

MOTHERS IN ACADEMIA AND THEIR UNIQUE NEEDS:
NAVIGATING MULTIPLE ROLES WHILE
MAINTAINING PERSONAL
WELLBEING

A DISSERTATION
SUBMITTED IN PARTIAL FULFILLMENT OF THE REQUIRMENTS
FOR THE DEGREE OF DOCTOR OF SCHOOL PSYCHOLOGY
IN THE GRADUATE SCHOOL OF THE
TEXAS WOMAN'S UNIVERSITY

DEPARTMENT OF PSYCHOLOGY AND PHILOSOPHY
COLLEGE OF ARTS AND SCIENCES

BY

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DENTON, TEXAS

DECEMBER 2021

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DEDICATION

First and foremost, this manuscript is dedicated to every woman who has ever been told she is not enough. The thought of having both a career and a family may seem preposterous to some, but that is the role model I had in my life through my own mother and the role model I hope to be to my own children. My mother worked endlessly to achieve her career goals while raising my brother and me. We always felt loved and secure in her presence, even after she had worked a 60-plus-hour week. My mother, Ms. Joanita Skinner, is why I am the woman I am today, and achieving my PhD would not have been possible without her.

ACKNOWLEDGMENTS

I would like to acknowledge the people who have guided me along the way; this includes all my professors throughout this journey and my support system of friends and colleagues. Especially Ashley Phillips and Alexandra “Allie” Bobb Woodson: The late nights, the panicked phone calls, and the millions of laughs will forever be in my soul. To the people who have kept me sane, my workout partners turned best friends, Sharifa Wahlstrom and Ashley Palmer: Thank you will never be enough. To my partner whom I love dearly, Saul, thank you for your constant support, encouragement, and love. Finally, and most importantly, my three beautiful humans that I have been gifted. Shelby, Chloe, and Abiola, you are the reasons I wake every day and the reasons I smile. My world is complete with the three of you, and mama loves you dearly.

ABSTRACT

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MOTHERS IN ACADEMIA AND THEIR UNIQUE NEEDS:

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DECEMBER 2021

The challenges faced by women in academia who also identify as mothers are robust in their presentation and overall outcomes. The challenges include the limited ability for these women to integrate their emotional, intellectual, and physical selves within their professional and personal lives. In addition to navigating multiple roles, these academics face gender bias, unequal pay, and a lack of transparency surrounding university policies. Trainers in psychology are responsible for developing psychologists in the areas of assessment, behavior, and counseling through techniques that promote a biopsychosocial model. Women who are mothers and trainers of psychology offer a unique perspective to this pedagogy as they are distinctive from their male counterparts. This investigation of women who are mothers and trainers of psychology and their perceptions of their levels of depression, anxiety, and stress was warranted to assist in determining the type of interaction, either positive or negative, on their overall wellbeing. The study's results provided the lived experience these women described to better explain how this group of women view their wellbeing and its impact on navigating these

multiple roles. In addition to these women's perceptions of their overall wellbeing, this research adds to the current literature on the shortage of female psychology trainers at the university level.

Keywords: wellbeing, motherhood, women, academia, school psychology, clinical psychology, depression, anxiety, stress

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CHAPTER I

INTRODUCTION

Roles of the Female

Women often take on multiple roles throughout their lives, such as being a caregiver to aging parents, partner to a spouse, and mother to young children while also being an employee. Helgeson (2012) defined a role as “a position in society governed by a set of norms, which are expectations for behavior” (p. 441). These roles could stand alone or in combination. Within these roles, women maintain a wide range of personal identities, relating to themselves and others in various ways. Through each relationship and intersectionality of duties, women learn who they are. However, when these roles and responsibilities combine in everyday life, they can be sources of external and internal conflict affecting the woman’s overall wellbeing.

