive self-perception, and developing relationships with other students.

A major implication of this study is that reentry women may need the opportunity to share their story. Additionally, they need to manage stress, be realistic about goal setting, be supported and have collegial relationships, and be exposed to faculty mentorship.

Counseling Students and Wellness

A recent research study explored wellness for first year counseling graduate students at the master's level and doctoral level (Myers, Mobley, & Booth, 2003). The researchers used information from a WEL (Wellness Evaluation of Lifestyle) database, which contained a total of 3,043 adults. Of that number, 263 were counseling graduate students at the time the instrument was administered. The counseling programs represented were from the states of Nevada, North Carolina, Ohio, Louisiana, and Florida. Of the graduate student participants, 70% were women. This reflected typical enrollment in counseling programs. The ethnic/racial breakdown was: 74.9% Caucasian, 5.7% African-American, 12.9% other minority group, and 6.5% unknown. The mean age for entry-level (master's) students was 33 and the mean age for doctoral students was 34.

The WEL was used in this study. It utilized the components of spirituality, self-direction (inclusive of its 12 subcomponents), work, leisure, friendship, and love. A series of statistical procedures were conducted including *t* tests, Bonferroni's *t*, MANOVA, and Cohen's *d*, and interaction effects were evaluated. Results of this study indicated that counselor trainees were *more well* than the general population. The researchers suggested that counseling students' wellness may be attributed either to influences of their degree program or to a preexisting condition. The preexisting condition may have contributed to self-selection for a helping profession such as counseling (Myers et al., 2003). Female students scored higher than male students on Gender Identity and minority students scored higher than Caucasian students on Cultural Identity.

Doctoral students reported higher levels of wellness than master's students in many areas, including Spirituality and Work. Additionally, the doctoral students' means on each scale exceeded those of the master's students. The differences, however, were small. The authors concluded that the finding of *greater wellness* for doctoral students merits further study. They also noted that wellness may entail a developmental component; the longer a student is in a counseling program, the more wellness he or she may experience. The researchers suggested a need for more research on students at varying points in their degree programs or a longitudinal study to examine changes in students' wellness.

Conclusion

The review of the literature has indicated important findings regarding motherhood, wellness, and doctoral students in a counseling program. My research study

sought to explore all three of these components. By exploring the experiences of counselor education doctoral students who are mothers, more information was gathered regarding wellness in relation to the multiple roles these students play.

CHAPTER THREE

METHODOLOGY

This chapter provides the methodology used for this research study. This research utilized qualitative methodology to explore the experience of wellness for counselor education doctoral students who are mothers. The construct of wellness was defined as "a way of life oriented toward optimal health and well-being in which body, mind, and spirit are interrelated by the individual to live more fully with the human and natural community" (Myers, Sweeney, & Witmer, 2000, p. 252). A phenomenological research design was used. The remainder of this chapter addresses the rationale for using qualitative methodology, in particular phenomenology; the primary research question; the role of the researcher; the research plan; data collection and data analysis; and verification procedures.

Introduction

The term *wellness* was coined by Dunn in 1961. He defined wellness as "an integrated method of functioning which is oriented toward maximizing the potential of which the individual is capable" (Dunn, p. 4). Since then, a considerable amount of literature has focused on wellness. Several wellness instruments have been developed including The Wellness Inventory (Travis, 1981a), The Lifestyle Assessment Questionnaire-Wellness Inventory Section (National Wellness Institute, 1983), and The Lifestyle Coping Inventory (Hinds, 1983), and the psychometric properties of these instruments have been assessed (Palombi, 1992). Well-known models include the Wheel

of Wellness (Myers, Sweeney, & Witmer, 2000) and a more recent model, the Indivisible Self model (Myers & Sweeney, 2004). Additionally, gender and wellness (Croese, Nicholas, Gobble, & Frank, 1992) and the wellness of counseling students (Myers, Mobley, & Booth, 2003) have been explored.

Very little research has been conducted on the topic of mothers and holistic wellness. A literature search revealed only information on specific aspects of wellness such as makeovers and day spa visits for mothers (Woman's Day, 1998), wellness as it relates to caring for a diabetic child (Jutras, Morin, Proulx, Vinay, Roy, & Routhier, 2003), and ways African-American women can improve their wellness, both physical and interpersonal (Essence, 1999). This dearth of literature may suggest the need for more research on mothers and wellness. The current study of the specific population of counselor education doctoral students who are mothers was intended to add not only to the counseling literature but also to the limited research on mothers and wellness in general.

Rationale for the Use of Qualitative Methodology

According to Creswell (2002), qualitative researchers explore and seek to understand a central phenomenon. Qualitative research utilizes a plethora of nonquantitative methods in an effort to study participants' behavior and experience. It seeks to describe rather than quantify a phenomenon or process. A philosophical assumption underlying qualitative research is that knowledge is environmental and in order to fully comprehend it, one must understand the background or environment in which it is experienced (Rubin & Rubin, 1995). In qualitative research, the participants

have the knowledge that will enrich the literature and the researcher is the instrument used to obtain the data (Groenewald, 2004).

In this research study, wellness was explored for counselor education doctoral students who are mothers. The construct of wellness may be able to be quantifiably measured. However, the *experience* of wellness for the specified population cannot be obtained through quantitative methods. Furthermore, the purpose of this research was to *describe* the population's experience, not measure it. Members of this population were the storytellers and only they had the information to enrich the literature. They elaborated on their many duties of being a mother and doctoral student, which may not have been obtained through quantitative methodology. Therefore, qualitative methodology allowed for in-depth exploration of the phenomenon and illuminated the essence of this group's unique experience.

Justification for Phenomenological Research Design

Phenomenology is used to describe the lived experiences of research participants. Phenomenology has its roots in philosophy with noted philosophers such as Kant and Hegel. It emerged at the end of the 19th century to simultaneously resolve crises in the sciences, human sciences, and philosophy (Sadala & Adorno, 2002). Positivism was no longer able to answer human sciences questions. Husserl, a German philosopher who is regarded as the trailblazer in the field of phenomenology (Vandenberg, 1997, p. 11), criticized the positivist sciences for borrowing methods of natural sciences and utilizing them incorrectly (Sadala & Adorno, 2002). Husserl sought to merge the world of science with the lifeworld. Husserl's philosophical belief was that objects do not exist

independently in the external world (Eagleton, 1983; Fouche, 1993). One's perception is treated as one's reality, and one's reality as *pure phenomena* (Eagleton, 1983, p. 55).

Husserl developed four concepts deemed fundamental to the application of the phenomenological method. They are intentionality, description, reduction, and essence (Alexandersson, 1981). Baker, Wuest, and Stern (1992) explained Husserl's concepts in detail:

Consciousness is *intentional* because it is always consciousness of (something). The subject (participant) is directed to and experiences the external world. The object of inquiry is the *description* of the phenomenon as experienced by the individual. This necessitates reduction (which can be broken down into bracketing and identifying characteristic attributes of the phenomenon). *Reduction* leads to the uncovering of essential structure, the *essence* of the phenomenon experienced (p. 1356).

Phenomenological research designs follow Husserl's ideology of focusing on what is deemed to be true for participants. In a phenomenological research design, the researcher's objective is to describe participants' perceptions of a phenomenon. The researcher's aim is to stay close to the facts and not deviate into preconceptions or previously formed hypotheses. Because I was interested in studying the experience of wellness for counselor education doctoral students who are mothers, a phenomenological research design was the most appropriate. I believed that there was a unique phenomenon and experience that existed in the population being studied and in an effort to remain close to the facts, phenomenological research allowed this process to evolve and unfold naturally.

Research Question

The purpose of the research question is to illuminate what participants want to share about a given phenomenon. My research question was, "What is the experience of wellness for mothers in a counselor education doctoral program?"

Role of the Researcher

As a qualitative researcher, I served as the primary vehicle to collect and analyze data. Therefore, it was extremely important to be aware of my own personal assumptions and biases that may impede the research process. By being self-aware, I was able to be cognizant of when too much of myself was merging into the true data.

Researcher Assumptions and Biases

My primary assumption, based on personal experiences and conversations with others, was that it is very difficult, taxing, and stressful to balance family responsibilities and the responsibilities of being a counselor education doctoral student. From my perception, much of the responsibility of child rearing still falls on the shoulders of the mother. Although there have been changes in the *thinking* or *ideals* of parenting responsibilities, the *actual* child rearing is still primarily the mother's responsibility (Milkie, Bianchi, Mattingly, & Robinson, 2002). My experience as a mother has been to ensure that my child's physical and emotional needs are met to the best of my ability, to be responsive and responsible, and to be a nurturer and disciplinarian. Essentially, within the one role of being a mother, other supporting roles have evolved. Along with parenting, being a wife involves being a confidant, friend, and supporter to my husband. I'm the person who listens, encourages, cries, and laughs with him. Outside of home life, I was also a counselor education doctoral student. For a doctoral student, there is much

more involved than simply attending classes. I regularly supervised master's level students and served as a teaching assistant for master's level counseling courses. Other responsibilities included supervising master's level supervision groups and being a graduate assistant. Additionally, many doctoral students work on research grants, teach courses as adjunct instructors, or work full time jobs. Any combination of these responsibilities and roles takes a great deal of effort and work. I believe this ultimately has an effect on some, if not many, dimensions of wellness. Optimal wellness would be impacted if I was being pulled in many directions without some sort of buffer such as a support system, appropriate self-care, or physical activity. As a future counselor educator, a mother, and a wife, I believed wellness is very important and necessary. The obligations and responsibilities of each role needed to be fulfilled and in order for me to do so, I needed to attend to my personal wellness. My definition of personal wellness is feeling grounded or centered physically, emotionally, and spiritually. When one of the components is out of balance, the whole (which is me) follows suit. Consequently, wellness for me is very holistic in nature.

My bias in the research was evident in that I was a member of the population I studied; thus, the research topic directly intersected with my life. However, this very point was utilized as a driving force because certain things occurred: (a) I went into the process with some level of self-awareness and strove to keep it at the forefront; and (b) I used the resources available to me as a qualitative researcher (peer debriefers, journaling, and checking in with research participants). I continually worked to be aware of my predispositions and did not detach myself from them.

Researcher Sensitivity and Trustworthiness

Researcher sensitivity involves being attuned to participants enough to catch the fine details and subtleties that may emerge from data collection. Researcher sensitivity is the linking thread between participant statements and meanings (Strauss & Corbin, 1998). Sensitivity allows the researcher to look for common themes or connections between concepts.

Trustworthiness differs from the quantitative measures of validity and reliability (Creswell, 1994). In qualitative research, much of the burden of genuineness or authenticity lies with the researcher instead of statistical programs or applications. Certain procedures must be taken to ensure the credibility of research findings. Strategies that can be used to monitor sensitivity as well as develop trustworthiness are peer debriefing, reflective journaling, member checks with participants, and cross comparison of data or data triangulation.

Peer debriefing involves flushing out the data with an impartial peer to delineate between the factual data collected and the researcher's own biases or impediments. This procedure supports the credibility of the data and increases the confirmability of the findings as believable (Lincoln & Guba, 1985; Spall, 1998). Peer debriefing was done on a weekly basis for at least one hour in order to establish a consistent pattern of discussing the progress of the research and monitor sensitivity. Because the study related to wellness, I also discussed any changes in or perceptions about my personal wellness with the peer debriefer.

Reflective journaling was also implemented to give me the opportunity to record my personal reflections regarding the research and my reactions to the qualitative

process. Journaling was effective in allowing me to take ownership for my feelings and reactions. I wrote in my journal frequently about any thoughts or feelings relevant to the research topic, the research process, or me as the researcher.

Periodically, I conducted member checks with research participants in an effort to stay close to participant data and ensure that my interpretations and analogies were accurate and precise. Member checks involve sharing transcripts, analytical thoughts, and interpretations with participants (Glesne, 1999; Lincoln & Guba, 1985; Strauss & Corbin, 1998). This process allowed participants an opportunity to let me know if my ideas were indeed correct. After each initial interview had been transcribed, I arranged for an individual member check via email.

Lastly, cross comparison (also known as data triangulation) was implemented to illustrate consistency among my data collection methods. Data triangulation means utilizing multiple data sources, multiple methods of collecting data, and multiple interpretations (Merchant, 1997). Data triangulation assisted in exhibiting commonality between the different methods used and also addressed any discrepancies in the data. I triangulated the data through interviews, participant journals, and participant essays.

Research Plan

Before conducting actual research, a proposal hearing was held to seek approval from my dissertation committee. A formal protocol was submitted and approved by the Human Subjects Committee at the University of New Orleans [Appendix A]. Once approval was granted, I began selecting potential research participants.

Purposeful Sampling

In purposeful sampling, the researcher deliberately selects certain participants and sites deemed beneficial in understanding a phenomenon. Purposeful sampling was utilized to obtain participants for this study because a specific population has the experience and knowledge to enrich the professional literature. In other words, they are "information rich" (Creswell, 2002, p. 194). Along with purposeful sampling, snowball sampling was utilized. Snowball sampling is a form of purposeful sampling that is used once a study is in progress; the researcher asks current participants to suggest others who may be interested in participating (Creswell, 2002). I asked research participants during the interviews and informal conversations to recommend other participants who fit the research criteria.

Participant Selection

The participants for the proposed research study were counselor education doctoral students with at least one child. The participant's child or children had to live at home and be under the age of 18. Research participants were recruited from CACREP-accredited counselor education doctoral programs in the southeast region of the country. The states included were Louisiana, Georgia, and Arkansas. Although I am a doctoral candidate at the University of New Orleans (UNO), UNO was included for two reasons. Because I had completed all my coursework, I was not taking classes with research participants. Additionally, UNO is the only program that met the criteria in the state of Louisiana and participants there should be and were given the opportunity to participate in the research. At UNO, participants were recruited via the counselor education doctoral electronic mailing list. At other selected universities, a letter (Appendix C) that explains

the nature of my proposed study was sent to counselor education department chairs to disseminate to doctoral students who met the specified criteria. Included with the letter was a more detailed introduction letter (Appendix D) specifically addressed to potential participants, which specified how to respond via email if interested. Additionally, participants were recruited using snowball sampling.

Boyd (2001) has suggested that two to 10 participants are sufficient to reach saturation, while Creswell (1998) has recommended "long interviews with up to 10 people" for a phenomenological study (pp. 65 & 113). Saturation occurs when a theme is developed and no new data can increase or add to its specification (Creswell, 2002). My sample size was seven participants. I believe this number of participants allowed me to collect and gather enough information and reach a point of saturation.

Gaining Entry

The nature of this study did not necessitate gaining entry to a centrally located site to access participants. However, each institution had a gatekeeper or point person through which contact was established in order to reach the potential participants at that university. As specified earlier, counselor education department chairs served as gatekeepers. The chair was the first person to receive research information from me and was also instrumental in distributing information to potential participants. Again, a letter to department chairs, an introduction letter to participants, and instructions on how to respond if interested were included in the research packet. Research then proceeded according to the established data collection methods.

Ensuring Confidentiality

To ensure confidentiality and anonymity, participant names were replaced with pseudonyms. Audiotapes were transcribed by the researcher and a professional transcriptionist. Audiotapes and all other information including notes and transcripts will be stored in a secure location for seven years. Then, all research data will be destroyed. Participants will be provided with a full report of the results if they make a written request.

Data Collection Procedures

The specific phenomenon I was interested in is the experience of wellness for counselor education doctoral students who are mothers. Phenomenological research has one legitimate source of data...the informants who have lived the reality being investigated (Baker et al., 1992). Thus, the interview is a critical part of the process. Marshall and Rossman (1995) described the interview process as in-depth and grounded in traditional phenomenology. The interview provides an opportunity during which participants' descriptions are illuminated, explored, and gently probed (Kvale, 1996). The researcher must have skills to obtain the lived experiences without contaminating the data (Jasper, 1994). A basic requirement for interviews in phenomenology is an interest in participants' stories (Seidman, 1991). Furthermore, interview questions follow the phenomenological tradition. They are broad, open-ended questions geared to be as non-leading as possible (Baker et al., 1992). Questions are developed and refined between interviews as new insights emerge (Walters, 1995).

Individual Interviews

I asked participants to volunteer for an initial, in-depth interview lasting approximately 90 minutes and one follow-up interview to clarify, confirm, and allow for new information to emerge. Each interview participant was asked to read and sign an informed consent form (Appendix B). Initial interviews were face to face, with the exception of one by telephone, and included participants from different locations. Follow-up interviews were conducted via telephone. In-depth interviewing was utilized to elicit a rich description of the phenomenon. An interview guide (Appendix E) was on hand for me to remain focused in my line of questioning; however, the interview followed a conversational format in order to capture the participant's words as a natural occurrence. The semi-structured interviews were audio taped, transcribed, and analyzed.

