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Nursing researchers forge careers in a highly competitive environment

Lorna Moxham
University of Wollongong, lmoxham@uow.edu.au

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Abstract

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Correspondence

lorna moxham@uow.edu.au

Lorna Moxham, PhD, is Professor of Mental Health Nursing at the School of Nursing, Faculty of Science, Medicine and Health, University of Wollongong, NSW, Australia

Lorna Moxham says nurse academics need to bring all their clinical experience and a range of Interpersonal and management skills to build and nurture a successful career in research

Nurse leaders internationally lobbied relentlessly for many years to get nurse training transferred from the hospital-based apprenticeship model to nurse education in the higher education sector. The timing of this has varied across the globe. In many countries, it is only in recent decades that the full transfer from hospital-based training to tertiary education has been achieved. Such a massive change from the 'old ways' was meant to place nursing on the same footing as other professional disciplines that had long been situated in the university sector.

Not only did the change in the way that nurses were educated affect the students who were learning, it also affected the teachers; those who were doing the educating. If nursing students were going to be educated to the highest possible academic and professional standards, then those who were charged with the responsibility to teach them in an academic environment would also be required to not only be clinically competent, but also academically credible. All of the institutional 'rules' and expectations that applied to other disciplines now apply to nurse academics. These 'rules and expectations' – which are often hidden – are still proving to be a challenge.

Most nurse academics come from clinical backgrounds and have spent many years as a clinician before they tread the path of academia. Having such extensive clinical experience brings many positives; a clear understanding of applied nursing practice from which they can draw examples to share with students in the classroom, excellent psychomotor skills, an ability to manage a patient workload which often incorporates multiple roles and acute and complex care delivery, and good time management skills. In addition to these attributes, nurses must possess good written and verbal skills and the ability to work constructively in a team environment.

Academic expectations differ markedly according to the researcher's level within academe. In Australia, from where the theme papers in this issue emanate, academic levels range from Tutor (Level A) through to Professor (Level E). Each level often requires the nurse academic to possess the aforementioned clinical skills but also to:

- Be able to write and secure highly competitive research grants.
- Design, implement and evaluate complex research projects (often across multiple sites with a range of investigators and big budgets to manage).
- Frequently disseminate the work they do by authoring chapters, textbooks, reports and journal articles, with the old adage 'publish or perish' being alive and well.

Further, nurse academics are expected to teach from a pedagogically sound and evidence-driven base (some classes have over 500 students and marking can require a tight 10-day turnaround), contribute to university governance (teaching and learning committees, assessment committees and faculty research committees), and engage in professional and community service (contribute to the profession, sit on hospital boards and committees and review curriculum accreditation documents).

Measuring performance

In the paper, Essentials of building a career in nursing research, Cleary et al (2016a) open with how to set out to build a career in nursing research and scholarship. They highlight the importance of collaborating with others to learn the skills of research needed to build a track record, as well as exploring the concepts around measuring performance. This discussion is an important issue for nurse academics as a way to facilitate informed career development and planning of professional development activities.

A consideration for many aspiring nurse academics is the need to complete doctoral education to attain employment (Jackson et al 2011). With nurses often coming into academia later in their careers than individuals from other disciplines, they face a range of challenges such as managing family commitments and part-time study. In her reflection on her first year of doctoral candidature, Green (2016) provides an honest insight into her experiences. She highlights the importance of support networks, in the form of the research supervision and peers, to successful candidature. Green's paper has some important messages for research supervisors regarding the need to reflect on the students' experiences and consider how factors such as imposter syndrome and identity shifting can impact on their progress.

Unlike clinical environments, universities are set up to be competitive. They have to be. Funding is often dependent on being ranked according to outputs (often research-publication based), student satisfaction (learning, teaching and the student experience) and how much competitive grant income they have procured. Departments or schools across the university at an internal level, and externally across national and global jurisdictions, watch each other. They are comparing who is doing what, who is producing the most, who has the biggest impact and who has brought in the most money. All very well, but there is little effective comparison between like and like. University departments are a heterogeneous mix of disciplines. Despite this, everything is compared against the same metrics. Teaching loads (nursing schools are often one of the biggest in the institution), being clinically competent and coming into academe 'later' in your career (because of working as a clinician) is often not given much credit. When nurse academics do point out the differences, it falls on deaf ears or nurse academics are seen as whining.

Compete to publish

To achieve as an academic, and meet performance indicators documented in yearly performance appraisals, nurse

academics must compete. They compete to publish, to complete Research Higher Degree (PhD, MPhil) students, for

grants, and for limited promotion opportunities. A major challenge in the recruitment and retention of nurse

 $academics \ is \ that \ salaries \ in \ universities \ are \ often \ lower, \ and \ sometimes \ significantly \ lower, \ than \ those \ in \ the \ clinical$

setting (Kaufman 2007). So, not only are nurse academics now in a highly competitive environment (and promotion

to a higher level is dependent on this), they earn less money.

In this uncompromising environment, which is considered the norm, it is no wonder 'collegiate presence' (Broadbent

and Moxham 2013) is sometimes difficult to see and that envy can abound. Cleary et al (2016b) describe the

potential impact of the 'green- eyed monster' in their paper. While the nature of competition in the academic workplace

can serve to enhance outcomes by pushing people to work harder and produce more research outputs, it can also have

negative consequences, leading to psychological harm and reduced workplace satisfaction. Cleary et al (2016b)

challenge readers to reflect and consider how their own environment motivates or has an effect on staff wellbeing and

performance.

It is important to monitor the workplace morale. And despite the pressures, the competition and the comparisons,

in my experience, most nursing departments are great places to work. With relationships with colleagues being the

main factor influencing retention of academic staff (Ulrich et al 2009) it is beholden on organisations, administrators

and faculty members to work together to create healthy workplace environments. If the necessary team skills that

nurses possess in the clinical environment are brought to research, everyone will win the 'race'. After all, it is unlikely

the competitive environment is going to go away anytime soon.

Conflict of interest

None declared

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