The predominant scientific approach to defining wellbeing focuses on three major constructs: high life satisfaction, frequent positive emotions, and infrequent negative emotions (Diener, 1999). Women’s experiences of their multiple roles are intimately connected with their identities as well as their personal and professional ways of living and being in the world. Accordingly, a woman’s multiple role experiences are connected to her sense of personal wellbeing. The objective of this study was to discover, through shared exploration and dialogue, the ways in which women in academia who identify as mothers experience their multiple personal and professional roles and how they perceive that these experiences impact their overall wellbeing.

Societal Expectations

Society presents expectations of women who choose to return to work after having children (De Vise, 2010). These expectations include the ideals of being the perfect mother and the perfect employee, which can lead to burnout in one or both roles. Motherhood, in combination with a career, can lead to extensive stress (Moustafa et al., 2020). With societal views of women's roles constantly changing, women may find the decision to be a working mother influenced by numerous variables, including overarching financial responsibilities, planning for the future, and the desire to contribute to society with a certain amount of productivity (De Vise, 2010).

In the field of academia, the career timeline impacts a woman's decision to become a mother. For example, attainment of a position in academia occurs after years of education, which often aligns with the timeframe in which women begin having children and raising families (De Vise, 2010). Mirick and Wladkowski (2018) referred to this early career period as the "breaking it or making it" (p. 103) timeframe. Due to societal beliefs of perfection, working women lacking in one area may overcompensate in the other (Nelson-Coffey et al., 2019).

The overwhelming feelings of not meeting societal expectations become a burden to mothers who also work (Nelson-Coffey et al., 2019). The weight of not being good enough contributes to harboring negative emotions that could influence the working mother's wellbeing (Moustafa et al., 2020). With the current gap in literature, there is a need to investigate how these emotions and barriers affect working mothers in academia.

Emotions and Wellbeing

Emotion is a word often associated with feelings. However, for the purposes of this study, emotion is an aspect of consciousness characterized by three elements: a certain physical arousal, a behavior that reveals the feeling to the outside world, and an inner awareness of the feeling. As discussed, the predominant scientific approach to defining wellbeing focuses on the constructs of high life satisfaction, frequent positive emotions, and infrequent negative emotions (Diener, 1999). Psychological need satisfaction is likely a key ingredient to living a happy life in general (Deci & Ryan, 2012). The current study presented psychological needs satisfaction as feelings of autonomy, competence, and connectedness (Craske et al., 2011). The predictors of overall maternal wellbeing are directly related to sense of efficacy as a parent, positive relationships formed with their children, and autonomy during motherhood (Colvin, 2013). All three of these factors can be influenced by the rigor and demands of being a working mother. Additionally, each factor has a direct impact on psychological constructs such as emotions (Craske et al., 2011). Nelson-Coffey et al. (2019) found that fluctuations in day-to-day happenings predicted variability in the wellbeing of mothers; these included the stressors of being a parent, job satisfaction, and the presence of a support system.

With maternal wellbeing directly related to a mother's working environment (e.g., Moustafa et al., 2020; Nelson-Coffey et al., 2019), this study focused on the component of an academic mother and how that environment affected her psychological wellbeing. A better understanding of the adversity academic mothers endure is needed to assist this

marginalized population with their everyday encounters at work and at home. This study solicited participants' personal narratives, including their degree of emotional distress and their lived experiences as mothers in academia to inform possible policy changes at the university level.

Stress, Depression, and Anxiety

People experience a multitude of emotions throughout life. Stress, depression, and anxiety present in various ways, and the impact of these emotions can influence behavior (Moustafa et al., 2020). Major life transitions, such as giving birth, job promotions, and midlife crises, can cause stress and anxiety. Additionally, these transitions affect women at a higher rate than men (Nelson-Coffey et al., 2019).

For the purposes of this study, stress was a source of negative conditions. Individuals view stress in one of two ways, either as a cause or as a result (Nelson-Coffey et al., 2019). Stressors can include work, family, and personal obligations. Barlow et al. (2002) provided a comprehensive definition of anxiety as a future-oriented mood state associated with preparation for possible upcoming negative events. Previous research has shown that, when experienced together, stress and anxiety can lead to depression (Moustafa et al., 2020). Depression is linked to poorer mood and the inability to experience pleasure and rumination. All three of these psychological constructs are directly related to wellbeing.