Interview Questions

Initial interview questions broadly covered the research topic. Follow-up questions were tailored to address themes as they emerged. The following questions were utilized in the initial round of individual interviews and are included in the interview guide [Appendix E]: (a) Based on your experiences, how would you describe your role as a mother? (b) How would you describe a typical day (or week) for you as a mother? (c) Based on your experiences, how would you describe your role as a doctoral student in counselor education? (d) How would you describe a typical day (or week) for you as a doctoral student in counselor education? (e) Think about both roles (both as a mother and a doctoral student in counselor education). If you could use one feeling to describe the journey thus far, what would it be? (f) How would you define wellness? (g) Has any aspect of your personal wellness changed or been affected since entering the

program? If so, how? (h) What might be some ways to change, maintain, or improve your personal wellness?

Focus Group

After all individual interviews had been conducted, participants were asked to participate in a 60-minute focus group. Again, each focus group participant was asked to sign an informed consent form. The purpose of the focus group was to allow participants to meet and have an informal discussion about the topic and themes that had surfaced as a result of data analysis procedures. The focus group took place in a conference room equipped with speakerphones at the University of New Orleans. This allowed participants who were in another geographic location to participate via telephone conference. Participants were informed that the focus group was audio taped and were reminded about the limits of confidentiality prior to the group meeting.

Essays and Journaling

All participants were asked to write an essay or keep a journal for one month. The participant essay allowed the research participant to record her viewpoint, perspective, or feelings regarding the research topic. Participants who wrote essays were given a pseudonym to ensure confidentiality and anonymity; spelling and grammar were not taken into account. Pertinent questions from the interview guide were included to serve as stimuli but participants were encouraged to write freely and openly about concerns or issues in their experience. The participant journal allowed the research participant to record the same information as the essay but on a more consistent, daily basis. The participant essays reflected details about occurrences, events, and people relevant to the research topic.

Reflective Journaling

Reflective journaling or memoing is a technique used in qualitative research to allow qualitative researchers to use their senses as a source of information or data. Memoing involves researchers documenting what they see, hear, and experience throughout the process. Writing down hunches, thoughts, and internal dialogues allows the researcher to keep a detailed account of the process as a whole. These records help to integrate fleeting thoughts into the final analyses and additionally assist in reviewing a dimension that may not be obvious in the findings themselves (Polkinghorne, 1991). My researcher memos were dated so they could be referenced later for data clarification and verification.

Data Analysis

Data analysis in qualitative research has been summarized by Merchant: "raw data collected are reduced through summaries, codes, and clustering. Then these (codes or clusters) are displayed through various means such as diagrams, structured summaries, and vignettes in order to verify, draw meanings, and reach conclusions" (1997, p. 10). The process is inductive and the researcher pulls themes from the data rather than testing a hypothesis. Lastly, the researcher attempts to apply verification procedures to confirm, clarify, and verify findings.

In this research study, data were analyzed according to the techniques identified in the works of Colaizzi (1978), Osborne (1990) and Morrissette (1999): (a) Interview as a Whole, (b) Interview as Text, (c) First Order Thematic, (d) Second Order Thematic, (e) Within Person Analysis, (f) Overall Synthesis, and (g) Between Person Analysis. The following is a more detailed outline of each step:

1. Interview as a Whole: This step involves reviewing audiotapes and field notes. This was done soon after the interview while the information was still familiar. This step is basically to gain an awareness of the phenomenon paying close attention to tonality, use of metaphors, and nonverbals or body language of participants (Morrissette, 1999).
2. Interview as Text: The interviews from audiotapes are transcribed into written format. A professional transcriptionist and I personally transcribed tapes, to ensure anonymity of participants and to become more immersed into the data (Morrissette, 1999). Once transcribed, the transcripts were read multiple times to find key words or statements.
3. First Order Thematic (Abstraction): In this step, the key words or statements were paraphrased and assigned a theme. The themes were placed in a table, for easy reference.
4. Second Order Thematic (Cluster): This step involves clustering the themes into groups and including a general description of each cluster. The descriptions reflect the experiences within the themes of each participant and were used to compare experiences (Morrissette, 1999).
5. Within Person Analysis: This step entailed reflecting on and summarizing each participant's experience.
6. Overall Synthesis: In this step, an overview is provided which provides an understanding of both individual and shared experiences among research participants. This stage gave me the opportunity to compare participant experiences in a descriptive format (Morrissette, 1999).

7. Between Person Analysis: This step basically provided a grid or visual chart of the overall synthesis as a method of quick comparison reference and provided a global picture.

Verification Procedures

Trustworthiness

Because qualitative research involves so much of the researcher as a part of the process, it was important to ensure research findings were trustworthy. As noted in the *Researcher Subjectivity and Trustworthiness* section, multiple measures were taken to safeguard trustworthiness of the data including peer debriefing, reflective journaling, member checks with participants, and cross comparison of data or data triangulation. By utilizing a multitude of measures, rigor and consistency were established, making the findings more trustworthy and credible.

Summary

This chapter outlined this qualitative research study, which utilized a phenomenological research design. The purpose of this study was to explore the experience of wellness for mothers in a counselor education doctoral program. The researchable problem was discussed. My rationale for using phenomenology was offered along with its tenets and purpose. The research question, along with the role of the researcher, was detailed. Lastly, data collection methods and analysis were explained.

CHAPTER FOUR

FINDINGS AND INTERPRETATIONS

Introduction

In chapter four, profiles of the seven participants are presented. This chapter illuminates the stories and experiences they shared about motherhood, their role as counselor education doctoral students, and wellness. In the first section, individual profiles of the participants are presented. The second section describes the first round of interviews: individual analysis is followed by a group analysis and overall synthesis of round one. In the third section, data collected in the second round of interviews are presented in a thematic analysis, followed by an overall synthesis. Finally, findings from the focus group are discussed. Tables, charts, and diagrams are used to display and illuminate each participant's experience and their experience as a whole.

Participant Profiles

Participant profiles are presented to introduce the participants and their demographic characteristics. Participant quotes are used to illustrate the essence of each individual participant and her character. Seven women participated in the study. All were White, with one participant identifying herself as Italian-American. All participants were enrolled as doctoral students in counselor education programs in universities in the Southeastern region of the United States. A request for volunteers was sent to seven schools in the Southeastern region via electronic mail to counselor education department chairpersons. All Programs selected were CACREP- accredited and offered the doctorate in Counselor Education. A final criterion used in selecting universities was that the

institutions were within driving distance for the researcher (no more than 8 hours away) to secure an initial face-to-face interview. To increase the participant pool, one participant was interviewed via telephone for the initial interview, due to a 13-hour driving distance. The possibility of a videoconference was explored through the researcher's university technology department, but the necessary equipment was not available.

Eight institutions received a request for volunteers; participants responded from three institutions. Enrollment at two of the institutions was predominantly White, while enrollment at one institution consisted of an almost equal distribution of White students and minority students (Black, American Indian/Alaskan, Asian, and Hispanic). All the institutions were large institutions with an enrollment of over 16,000 students.

Participants ranged in age from 25 to 55. Participants indicated by their signature on the consent forms that they understood the benefits, risks, and limits to anonymity and confidentiality in this research study. They were provided with contact information of researcher and faculty supervisor if they had questions, concerns, or wanted to withdraw consent. Participant pseudonyms were chosen by the researcher.

Table 1 presents a display of participant profiles. It includes demographic information regarding marital status, age, ethnicity, and the number and ages of children.

Table 1 - Participant Profiles

Participant Pseudonym	Participant Age	Marital Status	Race/ethnicity	# of children	Age(s) of Children
Emily	45	Married	White (Italian-American)	2 sons	Both teenagers
Tonya	50	Married	White	2 daughters 1 son	16, 15, & 8
Melissa	41	Married	White	1 daughter	4
Camille	32	Married	White	1 daughter	3
Savannah	49	Divorced, Live-in boyfriend	White	1 son, 1 stepson	11, 18
Jessica	39	Divorced	White	1 son	7
Natalie	26	Single;lives w/fiance	White	1	7 weeks old

Individual Participant Profiles

This section presents information gained from initial interviews with participants. The purpose is to introduce the participants. Descriptions of participant body language, tone of voice, and other characteristics are included throughout this section.

Emily

Emily is a married, White female who is 45 years old. She is a full-time, second-year doctoral student. She has two sons, both of whom are teenagers. For our first interview, we met in a private room at her university's library. Emily's attire was very casual. Emily seemed thrilled about participating in the research and even stated after the interview that "it was therapeutic." Throughout the interview, Emily was animated as she expressed her thoughts and feelings. Her tone of voice was mostly calm but tended to rise slightly when discussing a topic that had great meaning for her. For instance, she discussed her upbringing and family of origin's values:

I am from an Italian family, second-generation immigrants, and motherhood is your first role. You can do anything else you want to do, but you can't neglect your kids.

Emily's present experience as both a mother and a counselor education doctoral student may test the limits of these values.

I know my kids love me and everything else, but this (doc program) is just a kind of validation that I've never found any place else in life. And I think in a way, because I grew up in the 60s, I think it's probably a lot like the way men felt, you know, head of household, and they went off to work to do all their business stuff. I think it's what women haven't been able to have. And even with my job as a teacher or school counselor, it was still a job but my family came first. And somehow with the (doc) program, it's not that my family's not first, but there's just so much more credibility for what I'm doing.

Emily also shared that she was proud of herself for working on her doctorate, especially at a point in her life when most other women would probably be looking to do other things.

At a time when a lot of women and moms who are my age are becoming static, I'm growing. I have a much better outlook on who I am and life and everything else that they do. And I don't want their life. I don't want to say, "Well now I've raised my kids to teenagers and now I'll be this whatever. I'm still becoming; I'm still beginning."

Tonya

Tonya is a married, White female who is 50 years old. She is a full-time, third-year doctoral student. Tonya was preparing to defend her dissertation within a month. She has three children: two daughters in their teens, and one son who is eight years old. For our first interview, we met in a reserved private room on her university's campus. Tonya seemed somewhat rushed at the beginning of the interview, as if it was another task on her list of things to complete. However, her pace slowed down as we progressed through the conversation and she began to seem more relaxed. Her attire was relatively casual.

Tonya consistently talked about her role as a mother in a metaphorical way. For example:

I believe that I am babysitting God's children. I believe that it's His kids and He gives them to me to baby-sit for 18 years to prepare them and equip them to return back to him eventually. I tell them (children)...that I am packing their bags. Every year that goes by, I am packing their bag trying to give them skills and abilities so when they leave me, they will be able to open their bags and make it in life.

Not only am I a role model, I am like the river that's pushing these boats along. Like the river, I will push these boats along until they get to the ocean or wherever they need to go and that's what I see. It's a very strong force and they (boats) get off on little inlets and the river pulls them back and gets them back on their way.

Tonya's spirituality also seemed to be interrelated with her sense of responsibility in being a mother. Tonya described her priorities in life:

God actually is first, then my family, and then my work...then comes the counselor ed...

My spirituality keeps me grounded; it keeps things in perspective and probably is why I put things in the priority I put them in. If I hadn't had that spirituality, I may have even put this program first, not realizing the impact that it would have had on my children.

Melissa

Melissa is a married, White female who is 41 years old. She is a part-time, first-year doctoral student. She has one daughter who is four years old. Our initial interview was at a coffee shop in a secluded corner. The coffeehouse was a family-owned business and had an air of hospitality and charm. Melissa walked in and we greeted each other. She spoke with the cashier, whom she seemed to know, and proceeded to sit down with me to begin the interview. She appeared casually dressed and comfortable from the beginning. It seemed like we had known each other for years.

Melissa talked at length about motherhood as a big adjustment for her initially.

Melissa had her child in her mid-30s and she spoke of how different her life was after her child was born:

I don't know if I am sort of a reluctant mother and I hate saying that because it sounds like you don't love your child and that's not even close to the case, but it was just really hard to balance. I was working full-time and when I was younger, I was used to coming home and if I was tired, just sort of crashing or watching TV or talking to my husband for a few minutes. But with a baby, you come home and have a whole other day's worth of work...I just found it a really hard adjustment.

Melissa also described her transition into her role of mother:

...now I think I'm much more at ease with it. It's (motherhood) been incredible and she's just the greatest kid. We have such a good time. She's such a neat person, sort of meeting her and falling in love with her has been really cool. But there's also the part of it where for 36 years, my life has been all about my career...

Melissa openly shared herself in the interview and, at times, checked in with me to see if she was conveying her message. She appeared to be at ease and even introduced me to her family when the interview was over.

Camille

Camille is a married, White female who is 32 years old with one daughter, age three. She is a part-time, first-year doctoral student. For our first interview, we met at a coffeehouse that was modern in decor and comfortable. Camille was dressed very casually and greeted me with a smile. In our conversation, Camille seemed honest and very optimistic about her goals, family life, and motherhood. She expressed her unwavering commitment to her family:

Being a mother is my priority. I work full-time, I'm a doctoral student, but being a mother is my priority.

I'm very adamant to have time with my daughter and my husband, which is important.

Every decision you make really revolves around, at least for me, every decision revolves around the family and (daughter) and her safety and well-being. I think another important part of raising a child is having a strong marriage because if you don't have that, the security with your child diminishes.

Camille spoke candidly about the counselor education doctoral program and how it meshes with her commitment to family:

Not only do I want to grow professionally, I want my daughter to understand that education is important.

My husband is a full-time student as well; I am actually part time. I knew going in, I made a very conscious decision that I was going to be part time. I'm not going to kill myself to try and get through because I do have other priorities.

Camille was consistently warm and pleasant throughout the interview.

Savannah

Savannah is a divorced, White female who is 49 years old. She is a full-time, third-year doctoral student. Savannah was preparing to defend her dissertation within a month. Savannah has one biological son (age 11) and a stepson (age 18). Savannah's boyfriend lives in the household with her and the children. For our first interview, we met in a reserved room at the university Savannah attended. Savannah was casually dressed and her body language suggested that she was comfortable. Her tone was calm. She took her time and provided thoughtful responses throughout the interview. She had just handed in her final draft of her dissertation document, and reflected on interesting points in her journey:

...my day is full, my office is a mess, my car is a mess, and this is not how I used to be...I'm not sure how I live with myself now. It's tremendous organization to get it all done and find stuff.

...when I decided to go to school, I knew it was going to be financially difficult so I made the decision at that point that I needed to do this as quickly as I could...I

did manage to do the coursework in less than two years but the dissertation process, for various reasons including hurricanes, took longer than I had anticipated. But fortunately, it is coming to an end.

Savannah was able to provide a holistic perspective because she was near the end of the doctoral journey. Her viewpoint was reflective.

Jessica

Jessica is a divorced, White female who is 39 years old and has one son, age seven. Jessica was a full-time, third-year doctoral student. She was preparing to propose her dissertation study. Jessica's initial interview was a telephone interview because she lived beyond a feasible driving distance. Videoconferencing was considered but was not feasible due to limited technical equipment at the researcher's university. Jessica's tone fluctuated throughout the interview. At the beginning, it was very calm, almost quiet. At other points, her voice trailed as she talked about some of the wellness issues. However, by the end, her voice was more passionate and she expressed an interest in collaborating with me after this research was completed.

Jessica was the only single parent (who lives alone with child) in the group of participants so she was able to paint a different picture of motherhood:

...having a kid is hard enough but being single and having a kid, time for yourself is a joke.

I am a primary person for my son; I am a single parent...It's the role of safety and provider and nurturer...The role of mother in my world, my first inclination is to say that it's my priority but often I feel distracted from it.

And being a single parent, I can't say to my spouse "I need you to watch (son's name) while I study" or "you go do the laundry" or "you give him a bath while I do this stats homework." So I don't study at home...I've had to be a different kind of student than I was used to.

Jessica added a new perspective of motherhood with her lived experience

as a single parent.

Natalie

Natalie is a single, White female who is 26 years old with a seven-week-old daughter. Natalie lives with her fiancé and is engaged to be married. She is a full-time, first-year doctoral student. For our first interview, we met in a reserved room at the university Natalie attended. Natalie was dressed casually and seemed enthusiastic about the interview. I knew she had a meeting to attend following our interview, so I tried to be cognizant of the time.