Individuals' perceived wellbeing may differ depending upon the amount of stress, depression, and anxiety they are experiencing. When undergoing major life transitions (e.g., childbirth and promotions), women are emotionally affected by a much higher rate

of stress and anxiety than men; therefore, the exploration of how academic mothers perceive these emotions was warranted (Moustafa et al., 2020). Mothers in academia undergo multiple transitions throughout their careers. The timeline of motherhood aligns with the years of tenure and promotion in most cases, which is a major life transition for the female academic. Emotions, depression, anxiety, and stress are linked to wellbeing. There are no current studies of how these emotions affect the wellbeing of the academic mother. To fill this gap, this study showed the emotional consequences of navigating both roles as a mother and an academic.

Language

Emotions can come across in how individuals communicate, either verbally or nonverbally (Tillman & Louwerson, 2018). Language is the principal method of human communication, consisting of words used in structured and conventional ways and conveyed by speech and writing. Verbiage used in day-to-day life reflects the identity and social relationships individuals maintain. Language is the most prominent and reliable way for people to translate their internal thoughts and emotions into a comprehensible form of communication (Tausczik & Pennebaker, 2010). Language is how psychologists attempt to understand individuals' actions or lack of actions (Guiney, 2018).

To gain a broader understanding of how language reflects lifestyle, a thematic analysis was appropriate to analyze the qualitative data gathered in this study. Thematic analysis allowed the researcher to focus on identifying patterned meaning using the data gathered from qualitative interviews (Anderson & Holloway-Libell, 2014). Thematic

analysis assisted in linking the participants' everyday language use with behavioral and self-reported measures of depression, anxiety, and stress.

Similar to previous research (e.g., Anderson & Holloway-Libell, 2014; Seidman, 2013), the personal narratives gathered in this study underwent semantic analysis. Coding the individual participant responses revealed the thematic development reflective of the data. The themes that emerged provided a better understanding of how the language women and mothers in academia use to describe their experiences is a direct reflection of their overall wellbeing. Although Tillman and Louwse (2018) used a linguistic approach to study other populations and their emotions, there was no current research gathering this type of information from women in academia who are mothers. The current study provided a deeper understanding of the breadth and depth of the emotional toll these women experience and its effect on their wellbeing.

Narrative of Constraint

The foundational framework that affects women in an academic setting is often referred to as a "narrative of constraint" (O'Meara et al., 2018, p. 213). This narrative is comparable to the glass ceiling concept that once women reach a certain level, there is nothing else for them to achieve. Regarding the balance of work-family responsibilities, this narrative often shows unforeseen complications for women in academia. Although previous scholars have investigated women who are not mothers in academia and the obstacles they face (O'Meara et al., 2008; O'Meara et al., 2018), there is a gap in the literature surrounding women who identify as mothers in academic roles. The need to have a more thorough understanding of how depression, anxiety, and stress can affect the

overall wellbeing of women with these two identities addresses the narrative of constraint.

People are unique in identity development, and this experience shapes how they contribute to their profession. The conceptual framework presented by O'Meara et al. (2008) highlighted the idea of a collaborative work environment and how that influences individuals' growth and development in their professions. However, currently there is no proven link between this framework and the interconnectedness of multiple roles. Being a mother and an academic is a distinctive identifier that required an investigative approach and the application of this framework.

The narrative of constraint women in academia undergo was a topic explored in the current study. Gathering information and details on how mothers in academia view this construct was the first step toward eliminating this narrative. This study allowed these women to describe their overall abilities to navigate multiple roles while maintaining their overall wellbeing. Further, they described how their multiple roles influenced their development as both a mother and an academic.

Self-Determination Theory

Self-determination theory (SDT), previously explored by Deci and Ryan (2012), supports the idea that self-determined experiences are central to motivation, goal pursuit, overall performance, and wellbeing. SDT involves three psychological constructs that help the individual thrive from internal factors rather than external factors (e.g., personal goals versus external rewards; Deci & Ryan, 2000). These factors are autonomy, relatedness, and competence. Deci and Ryan (2000) found that wellbeing is not often best

captured by hedonic conceptions of happiness alone. Conversely, SDT suggests the concept of eudaimonia, or vital wellbeing, as a complementary approach. Individuals are best motivated when they have opportunities to receive both internal and external rewards (Christman, 2004).