Natalie provided a different perspective on motherhood because she was both the youngest and newest mother in the group of participants. Throughout the interview, she discussed her life as a new mother:

Right now I feel like the sole provider, not because the father is not there, but because I am breast-feeding and literally cannot...leave the baby for more than several hours at a time.

I'm probably holding her about 80% of the day so it's a lot of walking around with her...

Natalie anticipated that her life as a student may change, now that she is a mother:

...I'm still so resentful that I have these extra duties (as a counselor education doctoral student). Especially now because when I set my schedule, I'm thinking "God, this could be so much easier on me as a mother if I didn't have to supervise and TA."

...it's very difficult to work or have a family. You have to pick. You can't do all three or if you can, you're superwoman...but I feel a responsibility to do it all because I got accepted (into the program)...

I'm a little overwhelmed and nervous about whether or not I'm going to be able to fulfill my student role as well as I was prior to having a baby.

Different counselor education programs may produce varying situations or circumstances for their students. Emily, Tonya, Savannah, and Natalie all attended a

large, ethnically diverse university. Melissa and Camille attended a large, predominantly White university. Jessica attended a different large, predominantly White university.

First Round of Interviews

Data Collection

Participants were asked to volunteer for an initial, in-depth interview lasting approximately 90 minutes. Letters to department chairs and potential participants were sent via electronic mail. Initial interview dates and times were also arranged using electronic mail. Once a meeting was scheduled, each interview participant was asked to read and sign an informed consent form (Appendix B). Initial interviews were face to face, with the exception of Jessica's telephone interview. I created an interview guide (Appendix E) to remain focused in my line of questioning; however, the interviews followed a conversational format in order to capture the participants' words as a natural occurrence.

The following interview questions were utilized in the initial round of individual interviews [see Appendix E]: (a) Based on your experiences, how would you describe your role as a mother? (b) How would you describe a typical day (or week) for you as a mother? (c) Based on your experiences, how would you describe your role as a first year doctoral student in counselor education? (d) How would you describe a typical day (or week) for you as a first year doctoral student in counselor education? (e) Think about both roles (both as a mother and a first year, doctoral student in counselor education). If you could use one feeling word to describe this first year, what would it be? (f) How

would you define wellness? (g) Has any aspect of your personal wellness changed or been affected in this past year? If so, how? (h) What might be some ways to change, maintain, or improve your personal wellness?

The semi-structured interviews were audio taped, transcribed, and analyzed. The following section provides an analysis of the first round of interviews.

Data Analysis (Individual Analysis)

Many themes emerged from the first round of participant interviews. After the themes were abstracted from the transcripts, they were clustered into groups. The following data analysis includes a chart of both themes and clusters, a description of each cluster group, an analysis of each participant (according to the themes that emerged), and an overall synthesis which details both individual and shared experiences of the participants. A chart which diagrams the overall synthesis is included.

Table 2 - Thematic Clusters, Themes and Subthemes (clusters are in **bold** type; themes and subthemes are listed below)

Socialization	Sacrifices	Wellness	Support
Feelings -guilty feelings -dichotomous feelings	Self	Physical	Family
Role Shift -participant -spouse/family	Relationships -marital/family -friendships	Emotional	Friends
	Program	Spiritual	Program -faculty -doctoral cohort group
	Means to an End		

Each cluster contains themes and subthemes that encompass the participants' lived experiences. The Socialization cluster details themes centering around society's traditional roles for women, especially as mothers. It also focuses on what happens to the

spouse and family when there are shifts in those traditional roles. Additionally, this cluster focuses on two types of feelings described by participants, guilt and dichotomous feelings regarding the doctoral process. The Sacrifices cluster details the myriad of sacrifices participants believed they made and the rewards of those sacrifices. The Wellness cluster details the physical, emotional, and spiritual components of wellness as described by participants. Participants discussed how they attempt to balance these components of wellness with the everyday routines of their lives. Finally, the Support cluster details the participants' descriptions of support systems, inclusive of family, friends, and faculty and cohorts in the counselor education doctoral program.

Emily

At the beginning of this interview, Emily provided a glimpse into her perspective of motherhood by describing her family of origin, who are second-generation Italian immigrants. She described her family's view of motherhood as mostly traditional, with a mother keeping her children as her first priority. This led into Emily's description of the roles she plays in her daily life, and more specifically, the shift in roles for her and her family since she entered the counselor education doctoral program.

Role Shift (in participant)

...but this is just a kind of validation that I've never found any place else in life and I think in a way, because I grew up in the 60s, I think it's probably a lot like the way men felt, you know, head of household, and they went off to work to do all their business stuff.

Role Shift (spouse/family)

The big questions are always, you know, "which night is this?" and "what time are you getting home"? My husband does like to cook and he's fine with taking care of dinners and things like that but he does get annoyed if I can't tell him exactly what time I will be home.

Yes. It's definitely a systems change and they (family) don't know what to do now because my role is changing and it affects them and so I think that it's just thrown them. But at the same time, I don't know exactly how to handle it and keep things exactly the same for them. So I'm the one who's changing and it's freaking them out.

Emily discussed a myriad of feelings throughout the interview. Some were focused on guilt, whether from family or self-imposed.

Guilt feelings

School (doctoral program) and the profession are becoming more and more important to me and I like, that but I'm still feeling guilty about it; lots of guilt and stress.

Ironically, I find school is adding to my health and my wellness and guilt is pulling away from it.

But yes, I think it (comments and resistance from family) causes a lot of resentment, a lot of anger and that causes more guilt. Talk about being cyclical because you don't want to say I'm angry with my family or resentful of how they're handling this and so it goes and goes...

Emily also presented dichotomous feelings of deflation and hope, competence, and sadness.

Dichotomous feelings

I have a lot of times when I just feel deflated and again at the same time, I feel so much more proud of myself and competent and worthy. Hopefully, they offset each other but most of the time in my life, I don't feel sadness unless there was a particular incident happening like my divorce or something. Just in general, I'm not a depressed person and yet now I do feel moments of just, "oh God, is this too much?"

Emily talked in our interview about certain self-sacrifices she made throughout the process of being a mother and a counselor education doctoral student.

Self Sacrifice

I've been trying not to use home time for school so I'm waiting for them to go to bed and then I'm going to my computer or whatever and I'm not getting much

sleep, not much at all. I've been getting to bed around midnight and getting up at five.

I have a leased automobile and it's up in August...I'm not getting another car so that will be a big savings each month. But I'm also trying to put together some support groups for students, not from the school where I work, but from other schools, just to get a little bit of extra money. But I'm trying to get the extra money so I don't put sacrifices on the family...

I would also be washing my own twin sets because we send our clothes to the cleaners and that's a substantial amount each week and so I figured I could dry clean myself.

Emily also discussed sacrifices she made to keep family relationships intact.

Family Relationship Sacrifice

I think there's a jealousy because I don't mind doing the work. It's all a part of that validation of this is a good place for me to be. I think if I were coming home and complaining, and whining about not having any time to do anything else, I think they would handle it better. I don't know if they think I don't need them or if this replaces them, but it's just the more I like it and the more I get from it, the more animosity I'm dealing with which is totally confusing and I'm not quite sure how to handle that. I've even started saying a few little complaints that I didn't even mean just to kind of take the edge off.

Emily discussed the program many times throughout the interview, often describing it as a temporary inconvenience.

Means to an End

...the house is messier, but that's not forever. And I may be tired, but that's not forever. And then the achievement, the accomplishment; it's just incredible.

...down the line, I think you can look at this as something to help the whole family if I have better job options and if I can make more money.

Wellness was extensively explored in our initial interview. Emily confided that she began to suffer panic attacks for the first time in her life when she became a counselor education doctoral student. She also became very aware of the lack of time she had for "getting sick" while juggling so many roles.

Physical Wellness

...and with the school counseling and all the little kids that come in... 4 year olds' noses are never clean, right? They're always on full blast and so I keep Windex in my office and I will do my doorknobs and the surfaces of things...and I think if people see me, I will look very neurotic and maybe I am, I don't know, but I don't have time to get sick.

I don't have time to do an exercise program. I park my car further from school so I can do some extra walking. I started doing combination exercise like when it's a typical day and I get up and I'm brushing my teeth, while I'm brushing my teeth I'm doing some sort of isometric, toning kind of a thing at the same time. And I was doing it as I was folding clothes yesterday because with a lot of the isometrics, I don't have to move. You can tighten you leg muscles or you can tighten your stomach muscles. So I find I'm trying to sneak healthy things into my routine.

And I'm also trying, even when I don't want to eat the vegetables and carrots like that, I'm trying to make sure I'm doing it because I know I'm under a lot of stress.

Emotional Wellness

In class one night, I thought I was having a heart attack. All the classic symptoms, and I said to myself, "This is probably nerves and anxiety," but it wouldn't go away. And my first thought was "Well, what if it's not? What if it's real?" And I thought of my kids. And I thought that I couldn't take the chance. My kids need me. And so, I called my husband and said "I think you need to take me to the emergency room." And he was like "You know that's stress and we're going to be there all night." And I kept saying that I had to find out. So that was hard too because he was like "Well, now look at what school did to you." So sure enough, by 4:00 in the morning, they (doctors) finally came back and had given me an EKG and all of this other kind of stuff, chest x-rays and everything. And they said it was stress and gave me a prescription for (anti-anxiety drug).

Lastly, Emily discussed the support she received from both faculty and peers in the counselor education program.

Faculty and Doctoral Cohort Support

...not only that the social group (doctoral cohorts) is a group that I respect and admire, but also that I have so much in common with. But the support is incredible and from the faculty, too.

Tonya

Tonya was very straightforward in her interview. She seemed to want to keep the interview at a steady pace and not digress from the questions asked. As I learned in the interview, Tonya's life was very busy. She was self-employed, finishing her doctorate, and has three children.

Tonya talked openly about her feelings during the interview. She noted that she loves learning in her classes but is frustrated with how busy she was.

Dichotomous feelings

So it's frustrating ...and what's weird is that I always liked the classes and enjoyed the classes and that wasn't frustrating. It was the way of being that was frustrating; it's just too much, it's way too much.

As the interview progressed, Tonya talked about some of the self-sacrifices she made while she was a counselor education doctoral student. She also discussed details of how her busy lifestyle affects her physical and emotional wellness.

Self sacrifice, Physical and Emotional wellness

I gave up many things during this process...taking care of myself is not an option; it's just not there. I have gained 100 pounds during this (doc program). And it's because I don't eat right and I'm rushed; I'm an emotional eater to begin with, so during stress, I run to food.

Program sacrifice and Means to an End

It's totally different than if I think I had come right from my master's with no kids, no whatever. I think the experience would have been probably richer; it was always a burden. Sometimes a means to an end. It's hard to explain but I think that through teaching I will probably be able to get some of the things that I missed.

Spiritual wellness was a theme Tonya discussed extensively, in particular with respect to her involvement (and that of her family) in the church (religious) and with respect to spirituality. As mentioned earlier, Tonya's spirituality keeps her focused and

grounded. Tonya also talked about church and church related activities, and spoke metaphorically about how her spirituality and role as a mother coincide.

Spiritual wellness

So from 5:30 on, we're doing, we have a lot of things we do for church. So on Tuesdays, Thursdays, and Sundays from 7 until 10 (pm), we're doing church stuff. On Sunday mornings of course we go to church.

My spirituality comes into it and I don't know how this is going to work with your thing (research). I believe that I am babysitting God's children, I believe that it's His kids and He gives them to me to baby-sit for 18 years to prepare them and equip them to return back to him eventually.

Lastly, Tonya discussed support from her husband and a housekeeper/nanny who comes in the afternoon to help get the children settled into their evening routine.

Family support

And I have tons of support. I have a husband who, well we work together... and I have a lady who makes the meals and without that, something would have had to give, there's no way I could have did the work, school, and the kids. There's absolutely no way.

Melissa

Melissa was very relaxed and forthcoming during her interview. As mentioned earlier, she talked to me as if we had known each other for a long time. Melissa showed a great deal of interest in the research from her first electronic mail message and continued her level of enthusiasm throughout the interview process.

Melissa talked in great detail about her adjustment to her role as a mother.

Role Shift (for participant)

For me, motherhood has been incredible and she's just the greatest kid. We have such a good time. And she's such a neat person, sort of meeting her and falling in love with her has been really cool. But there's also the part of it where for 36 years, my life has been all about my career...

...it (motherhood) was really hard. Some people just seem to adjust to motherhood like it's just, but it wasn't that way for me.

Melissa described changes in her spouse's role once she became a doctoral student.

Role Shift (for spouse/family)

...I can't say the doc program caused it but it has contributed to the strain; my husband feels overwhelmed, especially the first semester. My husband was really left holding the bag and I was checking with him and saying "How are you doing?" and he'd say "fine, fine" but he's had trouble maintaining wellness... his stress level is higher because he was taking on more of the family responsibilities which has been really hard on him and to be honest with you...he agreed to it but I don't think he fully bought in to it. And so, I think he has some issues with feeling intimidated. He didn't finish high school but he's a very accomplished person, I think it's hard for him; he has a lot of fear that "she'll go off and get her PhD and leave me," which is ridiculous but understandable.

Melissa felt some guilt associated with her role as a mother.

Guilt feelings

I try to take any day class that I can because I'm much more alert. That's a big difference because at night, I want to be home with my child whenever I can because the guilt is so...I've gotten better with that (guilt) because she's gotten better with it, but as the semesters have gone on, I also only have one class.

Melissa described a number of sacrifices in her first year as a doctoral student.

One sacrifice in particular was the strain on her marital relationship.

Relationships sacrifice (Marital/Family)

He'd say "You're never home. When you're here, you're not here," because I would be upstairs typing.

I think I had a pretty clear idea of what I was doing (by becoming a doctoral student), but it didn't make the doing of it any easier because you don't know the reality of working constantly. There's a strain on everyone.

Last semester I felt like every weekend, I was reading or writing... it's like 7 days a week. And then being home and not being able to be with my daughter, that was tough.

Melissa reflected on her roles as wife and mother, how they affect her experience of the program, and how her experiences may differ from those of others.

Program sacrifice

I miss some of that stuff that you get when you're not married and a mom because some of the single people in our program have a social life together and it's more fun for them than it is for me.

Melissa was aware of the politics of a doctoral level program and described how she contends with that system.

Means to an End

There's some authoritarian kind of things going on. It seems like some of the faculty members have a high need for control; some of the people struggle with that more than others. I think part of that is being a mom and just saying this is something I need to do and what's best for me and my family and I'm just going to jump through the hoops, I'm not going to make waves, I'm just going to do what they say.

Melissa identified physical, emotional, and spiritual aspects of wellness. Exercise and weight seemed to be prevalent concerns for her.

Physical wellness

What I'm about to say isn't about the doc program, this happened anyway when I was in my masters program too. I have trouble keeping my weight down especially when I'm in school because it's a lot of sitting and driving and especially since I became a counselor because the work I did before was much more physical. I was on my feet running around a lot, and in this work you sit on your butt a lot.

So keeping myself organized to exercising, which I'm not because it's not one of my favorite things, I have to make myself do that, and so that's been always an issue but especially an issue when I'm in school, it seems.

Since I was 18 years old I have been saying to exercise more and have my weight be better, more healthy. I've probably gained about 15 pounds since I started the program so I need to get rid of that and maybe 40 more.

In discussing her emotional wellness, Melissa expressed her belief that her social

connections and church activities help her to be in a better emotional space.

Emotional wellness

Making more of an effort to keep my social connections here where we live and we're very involved in the church. I of course scaled back on that because there were some time commitments there but I am continuing to do some things with the church and continuing to do that because I feel better when I do that. I think you try to go into your shell and just do your thing and you can't do that because it doesn't feel well.

Melissa believed her spiritual wellness aids her in her journey.

Spiritual wellness

...for me, there's a big spiritual piece (of personal wellness) that I feel fed and supported in that journey in my life...long term wellness is about where your mind is, your heart, and your spirit...

Finally, support was a theme that emerged for Melissa in terms of the program and her doctoral cohorts. Melissa felt very much supported by faculty, and by one faculty member in particular whom she felt understood her experience. Additionally, Melissa felt supported by her doctoral cohorts.

Faculty support

...the director of our program has two young children and she's a Godsend to us. And she'll read an article on moms and how hard it is to balance things and she'll make copies for us so she's really sensitive to the experience, not as a doc student, but trying to get tenure with babies and things like that. It's really nice.

I got pneumonia in January and I've never been sick like that. Getting really sick like that and having to go to bed for 3 weeks, I got really a lot of support from the faculty. I was really worried about that but then I was so sick that I really didn't care. But they were so supportive and helpful and understanding. So that was great and I appreciated that.

Doctoral cohort support

I was also concerned that the program would be competitive amongst the members in the cohort group and it wasn't that way at all. We're really supportive of each other which has been a Godsend. We also have an APA approved

counseling psych program in our department and they're supportive of each other but it's different because there is some competition amongst themselves...

Camille

At the time of our interview, Camille was in her second semester of her doctoral program. She repeatedly expressed her interest in learning but emphasized her strong commitment to family and to being a role model for her daughter. Camille described her roles of mother and student as both overwhelming and inspiring.

Dichotomous feelings

Overwhelming! At times I feel overwhelmed. But most of the time I would say, in both of my roles, I'm really inspired. I was talking to some of my colleagues at work today and I said I can't imagine loving anything more than I do my daughter...of course I love my husband, but being a mother you just love your children but in a different way...I said there are parents out there that feel like being a parent is a job but to me it's a privilege to be a parent. I've been given this task...this responsibility... to raise this child and to me that's inspiring. I take that very seriously. So I would say I feel inspired being a mother as well as having an opportunity to be a doctoral student.

Camille discussed sacrifices in various ways, in terms of the decision to be a part-time student and in terms of the quality of her experience in the program and with other doctoral cohorts.

Means to an End

...people get so stressed out and I stress out too, just like anybody else. But the way I look at it, it's all been done before. We're gonna get through it and it's gonna be difficult. It's a challenge. But I went in to it knowing it was going to be a challenge. I didn't have these grandiose expectations that I had to finish in a certain time because there are other things that are just as important to me as the program. But I'm a learner and I wanted that; I wanted to continue growing professionally just for my own sake and my family's sake. I'm not one that needs power and prestige but I do want to grow professionally and move in a different direction with my career not only for my sake but for my family, too.

Program sacrifice

It's a neat experience so far, I've just finished my first year and I probably don't have the same experience as most students because I am part time. I don't live in (city where university is) so I'm probably not as connected as others and as connected to my cohorts as I would be if I was a full time student. But it's a growing experience for me right now. I knew going in, I made a very conscious decision that I was going to be part time. I'm not going to kill myself to try and get through because I do have other priorities. Some students go in, they want to be there for three years, done, and out the door. That's great. Maybe I'm the 6-year plan. (laughs).

Camille also spoke of her personal wellness in terms of physical and spiritual wellness. She accepts her busy schedule and knows that exercise has been sacrificed due to limits in time. There is overlap in the themes of physical wellness and self-sacrifice. She also believes her spirituality influences the family environment.

Self Sacrifice & Physical Wellness

...Before when I worked full time, wasn't in the doctoral program, didn't have a family, wasn't married, there were other things that were important like exercise which I don't get to do quite as often right now. It's important to me but I allow myself the permission not to have to exercise 5 days a week or 7 days a week. It's okay if I only walk twice a week. So I think you have to change focus. But once you get to a certain point in your life, these things (family) are important and it's okay if I don't do some of the other things (exercise).

Spiritual Wellness

Spirituality for me is very important because it's another foundation for that healthy family environment. And just like teaching my daughter about education and respecting herself, opening other doors so she can make decisions about her spiritual growth is important.

The theme that stood out the most for Camille was that of support. Camille expressed support in a number of ways including family, friends, and faculty support.

Family Support

I have a very supportive husband and family and without that, I wouldn't be able to do this... that support is the foundation for wellness for me, not just having it but knowing you have it. It's knowing. It's like a childlike faith; knowing you

have that support and knowing that there are people there that love and will back you up. Otherwise I wouldn't be able to do what I'm doing. There's no way I could go back to school and further my career if my husband wasn't willing to work his school schedule with my school schedule. It's a give and take.

Support from friends

Just knowing that I have support. It's funny that I keep in touch with a core group of friends back from high school and college, and my drive time from work to school is often when I get to catch up with them so I use that because I think again that that's important. When I say support, I mean family and friends because having a good group of girlfriends is a great way to maintain wellness. In two weeks, every year we go on a girls weekend. In two weeks, there are seven of us flying up to another girlfriend's house to surprise her for her birthday. So maintaining friendships, too. Family is important but you have to have other moms who are dealing with the same thing.

Faculty support

Initially, maybe the shock of going back to school and getting on a schedule because I kind of live and die by my calendar. I try not to; sometimes I really have to say, "It's all going to work out, it's fine." But initially it was probably like, "Oh my gosh, what have I gotten myself into?" But I talked it over with my major professor and asked "Do you think I should take one class or could I handle two?" She was very realistic. She has two small children herself and she suggested taking one this semester and getting back into the flow of school, so I did. And I think that was the best thing I could have done for myself to ease that transition...

Savannah

Savannah offered a holistic perspective because she was nearing the end of her doctoral journey. She disclosed details of the relationship with her youngest son and her occasional feelings of guilt.

Guilt feelings

...my 11 year old requires a whole lot of love and attention and he wants me to be there. Guilt trips come up because he wants me to be on the field trips. Right now he still wants me involved and be a part of his life and be happy with what he's doing and who he is and to help him along the way. So, a lot of nurturing...

At the end of her counselor education doctoral program, Savannah was able to identify a range of feelings that emerged throughout the program and towards the end.

Dichotomous feelings

The feeling words I would choose at this point are happy, excited, and sad. I'm happy that I have reached this point in my doctoral journey, and can now remove school from my weekly schedule, my must-do list, and from my list of focus points. I'm very excited about what the future might hold for me, even though so much of the future is unknown, I like being in control of my own destiny, that I can now choose what I do when and how I do it. At the same time, I'm sad, sad thinking about all the mother and family things I have missed, sad that I will not be a part of the doctoral student fellowship/support system, sad to say goodbye to something that has been a huge part of my life for the last five years...for so long I felt overwhelmed, but that feeling doesn't seem to be present any longer now that the end is in sight.

The themes of family relationship sacrifice and means to an end overlapped when Savannah talked about her relationship with her family.

Family Relationship Sacrifice & Means to an End

...unfortunately, my family tended to be kind of last on the list during that time period (during doctoral program), but they were very understanding because they knew I was really going to push for the 2 year plan. So they were like "We can deal with this for 2 years." It's temporary and we constantly talked about that. That it was temporary.

Wellness was an overarching theme for Savannah. She talked about wellness in physical, emotional, and spiritual terms.

Physical wellness

I've done yoga for many, many years; I'll do some stretching every so often but it's not like I used to do. I have gained the freshman 15 every year for the past 5 years so it's like I weigh a lot more than I ever weighed in my life and I don't feel as well.

Emotional wellness

...emotionally (I'd like) to be able to have time for myself; that's something that I think is an important part of wellness and I don't make that much time for myself.

...the connection to my son with picking him up from school; I always try to be home at the end of the day or end of his day before he goes to bed so we can talk for a few minutes and that really helps with my emotional wellness. But I guess most of my emotional wellness is connected to other people, whereas I think a real important part of emotional wellness is self-connection and I just don't have that much time for that part.

Spiritual wellness

Spiritual, I've never been a real religious person. I have a very unique way of looking at spirituality. So I don't go to church but that's okay because it's not a part of my spiritual philosophy. A part of that philosophy is a connection to nature and that's just something that I really haven't gotten to do that much of.

Lastly, support from her long lasting relationships with a group of women was important to Camille.

Support from friends

Once a month I do go with my girlfriends, a group of ladies. We have been getting together monthly for 20 years, and I do that. That's the one thing that I make sure I have... it's usually on a Sunday and that day is for me.

Jessica

Jessica was the only single mother among the participants. Her experiences as both a mother and counselor education doctoral student differed from the experiences of the other, married, participants. Many themes emerged for Jessica, but the themes of support and sacrifice were the most prominent.

Dichotomous feelings

...the juggling and balancing is very haphazard. I don't feel very purposeful. I don't feel like I have a plan. Often times it's like, "Ok, we made it through another day."

The scattered (feeling) is just that it's just so much and there are so many days where I'm like "Ok, I made it through". I can't think ahead because I want to get through the day. Not every day, but there are a lot of days like that. And scattered in that I can't seem to stay organized at all and I'll look in his (son) folder and I'm 2 days late on that and then there's like a test this week. I feel like I'm always playing catch up. The other part about content (feeling) is that I love

school and I love what I'm doing. I'm very happy about that and then I love being a mom.

As a single mother, Jessica was aware of sacrifices she has made. She discussed the quality of her role as a mother and how being a single parent has required sacrifices from her and has affected her relationship with her son.

Self sacrifices

I know that when I was married, I could say to my husband, "I gotta go. Me and my girlfriends are gonna go camping" and I wouldn't have to worry about my son. And I can't do that now. So that opportunity to kind of nurture myself and take care of myself, there's no time; it's pretty much gone. And that's been a big adjustment.

...having a kid is hard enough but being single and having a kid, time for yourself is a joke.

Family sacrifices

I don't think that I'm able as a full time student and working that I'm able to give my role as mother my full (attention), well as full as I'd like it to be. ...if I was able to be more fully a parent, a mother, I would be more involved with some things with him. I'd be more at school with him, I'd be more involved with his friends and their families; I might get to know some of their (friends') parents better so we could start connecting socially. I plan to have him involved in more extracurricular activities than I do right now, but I just can't...

Jessica also described the program sacrifices she has had to make as a single mother.

Program sacrifice

...my efforts (as a student) have been minimal...due to being a parent and a single parent. I'm a full time student and I have a GA position so it's pretty much what I do. It is my role, other than being a mother, it's the primary role for me. I've not been as engaged with professors as I would have wanted to be. It's just what I do. And so it's also been kind of secondary.

And being a single parent, I can't say to my spouse, "I need you to watch (son) while I study". Or you go do the laundry or you give him a bath while I do this stats homework. I don't study at home just because by the time we get home, it's

about 7:30 or 8 and then I can't stay up till 2 or 3 (am) on a regular basis to study. I've had to be a different kind of student than I was used to.

Jessica, speaking in terms of physical wellness and emotional wellness, described some of the outdoor activities she and her son share, but she has no continual exercise regimen dedicated to taking care of herself. She related how she cares for the emotional part of her wellness.

Physical Wellness

I don't do any physical activity at all; we go camping at the edge of town. In the summer, we go find as many rivers and lakes and creeks to go swimming in them, but there's not a whole lot of down time for me.

Emotional wellness

...that balance (referred to earlier in interview) is more easily tipped out of balance. At periods during the semester when things are due or stress is high, I don't have a lot of resiliency built up, so that would be a wellness issue for me.

I see counselors when I need to, so that's a resource. I've known her for a really long time and she has reminded me that I pretty much work 3 full time jobs.

For Jessica, support (or sometimes lack thereof) was prevalent throughout the initial interview. Her mother was her main sense of support.

Family support

My mom is my primary support and it's probably not so much emotional (support). I've been in school for 2 years, I started in Spring of '03, and towards the end of last summer and even more so now, she is willing to watch my son if I need to go do something for me. Before, it wasn't that way, so that's been slow coming.

Lastly, Jessica identified program support from faculty and her doctoral cohorts.

Faculty support

...being in the doc program and having more flexibility than when I was working so I've been able to say to people "I can't get this done, can I get an incomplete?" or "Can I turn this in late?" and they've been pretty accommodating because they

know my life. So the flip of that is the benefit has been a little less structure and a little more flexibility...

Doctoral Cohort Support

...well the support systems are limited and lacking and a lot of that is just because I am a parent and most of my colleagues are not. I feel like I have a group of friends at school, most of which is pretty transient. Because they are PhD students, it's often that we're all stressed at the same time.

Natalie

Natalie was both the youngest participant and newest mother in the group. Her daughter was seven weeks old, so Natalie was able to illuminate the experiences of being a new mother and how it has affected her daily routine. At the beginning of the interview, Natalie focused on her adjustment to becoming a mother.

Role Shift (for participant)

...it's very hard to leave the baby for more than several hours at a time. I just feel like I have to be there to feed and change and do everything, and I feel like right now it's all on me. And at first it is because the baby has to be with the mom so much because you're breastfeeding and the dad is still kind of getting used to his role, so I'm really feeling a little overwhelmed still. I know it will get better the older she gets, but it's still very time consuming...

...I am feeling overwhelmed right now with both those roles (mother and counselor education doctoral student). I was very comfortable as a student in the student role and as a worker, but now it's changed. And I'm still struggling with the mother role because it's so new. So I'm still questioning and ask people things and really get into that role and feel comfortable with it. Right now, I'm a little overwhelmed and nervous about whether or not I'm going to be able to fulfill my student role as well as I was prior to having a baby. I'm just hoping that I'm able to manage both and do a good job with both...

Natalie experienced dichotomous feelings in fulfilling her many roles and some of the other responsibilities of being a counselor education doctoral student.

Dichotomous Feelings

I'm still so resentful that I have these extra duties. (laughs). Especially now because now when I set my schedule, I'm thinking "God, this could be so much

easier on me as a mother if I didn't have to supervise and TA" and then you have to get supervised in a group and individually. And it's just so much extra stuff and me living out of town, it's extra trips for me. So I really feel that they put a lot on you and it's very difficult to work or have a family, you have to pick, you can't do all three or if you can, you're superwoman. So right now, I'm just feeling overwhelmed. But I do feel that I have this responsibility to do it all because I got accepted, I took (it) on, I knew what I was getting into...

...I've tried to let it (guilty feelings) go and really been getting on myself about (it) because I see all these opportunities and I just delete them when I get the email right away. I get so angry with myself, but I've been telling myself that not everyone has to do it (publishing and presenting), but it's still something that eats at me.

Ok, there's two separate things, the TAing and supervising versus the presenting and publishing. The other responsibilities such as TAing, I get angry about it; just frustrated with it; resentful about it. But at the same time I appreciate the experience. I think I would feel differently if this was all I was doing but because I feel stretched and just have too many obligations, I tend to get angry and frustrated with it. With the publishing and the presenting, I feel frustrated with myself. I really turn it inward because it's stuff that I want to do, that I wish I could do, but I know it's just not in my means right now, I can't do it. And because it's not mandatory, I know it's recommended and it's assumed that you're going to do it, I know I don't have to do it but I'm angry at myself because I feel I should do it. So one is towards myself and the other is towards the program and it makes me feel inadequate that I'm not publishing and presenting. I should be doing it; a lot of shoulds with that.

Because Natalie is a relatively new mother, many of the sacrifices that other participants described did not emerge for her. However, Natalie spoke of two sacrifices: time with friends, and a desire to publish and present at conferences, but simply not being able to do so.

Friendships sacrifice

The only thing that's changed is that I don't have very much time for my social life. I don't get to spend very much time with my friends. It's just family and that's just because they're there. (laughs) If I didn't live with them, I probably wouldn't see them either.

Program sacrifice

...another thing that I've been struggling with is that it's assumed that you're going to present at these conferences and do research with a professor, which I would love to do to get that experience but I really don't have the time or money to go to Canada to present. I feel like I need to do it but I can't. Another thing that I've been struggling with is I just had a baby. Before I had the baby, I had trouble fitting it into my schedule so now it's really out of the question. And I guess I feel a little less adequate as a doctoral student if I don't do these things because everybody else is doing them, why can't I do them? Another thing that worries or bothers me is that it may hold me back if I don't do it. That this is giving everyone an edge that I'm not getting...am I going to measure up or is this going to put me behind everybody else? Will I be able to get a position afterwards because I'm not publishing and not doing these things?

Natalie tries to maintain her emotional wellness especially since she became a new mother and is aware of how easily it can be neglected.

Emotional wellness

... to treat myself once in a while; to put myself first every once in a while even if it's the smallest little thing like taking a ride and not thinking about anything, as long as it's doing something for myself. And I would like to do that once a week to keep me sane. So just something to help me relieve some of the stress of being a mother and being in the program.

Overall Synthesis - Group Analysis (First Round Interviews)

Emily, Melissa, and Natalie were aware of role shifts since they became doctoral students: Emily in terms of shifting her traditional female role, and Melissa and Natalie in terms of adjustment to motherhood. Emily and Melissa described the effects of their role shifts on their husbands. Emily's husband gets annoyed if he can't pinpoint her whereabouts or if there is a change in her daily schedule. Melissa's husband feels overwhelmed when taking on the family responsibilities.