To gain promotion in an academic setting, individuals undergo evaluation through the tenure process (Christman, 2004). This process includes intrinsic factors, feelings of success from within, and external factors or the actual process of promotion (Cesi & Williams, 2011). Women in academia who are mothers reach this process at a much slower rate than their counterparts who are either men or women without children and families (Anders, 2004). This delay can have long-lasting effects on mothers' overall wellbeing. All three psychological factors—autonomy, relatedness, and competence—come into question throughout this evaluation (Deci & Ryan, 2000). Although autonomy is one of the more important considerations, the process of tenure limits using this construct (Christman, 2004). Therefore, the remaining psychological processes of relatedness and competence play a larger role (Anders, 2004).

Feminist theorists assert that relatedness is central to the achievement of autonomy and self-determination (Anderson & Christman, 2005; Buss, 1994; Christman, 2004; Friedman, 1997; Mackenzie, 2008). Relationships with others as well as social, political, and economic institutions impact relational autonomy, or the ability to influence outcomes (Christman, 2004). The value of competence and relatedness in an academic setting can have significant impacts on a mother in academia (Mackenzie, 2008).

The academic mother's achievement and its effects on her wellbeing have not received thorough research. Within the current study, the researcher gathered information on the participants' perceived emotions and descriptions of being a mother in academia. The impact of relationships, societal strains, and work-life balance these women maintained provided a higher level of understanding of this group of women.

Motherhood

Gender schemas have influenced behaviors and role expectations for both women and men (Valian, 1998). There are numerous assumptions associated with women in academia who are mothers. Social psychologists have documented that men tend to be judged on whether they show promise, whereas women in similar circumstances are often assessed strictly on what they have actually accomplished (Hewlett, 2002). Like the glass ceiling, the maternal wall bias is a documented gender phenomenon exposing the lack of mothers in desirable faculty positions (Williams & Segal, 2003). Maternal wall bias occurs when colleagues view mothers, or pregnant women, as less competent and less committed to their jobs (Hewlett, 2002).

The maternal wall bias in academia often arises when a woman gets pregnant or seeks maternity leave (Williams & Segal, 2003). In the United States, 82% of women are mothers, including 76% with advanced degrees. The maternal wall may constitute a more challenging barrier to career advancement and pay equity than the glass ceiling (Hewlett, 2002). Williams (2015a) investigated negative competence assumptions prompted by pregnancy, finding that performance reviews of female employees were dramatically lower after pregnancy.

Maternity or parental leave produces a new set of barriers, including disdain by colleagues who have to cover additional courses due to the leave (Williams, 2015b). In addition to difficulties with colleagues, maternity leave is often unpaid and places a financial burden on the new mother and her family. Although parental leave promotes parents and children's emotional and physical health, few universities offer paid leave (Rodino-Colocino et al., 2020). Furthermore, taking maternity leave does not always pause tenure attainment. Variation in leave policies is similar to that of stop-the-tenure-clock policies, unevenly applied and dependent upon policies set forth by each university. These circumstances often force the academic mother to make a difficult choice: work while on leave, not take a long enough leave, or risk not gaining tenure because of her choice to become a parent.

Mothers in academia face decisions that affect their future careers as well as their homelife. These decisions influence their emotions, which in turn, affect their wellbeing. The research surrounding the maternal wall is abundant in numerous fields. However, there are not current investigations of the multiple roles an academic mother holds and how it influences her wellbeing. This study was a means of further exploration and investigation of how these women depicted their abilities in maintaining multiple roles without losing the ability to maintain their wellbeing.