All participants freely expressed feelings throughout the initial interviews. For Emily, Melissa, and Savannah, guilty feelings were troublesome. All of the participants, with the exception of Melissa, also discussed a range of dichotomous feelings including

frustrated and content, deflated and worthy, competent and overwhelmed, and sad and happy. A gambit of emotions described their journeys as mothers and counselor education doctoral students.

All participants talked about sacrifice in some form. Sacrifice emerged the most strongly for Emily, Melissa, Camille, and Jessica. Camille spoke of her sacrifices, but in the same breath they really didn't seem to bother her because she saw them as a necessary part of the process. Emily's sacrifices were all for the betterment of her family: she waits until her family goes to sleep to do school work, runs groups to bring in money to compensate for not working full time any more, and makes a few "false" complaints about school to keep the peace at home. Sacrifice for Melissa was related to family relationships: for her, school added to marital strain and to loss of time with her daughter because of school assignments. Jessica, as a single parent, related sacrifices to self, family, and program in terms of lack of time to do extra things for herself, with her son, and in the program.

All participants were aware that their personal wellness had diminished. Emily mentioned her onset of panic attacks during the doctoral program. Tonya threaded her spirituality and spiritual wellness throughout her interview. Tonya, Melissa, and Savannah discussed weight gain and eating habits; each of them gained between 15 to 100 pounds during their doctoral journeys. For Camille, spirituality was a foundation for a healthy family environment. Jessica has limited her physical activity and has utilized counseling services as a resource for emotional wellness.

All participants, with the exception of Natalie, spoke of support. Tonya, Camille, and Jessica spoke of family support, although Jessica's support was more from her

family-of-origin (her mother). Emily, Melissa, Camille, and Jessica spoke of positive faculty support. Emily and Melissa discussed positive peer support, while Jessica stated that her peer support seemed limited. She also implied that the limited peer support may be associated with her minimal efforts to seek it. Camille and Jessica valued support from friends. They both have a close-knit group of women with whom they gather and/or travel socially.

Table 3 - Overall Synthesis Display

	Emily	Tonya	Camille	Melissa	Savannah	Jessica	Natalie
Role Shift (in participant)	X			X			X
Role Shift (in spouse/family)	X			X			
Guilty feelings	X			X	X		
Dichotomous feelings	X	X	X		X	X	X
Self sacrifice	X	X	X			X	
Relationships sacrifice (family)	X			X	X	X	
Relationships sacrifice (friendships)							X
Program sacrifice		X	X	X		X	X
Means to an End	X	X	X	X	X		
Physical wellness	X	X	X	X	X	X	
Emotional wellness	X	X		X	X	X	X
Spiritual wellness		X	X	X	X		
Family support		X	X			X	
Friends support			X		X		
Program support (faculty)	X		X	X		X	
Program support (doctoral cohorts)	X			X		X	

Follow up questions for Second Round Interviews

After the first round data analysis was complete, follow up questions were formulated. At least one question from each cluster was used to further explore participants' experiences and capture a more focused perspective.

The first question was *Who or what experiences shaped your idea of womanhood? motherhood?* This question was selected from the socialization cluster to explore the prominent person(s) and/or experiences that have influenced participants' views of themselves as a woman and as a mother. According to feminist theory, women are socialized to be nurturers, caretakers, and relationship-oriented. This follow-up question sought to explore the origins of and models for participants' gender identity.

The second question was *What are some of the sacrifices you've made to be who you are right now (a mother and counselor education doctoral student)? What are the rewards of those sacrifices?* Because sacrifice was a theme that emerged for each participant during the first round, I wanted to further explore their ideas about sacrifices they've made and also the rewards of those sacrifices.

Program support had emerged as a theme in the first round although it wasn't specifically asked in the first round of questions. Thus, I wanted to further explore this idea. The third set of follow up questions was *Do you feel supported by the counselor education program? faculty? cohorts?*

The fourth question focused on wellness. I gave each participant a brief description of Myers and Sweeney's Indivisible Self Model (2004), which emphasizes Adler's idea of holism. The fourth question was *Do you think these parts (physical wellness, emotional wellness, and spiritual wellness) influence each other and then have*

an effect on your overall, holistic wellness? The purpose was to explore participants' views of the interrelatedness of wellness components and their effect on overall wellness.

Data Analysis - Second Round Interviews

The follow-up interviews were conducted via telephone, with the exception of Emily who requested to meet in person. The telephone interviews were conducted from the researcher's home office at a time when no one else was home. Each interview lasted approximately 20 to 30 minutes.

Focusing on themes that had emerged from the first round, participants' responses in the follow-up interviews enriched the data previously collected. The second round analysis included the following: new themes and clusters that emerged, a description of each cluster group, an analysis of each participant by cluster, an overall synthesis, and an overall synthesis display.

Table 4 - Clusters and Themes for Second Round Interviews

View of motherhood/womanhood (socialization)	Sacrifices	Rewards	Counselor Education Support	Wellness
Mother's modeling	Time	Personal Meaning	Faculty Support	Wellness Components Focus
Education	Finances		Cohort Support	
Extended family/friends/others impact	Involvement			

The first cluster is labeled View of motherhood and womanhood (socialization). This cluster details the origin of participants' ideas or perspectives of motherhood. It includes pertinent people or experiences that shaped their viewpoints. The Sacrifices cluster entails participants' responses to being asked specifically about the sacrifices they have made. The Rewards cluster is comprised of participants' descriptions of rewards for

their sacrifices. Each participant's response was different, but each had a personal meaning for the participant. The Counselor Education Support cluster entails participants' perceptions of faculty and cohort support in their doctoral programs. Lastly, the Wellness cluster describes the interrelationships of the physical, emotional, and spiritual components of wellness and which component(s) stood out most for each participant.

View of Motherhood and Womanhood (Socialization)

Mother's Modeling

This cluster analysis included participants' examples of how their mothers (or other significant persons) impacted their perspective of motherhood and womanhood. It also captured the influence of education for some participants.

Although the telephone interview was offered, Emily requested to meet face to face for the second round interview. We met at a coffee shop and sat in a private corner on the patio. Emily's mother was a prominent figure who shaped her perspective of womanhood and motherhood. Emily uses her mother's example as a resource to help her cope with some of her guilt feelings as a busy mother.

my mom... she's been teaching kindergarten for over 45 years. So...that's a significant role model, but the way or journey...of how she...reached the point where she is now... She started working towards her degree at 40... my brother and I were 8 and 10. Instead of her day finishing up at 5:30-6:00 when the dancing was done, then she was going to class...in the evenings. Took her 8 years, start to finish, and she did get her degree, and then continued with the dancing and the teaching... and when I'm feeling guilty, I think, well now wait, my mother was a very busy mother. And, I don't feel like we suffered in any way. And that helps me...that kind of justifies things a little bit, that I'm not necessarily being a bad mother and neglecting my kids, and that maybe it's okay. And, I think, had I not had that, I'd be struggling a lot more with how much of my time is being taken up.

Tonya's mother was also a prominent figure, one who modeled attributes that Tonya did (and did not) want to imitate with her own children.

I learned a lot of what I wanted to be like (from her) and plus a lot of what I didn't want to be like. It's scary when...I do some of the things she did that I didn't like and unfortunately, it's worse (laughs) with teenagers.

Camille's mother was the prominent person in her life who shaped her view of motherhood. Her relationship with her mom influences her relationship with her own daughter.

The first person that certainly pops into my mind is my own mom. However, I feel like looking back, probably as a mother, I'm not the same as her. But I think my values have been definitely shaped by my maternal grandmother and my mother... my mom and I had a close relationship and I feel...that probably has impacted my relationship with my child...

Melissa's mother had multiple influences on her daughter. Melissa described her mother almost as if she had two separate identities, one as mother and one as working professional. Melissa, now 41, had her first child (her daughter) when she was 36 years old. Melissa spoke of her mother's impact on her as a mother.

...that was not an easy relationship (my mother and me)... My mother stayed home until I was 13 and then she went to work...as a kid, I was relieved a little bit. My mother was very competent...she's a very educated person, particularly for her generation... I think she goes with some of the feminist ideas and some of that is her personality, too. Sort of struggling with her job as a mother, not being a very important job and then to be working and make these academic contributions to society... I think she really struggled with the whole traditional upbringing versus was she learning and doing out in the real world. And she's said things to me like, "I did not value motherhood the way now, looking back on it, I wish I had." So I think in her head, motherhood wasn't very important. I don't know that that was the way I wanted my family. My idea was that mothers are stressed out and I don't want to be stressed out... I think a part of the journey for me (in deciding to have a child) was wanting a child; it took me a while (to get there).

Like Emily's mother, Savannah's mother was non-traditional for her generation. She, too, had a professional career in addition to being a mother.

...my mother, who was a very non-traditional mom after a certain point in her life, as well as in my life. She worked part time, prior to divorcing my father, but after they divorced and I was 12 years old...she became a full-time employee in order to support us. So, in many ways, how I view motherhood and womanhood and who I am was based upon her...I was the last child that was at home with her...so I think she had a tremendous influence upon how I saw who I was supposed to be, as a woman and as a mother.

As a new mother, Natalie relies on her mother and mother-in-law for help.

Natalie's mother was also a role model.

...my mom...she's just been a role model...and I have the first grandchild, so none of my brothers and sisters have been a parent yet, so I've really have had to rely on my mother and (spouse's) mother, as well...

Extended family/friends/others' impact

Emily's grandparents lived with her family when she was a child and filled in for her mother. Her grandparents' presence helped justify her mother's ability to have multiple roles.

...my grandparents lived with us, and so it wasn't a question of babysitters or anything like that. That was always there, that extended family kind of thing. So, I'm imagining, I don't know for sure, but through my lenses I guess that would have made it easier to justify being able to be this busy. And my grandmother and grandfather did pick up a lot of the traditional roles that the wife and mother would have been doing. They would cook dinner so that in between her finishing the dancing and going to school, dinner was there.

For Tonya, people whose kids exemplified what she described as "good kids" helped shape her mothering skills.

Other examples of motherhood are a few people who have raised good kids and trying to figure out what traits they have that I'd like to pull from them...

Camille's father and grandparents influenced her values as a mother.

I don't think that just comes from my mom; I think that it comes from my dad and...my grandparents. They've always instilled certain values and aspirations in me...all of those things make me who I am as a mother... those (values) started out not just with my parents but their parents. They valued education and they

valued hard work and I think that gets passed down and those were good qualities. So those are things that I want to instill into my children.

Savannah's older sister played a role in shaping her ideas of motherhood and womanhood and exemplified the delicate balancing act.

...my oldest sister...went straight from being a teenager to getting married to having children, but then as soon as those children grew up...she chose to pursue a professional career, including going back to college...and actually getting a full-time job and being able to juggle being a mother to adult children and grandchildren. So watching how she managed to kind of balance those roles and as to what it meant to be a mother and a woman.

Savannah seems to have applied those lessons and skills of modeling from her mother and oldest sister in her career choices. Before becoming a full time doctoral student, Savannah built a career in computers and industry, fields that were predominantly male. She, in essence, became her own "professional role model."

Similar to the other participants, Jessica mentioned her mother as a role model. However, she did not focus on motherhood as much as she focused on the topic of womanhood. As a divorced parent, Jessica reflected on what she called "a non-typical marriage" and mentioned that it too played a part in shaping her view of herself as a woman. She especially focused on the impact of her girlfriends.

...my girlfriends. My significant girlfriends probably began in my 20s and have evolved; they've been the ones who nurtured my view of womanhood and my view of myself as a woman.

Natalie's friends and family were influential in her role as a mother.

...and friends or other influential adults in my life, such as other family, aunts, uncles, seeing them be parents, and watching them raise their children also helped...me as a mother. Family...family is really big, it's a huge, huge part of my life and they really shaped who I am.

Education

For Tonya, education played a part in shaping her role and behaviors as a mother.

I find that most of it comes from... what I've learned about children and teenagers in my counseling classes and using counseling skills and incorporating those types of things into my life. I try to change certain behaviors through my reading and studying in books and parenting books...

Camille's education influenced who she is as a woman, as did some of her master's degree cohorts.

...my education has certainly influenced who I think I am as a woman. Just learning about women's ways of knowing and ways of thinking and understanding and things like that. I think developmentally and socially...my education has certainly shaped that and I would probably attribute that to a couple of women more at my master's level, just because I've only just begun my doctoral program. I would definitely say more in my master's program I've learned a lot about being a woman and the differences between men and women.

Jessica reflected on the impact her education has made on her view of womanhood.

Reading probably has shaped my thought on womanhood more than anything, even more than my mom. Just reading a lot of diverse reading, reading about women, reading about women's spirituality, reading about women's development, those kinds of things influenced my view on myself as a woman.

Sacrifices

Time, Finances, and Involvement

For Emily, the theme of sacrifice emerged in this second round interview, in terms of time and financial sacrifices.

Certainly time, I think would be the #1...I don't have any kind of luxury of time. But, then it's also made me realize how much time I wasted, I mean not that, I really did waste time in that sense, but I wonder how I filled the time before, because now time has become such a commodity that I'm very much aware of when there's available time.

...going to the conferences...that's a lot of days off from work, and it's a lot of money, and as far as the days off from work are concerned. There have been a number of months where I've had one or two unpaid days, because it was the only way I could attend...

Tonya's sacrifices involved time (with family) and church involvement. As she neared the end of the doctoral process, many changes have enabled her to complete this last leg of the journey.

...I think the major sacrifice was family and there were many times this last year like taking trips on the weekend. He would take them places to get them out of the house so I could work and there were just things he needed to do so there was a little cabin in (city name) where he would take them from Friday to Sunday so I could be home working on my dissertation.

I'm usually very involved in the ministry and church things and that was sacrificed. What happened was, I spoke today at church and this is how I gave it as an example. Normally my education stays at number four or five on my list, with God being first and then family, then work and ministry and then school. It always ran fifth. But to finish, it had to move up to number three most of the time, but actually number two a lot of times. And even towards the end, it was number one which was probably the reason why I was so frustrated and low in spirit. I wasn't getting fed anything but that.

Camille sacrificed social time, exercise, travel, and previous career mobility. The major sacrifices for her were those of time and finances. Camille repeated her commitment to family in this second interview, and the circumstance of being in a household where both she and her husband are seeking degrees.

I knew that it was going to be a struggle for us...both time-wise and financially...for him (husband) to go back to school. But it was a sacrifice that I was willing to make, that he wanted to make, and that we did together. So as far as financial sacrifice, yes, I think we are in the midst of that.

Melissa's life seemed overloaded now that she is a mother and doctoral student, and she never really gets to focus on herself. She has sacrificed time with her daughter and has missed professional opportunities.

I've sacrificed time with (daughter) to be in class... having a child is such an upheaval of a life experience. And then you're loaded with that sense that there's never enough time...

I sacrificed things I (normally) would have done in the master's program as far as the research and the reading... I can only read three or two (articles) and in the

past, I certainly would have made more of an effort to put it into overkill. We have a few younger women in the program who don't have kids. One of them got published this year already and she's only been there a year. I can't do anything like that. There's no getting on research teams and things like that.

Savannah's sacrifices were related to time with family and friends, and to finances. Finances actually determined to a degree some of the experiences Savannah had with her youngest son.

...there's the family experiences that were sacrificed...such as to stay home at night, and being able to go do things in the evening that I couldn't do, because of either being in school, or having some other commitment....the evening times for me, that's a little personal time you can spend with your family. And that was a loss. I feel that there were also times a sacrifice was made in the time I could spend with family that doesn't live in my household, times that I didn't have available to spend with my friends. You know, I always made a point of going to my ladies club once a month. But there were other things...all of those types of things just kind of fell by the wayside. I even hadn't time to respond to emails and things like that...all those things in (the) semester that were connection-related types of sacrifices.

Financially, I sacrificed. Especially trying to juggle household expenses with about one and a half incomes. That was something I wasn't used to... there was more going out, less coming in, and so I had to sacrifice, especially from my kids what I could and couldn't do.... And the financial sacrifices have influenced the experiences that have been sacrificed, because there were a lot of things that I did with my stepson, my oldest, that I could not do with my son. It's disappointing to sit there with your child who says "where are we going to go this summer?" and "what are we going to do?" Well, I don't know that we can afford to go anywhere.

As a single parent, the quality of Jessica's schoolwork suffered (directly related to a lack of time), as did her professional involvement and finances.

...probably the largest sacrifice, from my perspective, is the quality of work. The quality of my work, not that it's bad, but it's not up to what I feel I'm capable, if I could put 100% (of time and effort).

I'm probably not as professionally involved, which is a sacrifice. I missed a deadline for the ACA proposal. I was working on it, and then I picked up my son, and he was having a really bad day, and there went my evening, and I just completely did not finish it.

Financial sacrifices. Being a single parent, my income is based on my assistance and student loan. And, we get assistance from the state for my son's medical insurance.

Natalie's sacrifices were time-related. She experienced a loss of time to be with friends and a lack of time for herself.

Definitely my social life. Being in graduate school, even when I was...working on my master's, you really have to sacrifice...doing social activities with your friends. Also a lot of just personal sacrifice like not even having very much time to yourself. You just devote yourself, what little extra time you have that you're not devoting towards school or your family goes towards your friends or your job. And so you're really kind of neglect yourself, in a way, and that's a big sacrifice that you have to be willing to take...to have all these little multiple roles.

Rewards

Each participant identified rewards for their sacrifices. Although the rewards differed, each held personal meaning for the participant.

For Emily, internal validation was a reward that held personal meaning for her.

...the biggest reward is internal validation. Just realizing that I'm succeeding. And, I'm succeeding under circumstances that aren't the easiest. I think working full time and being a mom adds to that validation, because I am pulling it off, with that particular qualifier... the achievement, the self-esteem, just seeing what I'm capable of. And then, of course, the future investment in career.

Tonya was at the end of her journey. The rewards were very personal in nature and had depth of meaning for her.

...the rewards are tremendous. Just being finished, number one, is huge. Completely huge; life changing choice... For the past nine years, I've been having this raincloud over my head because if I went on a trip or I wanted to have fun, I would always say, "Oh, I should be writing my dissertation," or I should be doing this or should be doing that. I always should have been doing something else. And that's gone... And being able to be more present and more fully engaged instead of always having these other things in the back of your head.

For Camille, sacrifices were part of the journey and the rewards were related to her love of learning.

I'm doing it personally for my family and I know that I don't see going back to school and doing all of that as...its not really even a means to an end...its just part of the journey. I mean I'm not doing it to, oh I just want to get this degree. I enjoy it. I enjoy learning and I hope that always continues. I always want to learn so...you know, there are sacrifices to go along with it, but it's not even that it's just this burden. It's not a burden. You just take it as it comes.

For Melissa, the rewards were practical benefits such as stability and flexibility in her future profession.

...a couple of personal rewards. For me, getting to work with a population that I love. I've worked with college kids before and getting to work with that population is a reward. Also, once I am a professor, having that stability, especially with tenure. So another reward is being able to get a good job and have a career. And I certainly could have stayed at the master's level and had a good job, but I wanted a little more flexibility...and for me to be a breadwinner and know that we are financially stable.

The rewards that Savannah mentioned included self-understanding and understanding others.

...a big one has been more about myself as a parent, that I'm learning more about myself. My stepson didn't have the benefit of my own personal journey...and I did things with him that, being right from my family of origin, weren't necessarily right for us, for our relationship. I think that my youngest benefited from the fact that I had gone through this journey...

Right when I entered the doctoral program, my sister and I had to put my mother into a nursing home. And she very rapidly declined...by being around people who were in the mental health profession, as well as having the courses to find out about that, I understood more about what she was going through, and it helped me to be able to also understand what I was going through...and to be able to realize what I could and couldn't do for her... And, so it made it okay for me to know that if I went to the nursing home once a week, or of course it got to be about once every two weeks, but that was actually okay, because my mother did not know who I was. And so, I did not have the guilt associated with she was going through and my not being there all the time, that my friends have...And it allowed me to be a support to my sisters; it allowed me to help them understand why they were feeling the way they were feeling, and to normalize to them things that it also benefited them.

Jessica's rewards were flexibility and acceptance of herself. Being a doctoral

student has allowed her to have certain freedoms and experiences.

I'm able to be more flexible, I guess, and some of that is school. School offers me that flexibility. I'm able to not be so stressed out, when I just kind of tell myself you're a full-time student, you're a full-time parent, not everything is going to be perfect. Not everything is going to be up to your expectations or standards, so that's almost a reward in that... I guess I feel like there's not tons of rules for me.

Becoming a new mother has put many things in perspective for Natalie, including the purpose and meaning behind being a doctoral student. Having a baby has seemed to be rewarding and given Natalie motivation and drive in her efforts at school.

...now that I'm a mother...it's like a goal for your child, it's definitely worth it just because it's, that's the most important thing for you now. So, the other things don't seem quite as important, you know, your free time, your time to go hang out with friends, just aren't quite as important any longer. I guess that's nature's way of allowing you to do what you need to do for your children. So, it's very, very rewarding. You see how it effects your family and you see how...you reach your personal goals. And, that's how it's motivating, and you're able to get through it.

Counselor Education Program Support

Faculty and Cohort Support

Emily discussed her support from her counselor education doctoral program in terms of faculty support and cohort support, both of which she described as positive.

I think it's a very high level of support. And, I think it may be unique to our program. Things that we need to do and...the further into the program I get, the more I see what's necessary to have in place in order to be successful when we're finished, you know, the conferences, the writing of articles...the idea of (being) published, which I never considered before I started the program...I always thought well that came after... the fact that we have those opportunities and we don't have to do that on our own is incredible. And the opportunities are there. You have to take advantage of them... you want to give presentations, and when it's time for proposals to go in, you've got 2 or 3 different professors who are saying "would you like to do this with me."... I see that as support.

I kind of compare it (cohort support) to being in a sorority when I was an undergrad...even more so, my dad was a WWII veteran, and I can see now better why the people that he was in the Air Force with were so important to him,

because they experienced the same thing. And, I think it's that shared experience that is...causing our peer group to get closer and closer, and it's cutting across all sorts of demographic lines that probably wouldn't have happened under other circumstances... the fact that we all fall apart at different times, and there's enough of us, so that when one's falling apart, somebody else has it under control.

Tonya spoke of positive faculty support and cohort support that she personally did not have, but may have been available.

If our school did not have the rule about you supervising until you graduate, I would not have finished. There's absolutely no way and I think that was definitely a form of support for me, even when I kicked and screamed at times. It kept me connected and it kept me supported... Dr. ----- was my lead professor and he would email me and an analogy I used when I was doing my dissertation was that I was like this river, this wild river that was going off course. Actually, he was the river. I was this little boat on different courses and he would keep putting me on the course... the support was there and I got what I needed... I had a great committee. I had a lot of support, as much as I wanted.

I wasn't the typical doc student and wasn't able to do all the brown bag (luncheons) and get togethers, which I thought was wonderful, but I wasn't able to do that because I had so many other obligations with family and work and things of that sort. As far as that, support from my peers and friends that I knew, I didn't have it but I also didn't need it.

Camille expressed positive feelings regarding support from both counselor education faculty and cohorts. The faculty support came especially from a female faculty member with young children and the cohort support came from other mothers in the program who have a shared experience similar to her own journey.

...being a part-time student it's a little different for me than it is for students that are totally immersed in the doctoral culture... I'm a little more disconnected probably than your full time students. But as far as support, and going into the program I made it very clear I had to be a part time student at the time and they (faculty) very much supported that and understood...my faculty advisor, it's interesting, she also has young children and I think there is a great deal of support in that area because it's like you have somebody on your side; she knows what you are going through. Being a parent, she's a full faculty member but had children later in life and so she understands life outside of the program...I had heard such horror stories about doctoral programs being "that's what your life is for four years and you can't do anything else," and I did not want that. I love

learning but we all have lives outside of school and she definitely has an appreciation for that.

I think I've probably connected on a level with students that are mothers...you just have that bond from that connection... at least you know that there are other people that are dealing with the same issues. They also are in school and they have families and they know that you can't just pick up and come meet with the group at a whim. There is definitely a different level of understanding with people that have the same experience as you.

Melissa, like Camille, identified with the female faculty member who had young children and viewed her as a source of support.

I feel very supported by the faculty. The director of our program has very young children and we don't even have to bring it up. She brings it up a lot and she's knows what it's like to be working and have young children, with her working towards tenure and things like that. So it helps to have that. Also, (other faculty member) is single and she expresses an interest in us and our experience with children. It's not a family atmosphere, I'm not saying that, but there is definitely an interest in both worlds and understanding that piece. It helps me to know I can go to certain people and they have really been supportive and helpful in helping me make good decisions about all of it...I feel so grateful for that support and I know that that is uncommon. I think that's due in part to being a counselor and in our field.

Savannah felt that she received positive cohort support. However, she did not feel very much support from the faculty; if it existed, she felt it was only on their terms and at their convenience.

I don't know that I felt that much support from the faculty; in fact, if anything I almost felt sometimes like the faculty was almost trying to make it a little bit tougher, than it really needed to be. I've often said that it's almost like the hating thing that you have to go through. I mean some faculty members were very supportive, but when it came to something that was on their agenda, they weren't necessarily that supportive.

But, I always felt the support of the other doctoral students there. And that's a support...I'm going to really wind up missing...it's like whatever you need, you can go them. And you can find somebody who's going to be able to help you or who's just going to be there...and listen to what you say, and listen to what you're feeling.

Jessica reported positive feelings of faculty support, but she did not feel supported

by her doctoral cohorts. Jessica admitted that lack of support may have had more to do with her lack of her failure to seek it because she feels her situation as a single parent is unique.

...I would have to say yes, I do feel supported. I've been able to, you know, feel comfortable about staying home when my son's sick. I've been comfortable in going to the professors and saying, I know this is due today, but... I need a couple of more days. And, for the most part, they've been very supportive. I get a little concerned that that's wearing thin. That it's not freely supportive, that it's somewhat conditional; I worry about that. I've not had any retributions or any blatant disregard to the fact that I'm a single parent. So, for the most part, I've felt supported by faculty.

Support comes in short, short stages, I guess. Like, if I'm having a hard time, or if I'm struggling or whatever, it's okay (for cohorts) to listen for a minute, then I gotta go. Or, they are going to go out and they want me to come, but they don't think about the fact that I've got to put (son) in the bed, and do homework, and so there's not a whole lot of awareness. So support is there, but it...feels holey, like there's blanks... I don't reach out very much either, because I know that my life is so different, and I don't want to be a whiner about it, because it's different, because I make choices. So, if I reached out more, it might be deeper.

Natalie reported positive impressions of faculty support and cohort support, and valued the cohesiveness of her counselor education doctoral program.

...one thing that attracted me to this program is how inviting and comfortable and cohesive the program seemed. I mean I remember during orientation just with the faculty and the few doctoral students, current doctoral students, that were there...I could just tell that they had...a lot of cooperation between faculty and students, and that was very enticing to me, and I have found that to be true. Your peers, the other students, the other doctoral students are wonderful. I mean they are just very helpful. We really try to listen to one another and help each other out in any way that we can. And, I've also found that the faculty is very understanding about knowing that you have a life outside of the program...you have a lot of responsibilities as a doctoral student, and they expect you to be able to handle those. And then, at the same time, they are also just understanding and know that things will come up, and that it's not always going to be perfect. I feel like I am able to talk to them, go to them if an issue arises...

Wellness

All participants saw the interrelationships of the physical, emotional, and spiritual

components of wellness, yet each was aware she had neglected at least one aspect of wellness.

Emily spoke of the wellness relationship and focused on the emotional aspect.

Most definitely (components influence each other)... as far as the whole family, and that situation, that seems to be at risk...that is part of your emotional wellness. So, that's suffering. And part of that is because I'm getting more support and validation from school than I am getting from home. And then it's very revealing.

Tonya talked about the relatedness of the wellness components and how they influenced each other in her life.

...the thing I like to do the least is work out and exercise. So this (doctorate) gave me a really good excuse not to do the thing that I liked the least. And it really affected my emotional wellness because when you wake up in the morning and your clothes don't fit, it's hard to get motivated; it's hard to get started and it really can pull you down.

Camille also talked about the relationship of the physical, emotional, and spiritual components of wellness. She used the metaphor of "ebb and flow."

I think all three are very important. I think I said earlier I can't focus on all three at the same time...I think it's kind of an ebb and flow for me. My emotional wellness, at periods of time, I have to focus mostly on that. Because I know I try to be very conscientious of how I react with my family and how I'm handling the pressures of every day life and if I need to step back and take a moment, then I do and attend to that.

Melissa discussed essential components of wellness (physical, emotional, and spiritual). She stated that neglecting any part influences her as a whole.

The physical piece is the hardest thing for me. It's like I have to make myself do that part but when I don't, I feel terrible...and the spiritual part for me, I try to meditate...every day because if I don't, things get out of whack.

Savannah spoke of some of the wellness components and how important the emotional component is in her life.

They (physical, emotional, and spiritual) definitely have influence upon each other. To me, the strongest is probably the emotional, in that if I'm not in a good space, nothing else happens. And, you know, I would often have to talk myself into a good space and try to do things to talk myself into a good space...I let a lot of my physical wellness go by the wayside. They (components) are all connected, but first and foremost for me the area of emotion.

Jessica talked about the connectedness of the physical, emotional, and spiritual components of wellness. She ranked them on a scale according to how attentive she is to each part.

...they all are connected. For me, the physical wellness is probably the lower on the scale; it's something I don't attend to as well. Emotional and spiritual are probably even with regards to times where I pay more attention. I love being physically active, but I don't have time. And I know people say that, but I look at my schedule, and I really don't have time. It (wellness) kind of flows and one might be stronger at a different time than another one... they kind of ebb and flow...

Lastly, Natalie talked about the wellness components and their interrelatedness.

...your emotional well-being is going to effect you physically and spiritually. I find that spiritual wellness would have to be the one that affects you in whole. It has a really, well in my life, it has a spiritual sound effect for me. I'm Catholic, and if I'm not actively being involved in my religion, it definitely affects my emotion and my, just my whole well-being. I don't feel as complete. I feel like I'm missing something, and it's just very therapeutic for me. I mean to be able to go and to kind of give up some of that stress and worry and pressure, and know that God is there to take some of that from me and help me with that. So that is a big, big part of my well-being... I don't take care of myself as much, I don't even have the motivation anymore, that drive, and...it affects your school life, your personal life. So, I think that they all work together. And, I try to balance taking care of my physical health, and my emotional well-being, and my spiritual well-being, so that I can be productive and...adequate in being a mother, and a student, and playing all these roles. It definitely works together. If you neglect one area, you can tell in your performance...

Overall synthesis analysis (Second Round Interviews)

All participants named their mother as the prominent person who shaped their ideas of motherhood. Education was a major influence for Jessica and Camille in shaping their ideas of womanhood. For Tonya, her spirituality and religious beliefs

continued to be a theme in molding her perspective on womanhood.

For all participants, time emerged as a major sacrifice. For Melissa, Savannah, Tonya, and Camille, there was a loss of time with family or friends. Natalie had no time for self. For Jessica, lack of time was related to her quality of schoolwork. And for Emily, just having the luxury of time was questioned. Financial sacrifice was another sacrifice for Savannah, Jessica, Camille, and Emily. Additionally, Melissa and Jessica sacrificed professional involvement, while Tonya sacrificed church involvement.

The rewards for their sacrifices were expressed in different ways, yet each reward had personal meaning since participants were at different stages in their doctoral journeys and in being a mother.

All participants, with the exception of Savannah, reported positive faculty support. Melissa and Camille (both from the same university) noted a bond with a female faculty member in their department who is also a mother. Savannah reported that she did not feel supported by the faculty and if she was, it seemed conditional. Jessica reported that she did feel supported by the faculty but was concerned that the support may run out.

Natalie, Savannah, and Emily reported positive cohort support. Camille also expressed positive cohort support but more so with other mothers in the program. Jessica and Tonya did not feel supported by peers, but each discussed reasons that may have been related more to their lifestyle than to cohorts. Melissa did not discuss cohort support in her second round interview.

Finally, each participant agreed that the physical, emotional, and spiritual components of wellness influenced each other. For Melissa and Tonya, physical wellness was the hardest part to maintain. In their first round interviews, they both mentioned

weight gain as a wellness concern. Jessica and Camille stated that the three components tend to "ebb and flow" for them. For Savannah and Emily, the emotional component stood out. For Natalie, spiritual (and religious) and emotional were prominent.