Female Trainers of Psychology

The feminization of teaching took place in the early 19th century. Traditionally, education was a field for men; however, with industrialization, women began taking on teacher roles due to their caring natures (Cherry, 2020). As the education system has

evolved, new opportunities presented have allowed women to move beyond classroom settings and move into more administrative or specialized fields. Multiple fields of psychology emerged and created specializations, including school and clinical psychology programs, beginning in the late 1800s and early 1900s.

Founded in 1892, the American Psychological Association was the first organized group of psychologists in the United States (Cherry, 2020). The University of Pennsylvania began offering clinical psychology programs in 1896. In the first half of the 20th century, clinical psychology was focused on psychological assessment. Following the 1917 formation of the American Association of Clinical Psychology, the American Psychological Association took over 2 years later and then subsumed all psychology subspecialties. Created in 1969, the National Association of School Psychologists (NASP) offered representation to all practitioners of school psychology at every level (e.g., doctoral and specialist). Although the field of psychology has changed dramatically over the years due to increases in the needs of families, adults and children, the demand for practitioners has not. There is a significant need for practicing psychologists in multiple capacities (Cherry, 2020).

The shortage of psychologists has been a popular topic of discussion for many years. In 2017, the American Psychological Association reported that female psychologists continued to lack money, power, and status equity with their male colleagues (Guiney, 2018). Despite ongoing recommendations in the areas of education, training, and employment, little has changed in more than 2 decades. Initially, the goal was to have more practitioners; however, there is now a push to increase the number of

individuals who return to academia to become psychology program trainers. In 2014, the Center for Workforce Studies found that 75% of graduate level psychology program enrollees were female; however, upon graduation, these women were already at a disadvantage, with significantly higher debt levels and significantly lower salaries than men upon entering the workforce.

Women make up 75% of all school psychologists but seek academic positions at lower rates than men. Research has suggested that fewer women enter the psychology professorate due to dissatisfaction with workplace conditions, salary discrepancies, and personal reasons, including parenting demands (Hendricker et al., 2017). Clinical psychology is approximately 65% female (Casad et al., 2019). Hendricker et al. (2017) found the gender differences in workplace satisfaction due to untenured faculty women reporting significantly less satisfaction than males. Female trainers of psychology programs face additional challenges, including taking a year longer than men to gain tenure and far less representation as associate or full professors.

The lack of research surrounding the intersectionality of women who are mothers and trainers of psychology is apparent, with their lived experiences not investigated in a qualitative framework. Even though women comprise the majority of the psychology field, fewer women seek academic positions than their male counterparts. This reality suggested the need to explore the lived experiences of school or clinical psychology trainers who identify as mothers. This study could serve as a catalyst for change in current university policies and guidelines by gathering these narratives.

Work-Life Balance

Work-family conflict pertains to the interrole conflict that happens when the time devoted to or the strain created by a job interferes with the ability to fulfill family roles or responsibilities (Biernat & Wortman, 1991). The demands faced by women in academia who identify as mothers range from stopping the tenure clock to limiting their teaching load to be home with their children (Casad et al., 2019). The idea of maintaining work-life balance has not undergone exploration through the eyes of psychology trainers who are women and mothers. Previous researchers (e.g., Casad et al., 2019; Cesi & Williams, 2011) are notable for increasing awareness of how unsuccessful women in academia feel within their multiple roles of being a partner and an academic; however, those studies are not specific to the intersectionality of being a trainer of psychology as well as a mother.

Mason and Goulden (2002) examined work and family conflicts of women and men in academia, finding that “babies matter” (p. 12) in the lives of academics. Notably, they found that women who have their children within 5 years of earning their PhD are much less successful than men in earning tenure. There is a delicate balance of work and home life that workplaces too often ignore. In addition, navigating a less-supportive workplace environment (e.g., lack of family-friendly policies) and greater work demands cause mothers to experience greater personal conflict and feelings of being overwhelmed (Casad et al., 2019).

Psychology program educators are responsible for developing new psychologists who maintain their wellbeing while completing their training; however, even the most seasoned trainers face difficulties in doing so due to the rigorous demands of academia

(Rodolfa et al., 2013). Often, academics struggle to maintain their own wellbeing, which can directly impact their ability to train their students. The lack of wellbeing for women in academia who are mothers contributes to the shortage of trainers of psychology, resulting in fewer female practitioners in the field.