Overall Synthesis Display (Second Round Interviews)

Table 5

	Emily	Tony	Melissa	Camille	Savannah	Jessica	Natalie
Mother's modeling	X	X	X	X	X	X	X
Education		X		X		X	
Extend.fam/friends/others' impact	X	X		X		X	X
Time	X	X	X	X	X	X	X
Finances	X			X	X	X	
Involvement		X	X			X	
Personal meaning	X	X	X	X	X	X	X
Faculty support-positive	X	X	X	X		X	X
Faculty support-negative					X		
Cohort support-positive	X			X	X		X
Cohort support-negative		X				X	
Wellness components focus	X	X	X	X	X	X	X

Focus Group/Member Checking

The purpose of the focus group was to allow participants the opportunity to confirm or clarify the findings. Five of the seven participants were able to participate in the focus group. Efforts were made by the researcher to allow the other two participants to participate via telephone, but they were not able to do so due to scheduling conflicts or prior engagements. Of the five group participants, two were physically present with the researcher and three participated via telephone conferencing.

Findings presented to focus group

After analyzing the second round of data, I presented the following findings to the focus group to confirm or clarify. Table 6 displays the handout given to group members.

Table 6 - Finding presented to focus group

Finding 1	All participants named mother as prominent person who shaped perspective on motherhood. For some, relationship with mother directly influenced relationship with own children.
Finding 2	Some participants believed their education and girlfriends had an influence on their womanhood.
Finding 3	Time emerged as major sacrifice. This included loss of time with family and friends, time for self, luxury of time, and time for quality schoolwork. Finances and professional involvement also emerged as sacrifices.
Finding 4	When asked about rewards for sacrifices, each answer was different. However, each contained the theme of personal meaning for the participant.
Finding 5	Most participants reported positive faculty support. Some felt closer to faculty who were also mothers and shared the same experience. Some felt faculty support may have been conditional and on their terms.
Finding 6	Some participants reported positive cohort support. Some reported feeling a bond with cohorts who were also mothers. For some, the support may have been there, but due to their multiple obligations the support may not have been utilized.
Finding 7	All participants agreed that the physical, emotional, and spiritual components of wellness are related and influence each other. As described by participants, one of the three components is "more prominent" or "is struggled with" more often than the others.

Focus group findings

Participants confirmed that their mother was the prominent figure who shaped their views on motherhood. However, Camille and Jessica added that their parenting styles are not quite the same as those of their mothers. Participants clarified that girlfriends and especially education did not necessarily influence but clarified and were important in defining themselves as women. For Emily, who grew up in the 1960s, the wave of feminism and liberal changes was very much a factor in her view of womanhood.

Participants also agreed that time, finances, and professional involvement were sacrifices. It was agreed that time was the overarching sacrifice and influenced the other two sacrifices. Participants also confirmed that the rewards of the sacrifices held personal meaning for each of them.

When discussing faculty support, initially participants confirmed that they felt supported by the counselor education faculty. As the conversation progressed, faculty support took on a new definition. Emily stated that she didn't really bring up her family life unless there was a reason for it. She stated, "I think I feel a little self conscious because I don't want them (faculty) to think that things have to be different for me because of all the responsibilities I'm carrying. I'm probably a little overly cautious. I don't look to them for support as a doc student who is a mother. I look for generic support as a doc student." This statement opened the discussion to other ideas regarding faculty support. Savannah added to Emily's thoughts with the following statement: "I don't know that there was so much faculty support as much as acceptance that this was the case (I was a mother). The part of the finding (5) about it (faculty support) being conditional, I agree with. There were times when I felt things could have been done a little more timely but because it wasn't convenient for them, it really didn't matter that it was inconvenient for me." Camille agreed with Savannah and Jessica added that the faculty may not have been as supportive as they were accommodating.

Participants confirmed that there was positive cohort support. Savannah and Natalie felt supported by cohorts whether the cohorts were mothers or not, while Camille connected mostly with other parents in her program. Jessica added that she felt support but that awareness of her particular situation as a single parent may have been lacking.

Emily added that she received a great deal of acknowledgment and admiration from her cohorts who do not have children.

Participants also agreed that the three components of wellness that emerged in the previous data (physical, emotional, and spiritual) were related and influenced each other. Savannah, Camille, and Jessica stated that the physical aspect was the one with which they struggled, while Natalie highlighted her limited social interactions and time with people other than her immediate family and cohorts in the program.

As a method of ending the group and the research process, one closing question was asked: "If you had the opportunity to sit down and talk to a beginning counselor education doctoral student who is a mother, what advice would you give regarding wellness?" The theme that emerged was to be organized but give themselves permission not to be perfect. Also, participants stated that they should realize that mistakes will happen, that they can't do everything, and that they needed support and resources. Savannah stated that, " You may not be able to give 110% all of the time." Natalie echoed this idea by adding "I'm trying to work on...giving myself permission to not do everything perfectly or not be at...everything, presentations, and conferences. I wish somebody could have told me that."

Interpretations and Conclusions

View of motherhood/womanhood (socialization)

Emily and Savannah spoke of their mothers modeling a non-traditional lifestyle. Since this has been reinforced in childhood, it may make it somewhat easier for them to accept their multiple roles. Melissa's mother also modeled a non-traditional lifestyle, but the effect was opposite for Melissa. She described her mother's dual roles as stressful,

something she did not want for herself. Until a few years ago, Melissa may have thought the two roles were incompatible and one or the other must maintain full attention.

Sacrifices and Rewards

Participants discussed time, finances, and involvement as their sacrifices. They also tied in the personal rewards of their sacrifices as justification. Although they believed the rewards made the sacrifices worthwhile, the ultimate sacrifice was that of personal wellness.

Counselor Education Program Support

While participants discussed both faculty and cohort support, faculty support emerged as more prominent. In the Merriam-Webster online dictionary (n.d.) definition of support, words such as advocate, assist, help, corroborate, maintain, and comfort are used to paraphrase the term. Participants in this research defined faculty support as "conditional", "accepting", and "accommodating." While participants felt that there was some level of support from faculty, there is also a discrepancy in how support is defined and how support is given. In Padula and Miller's study (1999), mothers who were psychology doctoral students reported frustration from a lack of time, not feeling understood, lack of support, and difficulty feeling connected or mentored by faculty members. They also experienced concerns about measuring up and sometimes compared themselves to other (younger) students. As indicated by this study, this population has great need to feel supported, have collegial relationships, and faculty mentorship.

Wellness

Wellness displayed itself in a myriad of ways; therefore, deeper understanding of this topic as it relates to program of study, gender, and social connections emerged. The

assumption regarding counseling students and wellness may be that because of the nature of our field, we may be better equipped at attending to the various dimensions of wellness. The research conducted by Myers, Mobley, and Booth (2003) does indicate that counseling doctoral students reported greater wellness than the general population and in some cases, counseling master's students. The authors did suggest however that the finding of greater wellness be further investigated and linked it to the idea that a counseling doctoral student's wellness may be greater the longer he or she is in the program. Based on this dissertation research, this idea may only hold true up until a certain point. Camille, Melissa, and Natalie's experience (who were all first year doctoral students) may support Myers et al.'s finding as they talked the most about adjusting to their new role. To the contrary, Tonya, who had been a counselor education doctoral student for nine years, had sacrificed much of her wellness by the end of her doctoral study.

Connections, whether social or religious based, were lost by some participants. Tonya's connectedness to her church and Natalie's connection with friends were both described as important connections that had suffered. These very connections have been shown to provide the basis for spiritual well-being. DeVaus and McAllister (1987) stated that women tend to be more religious than men, but once they begin a career (or doctorate in this case), less religious tendencies are reported. The career (or doctorate) becomes an identity that religion may have previously served. Social support has also been linked to wellness. Poor health shows itself more readily in persons who lack social support (Schwarzer & Leppin, 1989). So not only is faculty and cohort support necessary, but also support from family and other important people in our lives. Support

systems are a strong indicator of positive mental health over time (Lightsey, 1996; Ulione, 1996). Emily was missing an important piece of support in her doctoral duties from her immediate family, which may have allowed the onset of her panic attacks to occur.

Dissonance in Multiple Roles

Lastly, the idea of acceptance of self (as a mother and counselor education doctoral student) was threaded throughout the data collection and strongly emerged in the focus group. Participants were cognitively aware of the need to be flexible in their many obligations, but still struggled with the need to maintain balance and the desire to perfect each of those roles. Despite the evolution of feminism and other liberal perspectives, many of the traditional ways of thinking may still be operating, especially when total focus cannot be given to the task of motherhood. The superwoman syndrome is still alive and well as highlighted by Ashton, Gaffney, Christensen, McCollum, and Herlihy (2000). Because women are relationship oriented and want to keep each relationship (or aspect of their lives) optimally functioning, they may overextend themselves in each arena. Thus, they care for everyone around them and simultaneously neglect parts of themselves. The self-nurturance concept emphasized in feminist theory is often forgotten.

In conclusion, the perception of motherhood and career as an either/or choice as described by Richardson (1993) may not be valid for these participants. However, stress, guilt, and dichotomous feelings accompanied their efforts to combine motherhood and their doctoral studies.

CHAPTER FIVE

DISCUSSION

Introduction

This qualitative study provided preliminary information about the experience of wellness of counselor education doctoral students who are mothers. The nature of the study provided a rich examination of the phenomenon. Although this study makes important contributions, the findings should not be generalized to other women in this population without further investigation.

The research question was *What is the experience of wellness for counselor education doctoral students who are mothers?* The intent of this research was to explore wellness in its many dimensions for this particular population at varying stages in their doctoral program. Participants volunteered because they liked the topic, but more importantly, because it held great meaning for them personally. They also wanted to contribute to the limited literature on this topic of study.

There were seven participants, all of whom committed to the two rounds of individual interviews and a focus group discussion. However, two participants were not able to participate in the final focus group. The focus group was used to verify findings of the data analysis and give participants a final opportunity to share their experiences.

This chapter reiterates the findings in this study and discusses limitations of the study, implications for counselor education, implications for other women in this

population, and suggestions for further research. This chapter concludes with a personal reflection.

Summary of Findings

The interviews and focus group revealed five main categories that illuminated participants' experiences: (a) view of motherhood/womanhood (socialization), (b) sacrifices and rewards, (c) counselor education program support, (d) wellness, and (e) dissonance in multiple roles. The emerging themes across those categories included: mother's modeling, education, extended family and others' impact; sacrifices of time, finances, and involvement; personal meaning; support from faculty and cohorts; and wellness.

Participants' views of themselves as mothers and women

Participants' views of themselves as mothers and women were primarily modeled by other women. Although participants noted different parenting styles from their mothers, all participants listed their mother as the prominent model of motherhood. Girlfriends and education were important in clarifying their role as a woman.

For those participants who grew up with a non-traditional mother with multiple roles, it may have eased some of the guilt associated with balancing many roles. For one participant, her mother's multiple roles seemed to be stressful and until a few years ago, she did not want to have to perform the same juggling act.

Sacrifices and Rewards

In the Padula and Miller study (1999), participants discussed both sacrifices and rewards of being a mother, wife, and psychology doctoral student. Some of the sacrifices included disappointment in relationships with faculty, high stress levels, exhaustion, and

strained family relationships. The rewards included learning, career advancement, relationships with other students, and increased positive self-perception. Similarly, participants in this dissertation research discussed both sacrifices and rewards. Sacrifices entailed time, finances, and involvement. Time was sacrificed in terms of family, friends, and time for self. Financial sacrifices emerged as well. Involvement surfaced related to church, friends, and professional activities. Participants also talked about personal rewards of those sacrifices including internal validation, depth of personal meaning, learning, stability and flexibility, self-understanding, acceptance of self, and motivation. However, while these rewards made the experience worthwhile, the ultimate sacrifice was that of personal wellness.

Counselor Education Program Support

Participants discussed both faculty and cohort support. Generally, cohort support was reported to be positive except for two participants whose experiences were unique in nature. Participants reported faculty support as relatively positive; however, participants used terms such as "conditional" and "accommodating" to describe faculty support. This discrepancy between "support" and the participants' words may indicate a need for further dialogue between faculty and this particular group of students. In the study by Padula and Miller (1999), themes that arose for participants who were mothers were lack of time, not feeling understood, and lack of flexibility in schedules to deviate in case a change was needed (e.g. a sick child). Developing a clearer definition of support (for this group of students) among faculty members may be appropriate in determining the most suitable assistance for this population.

Wellness

Components of holistic wellness were perceived to be sacrificed by each participant. Physical wellness in the form of eating habits and exercise had been neglected, with a number of participants reporting significant weight gain. Additionally, some social connections with friends and spiritual/religious involvement had been neglected. Because women tend to be more relationship oriented and social support has been linked to wellness (Schwarzer & Leppin, 1989), loss of these connections may have impacted overall wellness. Decreased emotional wellness for the research participants displayed itself in many ways including panic attacks, loss of self-connection, eating at emotional times, and utilizing counseling services as a resource. When possible, participants attempted to attend to parts of their personal wellness but often encountered time constraints and other obligations.

Dissonance in Multiple Roles

Participants were cognitively aware of the need to be flexible in their many obligations, but still struggled with the need to maintain balance and the desire to perfect each of those roles. Studies from the past decade indicate that women still do approximately 80% of the household duties and childcare (Barrett & Rivers, 1996; Moen & Yu, 1997). With so much energy devoted to family and education, that leaves very little energy to devote to self. Some of the traditional superwoman characteristics emerged in this study and may be associated with some of the guilt and dichotomous feelings participants discussed. As illustrated in Raddon's study (2002), the participant who was a mother and university professor discussed some of her guilty feelings:

At work I am completely different to how I am at home. When I'm at work I don't feel like a mother at all, and sometimes I feel guilty. I think, *God, I've hardly thought about Daisy all day* because I know that somebody else is doing that, in a way. But the minute I get to the nursery, it's changed. Then as soon as Daisy's gone to bed, I'm different; I'm still the mother but I'm different. I'm more myself again (p. 392).

Participants in this dissertation research were able to verbalize positive ways to alleviate some of the stress associated with their multiple roles and are detailed in the section on Implications for Mothers.

Findings as they relate to Wellness

As detailed in chapter four, many of the research findings can be linked to and are related to wellness. Participants in this study were able to clearly verbalize their sacrifices, but the ultimate sacrifice seemed to be their personal wellness. Adequate time, finances, and involvement (with family and in recreational activities) all function as a part of each participant's personal wellness, and when those aspects are sacrificed, so is holistic wellness.

Because support systems have been linked to positive mental health (Lightsey, 1996; Ulione, 1996), faculty and collegial support might influence aspects of these participants' overall wellness. Furthermore, participants still exert great effort to accept their imperfections within each role. The superwoman syndrome (Cooper, 1984) appears to still exist and might make participants overextend themselves to the detriment of their physical and emotional wellness. As evidenced by Emily, lack of support from her family might have influenced her emotional wellness, which in turn, may have been

linked to the onset of her panic attacks. The wheel of wellness is cyclical and it continues to turn.

Limitations

As with any research study, this investigation had limitations. Participants were selected on a volunteer basis, so it is assumed that there was an inherent interest in participating in research which pertained to them. Participants were all from the southeastern region of the country, which may influence their level of traditionalism in their roles. My perception of southern traditionalism is that southern women's upbringing may be more conservative than it is liberal. Had other participants from other regions of the country been included, the findings may have been somewhat different possibly offering more nonconventional views and experiences. Participants were from three large universities, two of which were predominantly White. All research participants in this study were of the same racial background, White. A racially diverse mixture of participants may have yielded different findings. Women attending more diverse universities may have offered differing experiences. Also, women attending universities with distinctive characteristics, such as an all female university or an HBCU (historically Black college or university), may have also offered other perspectives.

Other limitations could not be addressed within the scope of this research study. These included participants' race and gender. These limitations create an opportunity for further research to replicate this study using fathers instead of mothers, a more racially diverse group of mothers, and a group of relatively new mothers. Additionally, other research methods such as survey or questionnaires might be utilized.

Researcher subjectivity is always an issue in qualitative research. This issue was addressed through peer debriefing, researcher journaling, participant journaling or essays, semi-structured interviews, check-ins with chair and methodologist, reporting data in the participant's words, and allowing dissertation chair and peer debriefer to review transcripts once pseudonyms had been established.

Despite these limitations, findings were consistent with the literature (Padula & Miller, 1999) that this population needs faculty support and mentorship and that participants still struggle with trying to perfect their multiple roles, especially as mothers. Prior to this study, wellness had not been studied specifically with mothers in a counselor education doctoral program. This study also included participants of varying ages, marital statuses, and stages of their doctoral study. This preliminary study provided a limited but in-depth view of multi-layered phenomena as they relate to mothers and wellness.

Implications for Counselor Education

As mentioned earlier, faculty support emerged an important finding related to counselor education. The discrepancy between the term "support" and the ways support was defined by participants merits further reflection on mentorship by faculty. Participants defined faculty support in terms of "conditional" and "accommodating." If support systems are a crucial and positive indicator of positive mental health (Lightsey, 1996; Ulione, 1996), faculty support is critical for these women. Collaborative discussions between faculty and these students might help to determine and understand these students' needs and concerns. For example, it should not be assumed that these students will always be able to take on research assignments or present at conferences.

Therefore, faculty could establish a dialogue to discuss research or presentations opportunities that are less intense and require less of a time commitment, which would encourage these students who want to be involved to do so. Additionally, allowing flexibility in some deadlines, if needed and requested, may be particularly important for this population. As Melissa and Camille discussed, understanding from the faculty member with whom they identify can make the doctoral program a nurturing environment. Similar to tenets emphasized in feminist theory, understanding and valuing these students' unique experiences may do much to foster mentorship and advocacy.

Because this study is specific to counselor education, it is important to note the connections between the topic of wellness and the field of counseling. One element that differentiates counseling from other mental health professions is that counselors operate from the wellness model rather than the medical model. Additionally, "the underlying philosophy of counselor preparation rests on a foundation of wellness for professionals and professionals-in-training" (Myers, Mobley, & Booth, 2003, p. 273). Results of this study raise a concern as to whether wellness is being actually emphasized as needed and recommended by research studies and the counseling profession. Strategies for increasing wellness might include offering a wellness counseling course, which not only educates but also implements certain wellness strategies. The wellness model could also be threaded in each counseling course so it could benefit all counseling students. If it is continually emphasized, students may be more apt to fully accept and practice its tenets. Additionally, offering support groups for mothers in counselor education doctoral programs may build a sense of camaraderie and universality for this population. Furthermore, flexibility in the availability of classes may accommodate not only the

women in this investigation but other students who have competing responsibilities.

Daytime courses may offer mothers or students with families the opportunity to be with their family in the evening hours. Students who may have normally been thinking of their family while in evening classes might be better able to maintain focus in daytime classes.

Implications for Mothers

An important finding that emerged was acceptance of self and multiple roles. Even though participants were cognitively aware of the need to be flexible, participants still struggled with balancing their many obligations and wanting to perfect each of those roles. Despite more egalitarian viewpoints of childrearing, women still provide most of the "actual" involvement with their children (Milkie, Bianchi, Mattingly, & Robinson, 2002). Research has indicated that women still do 80% of the household duties and childcare (Barnett & Rivers, 1996; Moen & Yu, 1997). Therefore, it would be extremely difficult to accomplish multiple roles with perfection. Participants offered useful advice and suggestions related to this occurrence. Incorporating some of the participants' words, the following are recommended to mothers who juggle multiple roles:

1. Give yourself permission not to be perfect;
2. Realize that mistakes will happen;
3. Realize that you can't do everything;
4. Seek support and resources because they are needed.

Suggestions for Further Research

Because all participants in this study were of the same racial background and gender, there remain many opportunities for further research into these variables using

participants from different universities, regions of the country, and demographic backgrounds.

Additionally, an exploration of wellness in faculty and for students throughout the doctoral journey may merit further research. Qualitative research studies could be pursued with these questions:

1. What is the experience of wellness for fathers in a counselor education doctoral program?
2. What is the experience of wellness for mothers in a counselor education doctoral program from start to finish?

The experiences of fathers may be worth exploring because, as the literature states, the roles that men and woman play in childrearing are both important, but different. It may also be beneficial to conduct a longitudinal study on mothers and wellness to discover changes, adjustments, and fluctuations in wellness over time. Additionally, a qualitative study which focuses on the wellness of first year, counselor education doctoral students who are mothers may again illuminate some of the adjustments not only in the student but also in family systems. Marital strain and systemic change might be more prominent factors in such a study.

Quantitative research studies could be pursued with the following question:

1. What is the relationship between ethnicity and wellness for mothers?

Such a study might provide information regarding how mothers of different ethnic groups address wellness, if at all. Variables such as culture, family-of-origin, and upbringing may influence this particular research.

2. What is the correlation between wellness and length of time in a counselor education doctoral program?

This study would be similar to one of the qualitative investigations suggested earlier except it would utilize a measurable instrument to quantify the variables of wellness and length of time.

3. What is the relationship between the physical, emotional, and spiritual components of wellness?

This investigation might also utilize a measurable instrument to quantify these three variables.

Personal Reflections

No task this great is undertaken without personal learning points. As was true for the research participants, I too learned the lesson of flexibility. Mishaps and setbacks occurred that initially caught me off guard and frustrated me sometimes to the point of tears. I eventually learned to stop fighting the current and ride the wave.

I learned that there were people who were interested in this research and as Emily stated, "it was therapeutic." It seemed to me that participants were finally given a voice and they grasped the opportunity. In the focus group, there was laughter and agreement among participants. I think this built a camaraderie and universality that their experience was understood and they were not alone in their quest.

Finally, I gained a certain type of confidence in myself and my ability. Academically, I know that I will continue to strive to make professional contributions but I may never again produce something of this magnitude and significance. But it's affirming to know that, if called upon, I have the perseverance and ability to do so.

Self-discovery is one of the most valuable experiences a person can have.

Throughout this process, I learned a great deal about myself as a person and as a mother.

I close with this poem about a mother's love:

Mother's Love

Her love is like an island
In life's ocean, vast and wide
A peaceful, quiet shelter
From the wind, the rain, the tide.
'Tis bound on the north by Hope,
By Patience on the West,
By tender Counsel on the South
And on the East by Rest.
Above it like a beacon light
Shine Faith, and Truth, and Prayer;
And thro' the changing scenes of life
I find a haven there.

- Author Unknown

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Appendix A
Human Subjects Protocol Approval Form

*University Committee for the Protection
of Human Subjects in Research
University of New Orleans*

Form Number: 08FEB05

(please refer to this number in all future correspondence concerning this protocol)

Principal Investigator: Barbara Herlihy
Latoya A. Pierce

Title: Faculty Supervisor
Doctoral Candidate

Department: ELCF

College: Education

Project Title: Experience of Wellness for First-Year, Counselor Education Doctoral Students who are Mothers

Dates of Proposed Project Period From 02/21/05 to 08/15/05

Approval Status:

☐ Full Board Review

☒ Expedite

☐ Exempt

☐ Project requires review more than annually. Review every _____ months.

☒ Approved Date: 3-21-05

☐ Deferred Date:

☐ Disapproved Date:

**approval is for 1 year from approval date only and may be renewed yearly.*

1st continuation Signature of IRB Chair

Date:

2nd continuation Signature of IRB Chair

Date:

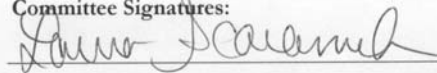
3rd continuation Signature of IRB Chair

Date:

4th continuation Signature of IRB Chair

Date:

Committee Signatures:



Laura Scaramella, Ph.D. (Chair)

Pamela Jenkins, Ph.D.

Anthony Kontos, Ph.D. (Associate chair)

Richard B. Speaker, Ph.D.

Gary Talarchek, Ph.D.

Kari Walsh

Kathleen Whalen, LSW

L. Allen Witt, Ph.D.

Appendix B
Consent Forms



CONSENT FORM

Experience of Wellness for Counselor Education Doctoral Students who are Mothers

Latoya A. Pierce, Project Director

Dr. Barbara Herlihy, Faculty Advisor

348-O Education Bldg., University of New Orleans

New Orleans, LA 70148

(504) 280-3990

The purpose of this dissertation research is to provide an opportunity for counselor education doctoral students who are mothers to discuss their experiences of wellness throughout their doctoral journey. Through purposeful discussion, ideas or themes may arise that can be used by faculty, student retention services, etc. to better accommodate or understand this group of women.

Each participant will be asked to participate in one face-to-face interview, a follow-up interview (by email or phone) and one focus group. The initial individual interview will last approximately 90 minutes and the focus group will convene for approximately 60 minutes. The face-to-face interview will explore the topics of motherhood, counselor education doctoral study, and wellness. The follow-up interview will serve to verify interview data with the participant. A wrap-up and debriefing will be provided following each interview and the focus group. This letter concerns your participation in the face-to-face and follow-up telephone interviews.

As with any research study, there is a chance for potential risks of discomfort. Participants may feel discomfort in discussing their personal experiences; however, these experiences are typically short lived. If you wish to discuss these or any other discomforts you may experience, you may call the Project Director at the number listed above.

The potential benefits to you (the participant) are as follows: an opportunity to voice your opinions/concerns as it relates to the topic, a chance to meet other women who may share common concerns or ideas, and the opportunity to come up with ideas that may enhance others' experience of wellness who are of the same population and contribute to the literature.

Your participation is entirely voluntary and you may withdraw consent and terminate participation at any time without consequence.

Audiotapes and all other information including notes and transcripts will be stored in a secure location (locked file in faculty supervisor's office) for seven years, at which, all research data will then be destroyed.

Participants will be assigned a pseudonym (which only that participant and I will know) in order to protect identity/confidentiality in the reports and throughout the research process. Participants' identities will never be revealed in any of the reports.

Participants may contact Dr. Anthony Kontos at (504) 280-6420 at the University of New Orleans for answers to questions about this research, your rights as a human subject/participant, and your concerns regarding a research-related injury.

I have been fully informed of the above-described procedure with its possible benefits and risks and I have given permission of participation in this study.

_____ Signature of Participant	_____ Name of Participant (Print)	_____ Date
_____ Signature of Person Obtaining Consent	_____ Name of Person Obtaining Consent (Print)	_____ Date



DEPARTMENT OF EDUCATIONAL LEADERSHIP,
COUNSELING AND FOUNDATIONS

CONSENT FORM FOR FOCUS GROUP

Experience of Wellness for Counselor Education Doctoral Students who are Mothers

Latoya A. Pierce, Project Director

Dr. Barbara Herlihy, Faculty Advisor

348-O Education Bldg., University of New Orleans

New Orleans, LA 70148

(504) 280-3990

The purpose of this research is to provide an opportunity for counselor education doctoral students who are mothers to discuss their experiences of wellness in their doctoral program. Through purposeful discussion, ideas or themes may arise that can be used by faculty, student retention services, etc. to better accommodate or understand this group of women.

Each participant will be asked to participate in one focus group. The focus group will convene for approximately 60 minutes. A wrap-up and debriefing will be provided following the focus group.

As with any research study, there is a chance for potential risks of discomfort. Participants may feel discomfort in discussing their personal experiences; however, these experiences are typically short lived. If you wish to discuss these or any other discomforts you may experience, you may call the Project Director at the number listed above.

The potential benefits to you (the participant) are as follows: an opportunity to voice your opinions/concerns as it relates to the topic, a chance to meet other women who may share common concerns or ideas, and the opportunity to come up with ideas that may enhance others' experience of wellness who are of the same population and contribute to the literature.

Your participation is entirely voluntary and you may withdraw consent and terminate participation at any time without consequence.

Audiotapes and all other information including notes and transcripts will be stored in a secure location (locked file in faculty supervisor's office) for seven years, at which, all research data will then be destroyed.

Participants will be assigned a pseudonym in order to protect identity/confidentiality in the reports and throughout the research process.

Participants may contact Dr. Anthony Kontos at (504) 280-6420 at the University of New Orleans for answers to questions about this research, your rights as a human subject/participant, and your concerns regarding a research-related injury.

While I will not use your name in any of my research, I cannot ensure your anonymity or confidentiality. Other people are participating in the focus group and while I will not reveal your identity, others in the focus group may.

I have been fully informed of the above-described procedure with its possible benefits and risks and I have given permission of participation in this study.

Signature of Participant

Name of Participant (Print)

Date

Signature of Person Obtaining
Consent

Name of Person Obtaining
Consent (Print)

Date

Appendix C

Letter to Department Chairs

February 3, 2005

Dr. xxxxx
Department Chair
University of xxxxxx
(address)

Dear Dr. xxxxx,

I am a doctoral candidate in the counselor education program at the University of New Orleans and I am embarking upon my proposed dissertation research study. My topic is *The Experience of Wellness for Mothers in a Counselor Education Doctoral Program*. I'm interested in conducting phenomenological research which explores the unique experiences of women in this population. My hope is that this research will contribute to the literature on mothers and wellness, provide a deeper understanding of the population, and also provide implications for this population, counselor education programs, and future researchers.

The criteria for selection is as follows: a) be enrolled in a counselor education doctoral program, and b) be a mother with at least one child living at home under the age of 18. Enclosed is an introduction letter to potential participants which provides more detail about the study. I'm asking that you distribute this letter to interested students who fit the above-mentioned criteria. Instructions are included in the participant letter on how to contact me for further information and/or to sign up for participation.

Thank you for your time and cooperation in assisting me with this research study. Please feel free to contact me for further information at (504) 280-3990 or via email at llanders@uno.edu.

Sincerely,

Latoya A. Pierce
Doctoral Candidate
University of New Orleans
Dr. Barbara Herlihy, Faculty Advisor

Appendix D

Letter to Potential Research Participants

February 3, 2005

Dear Potential Research Participant,

I am a doctoral candidate in the Counselor Education program at the University of New Orleans. I am requesting your assistance in helping me conduct my dissertation research. My research pertains to the experience of wellness for mothers in a counselor education doctoral program. Although there have been numerous articles on the topic of wellness, researchers have yet to focus specifically on mothers and wellness. Additionally, there is limited research on doctoral students and wellness. My proposed dissertation study seeks to combine the two topics in hopes of gaining insight into your experience and utilizing the findings to provide a better understanding of that experience and stimulate more research in the areas of mothers and wellness.

Participants for my research will voluntarily participate in one initial interview, one follow up interview, and one concluding focus group. The initial interview will be face to face and last approximately 90 minutes. The follow up interview will be conducted via email or telephone. The concluding focus group will provide an opportunity for all participants to share their stories with each other and for the researcher to present findings of this investigation to ensure their accuracy. Your participation in this research is entirely voluntary.

I believe that your experience will make a contribution to the literature. I hope that you will choose to take part in this study. I look forward to hearing from you within the next week should you decide to participate. At that time, we can schedule a convenient time for our initial interview. Please respond to llanders@uno.edu if you are interested in participating or have further questions regarding the study. Thank you very much for your time and consideration.

Respectfully,

Latoya A. Pierce
Doctoral Candidate
University of New Orleans
Dr. Barbara Herlihy, Faculty Advisor
Home: (504) 280-3990
E-mail: llanders@uno.edu

Appendix E
Interview Guide

**The Experience of Wellness for Counselor Education
Doctoral Students who are Mothers**

INTERVIEW GUIDE

1. Based on your experiences, how would you describe your role as a mother?
2. How would you describe a typical day (or week) for you as a mother?
3. Based on your experiences, how would you describe your role as a doctoral student in counselor education?
4. How would you describe a typical day (or week) for you as a doctoral student in counselor education?
5. Think about both roles (both as a mother and a doctoral student in counselor education). If you could use one feeling to describe your journey thus far, what would it be?
6. How would you define wellness?
7. Has any aspect of your personal wellness changed or been affected in the since becoming a doctoral student? If so, how?
8. What might be some ways to change, maintain, or improve your personal wellness?

VITA

Latoya Anderson Pierce was born on October 17, 1977 in Baton Rouge, Louisiana. She earned a Bachelor of Arts degree in Psychology from Loyola University New Orleans in 1999 and a Master's of Science degree in Counseling, also from Loyola University New Orleans, in 2002. She is Nationally Certified Counselor (NCC) Board Eligible.

Latoya has had counseling internship experiences in a number of settings with diverse client populations. Undergraduate experience included working with the Infant Team at the Jefferson Parish Human Services Authority. Graduate level experience entailed working in a juvenile diversion services setting and an elementary school setting. Latoya also worked briefly as an Assistant Director of Programs at an agency providing services to individuals with developmental disabilities.

During her doctoral study, Latoya worked as a graduate assistant at the University of New Orleans. She also held positions as adjunct professor at both the University of New Orleans and Loyola University New Orleans.

Latoya's professional affiliations include the American Counseling Association, Louisiana Counseling Association, Southern Association for Counselor Education and Supervision, and Louisiana Association for Counselor Education and Supervision. She is a member of Chi Sigma Iota, Alpha Sigma Nu, and Kappa Delta Pi. Latoya has presented at conferences at the national, regional, and state level.