Rationale for Research: Problem Statement

The challenges women in academia who also identify as mothers are robust in their presentation and overall outcomes. These challenges include the limited ability of these women to integrate their emotional, intellectual, and physical selves within their professional and personal lives. There is minimal research on the lived experiences of this often marginalized group, with an even larger gap specific to women who are mothers and trainers in the field of psychology.

Trainers are responsible for developing psychologists in the areas of assessment, behavior, and counseling using a biopsychosocial model. Through this lens, trainers encourage a strengths-based approach while considering the influence of outside environmental factors. Women who are mothers and trainers of psychology offer a unique perspective to this pedagogy as they are distinctive from their male counterparts. Female trainers who are mothers take on multiple professional and personal helping roles, including teacher, clinical supervisor, clinician, mother, and partner.

This study was a means to determine whether women who are mothers and trainers of psychology are able to maintain their wellbeing while navigating the rigorous demands of these multiple roles. Investigating this group of women and their perceptions of their levels of depression, anxiety, and stress was warranted to assist in determining

the influence of interactions on their overall wellbeing. The information gathered provided an understanding of how they viewed their wellbeing and its impact on navigating these multiple roles.

Research Questions and Objectives

The four major research questions for this study were as follows:

Research Question 1: Do women who are mothers in academia experience greater levels of depression, anxiety, and stress compared to women in academia who are not mothers?

Research Question 2: Is there a difference in levels of depression, anxiety, and stress between female trainers of school and clinical psychology?

Research Question 3: How do women in academia who are mothers and trainers of psychology describe their experiences of multiple professional and family roles?

Research Question 4: How do women in academia who are mothers and trainers of psychology perceive their roles impacting their overall sense of wellbeing?

To further explore the participants lived experiences, three subquestions include:

4a. To what extent do these women feel able to navigate their various professional and family roles?

4b: What influences the abilities of women who are both mothers and female trainers of school or clinical psychology to overcome the barriers they face?

4c: What factors or strategies do these women find helpful in managing their various roles and overcoming the barriers they face in academia?

CHAPTER II

LITERATURE REVIEW

Introduction of the Working Mother

A review of historical and present-day scholarly research informed the exploration of women who identify as mothers in the academic world and their success at navigating their overall wellbeing. Wellbeing is defined as a state of being content, healthy, or happy (Merriam-Webster, n.d.). However, wellbeing is a much broader concept than moment-to-moment contentment. For the purposes of this study, wellbeing included contentment, health, and happiness as well as overall feelings of success harbored by mothers in the academic world. Sauermann (2017) suggested that success is a favorable or desired outcome, but that definition alone misses an understanding of the overall feelings associated with success. People experience success in numerous ways; however, most link it to an innate, uncontrollable urge to further their status while impressing their peers with their abilities to integrate this construct across multiple roles.

This study focused on how women in academia approach the roles of academic and mother and how the process of maintaining wellbeing could lead to a shortage of female trainers of psychology. This chapter addresses the lack of information regarding women's individual experiences in maintaining their wellbeing as a mother in academe. Broadly, this chapter presents the context of the work environment for women in academia and how it may differ from the traditional nonparent or male role. The influence of gaining tenure and work-life balance receive exploration, as do the glass

ceiling effect that has traditionally disadvantaged females and how motherhood continues to affect this phenomenon.

Finally, the chapter presents relevant literature showing the levels of stress women in academia face, including societal expectations and views on motherhood and the pressures of being an academic. Moreover, this investigation contributes a better understanding of the impact of being a mother and perceptions of success in both environments. In addition, there were discussions of the practice of psychology, trainers within psychology, and the intersection of women who are trainers in psychology and identify as mothers.

Women and Career Expectations

Women's career exploration and entry into the working world is a unique experience that progresses differently than expectations based on the complexity women face throughout their lives (Landry, 2002). Women's career decisions are often driven by multiple factors, including home and childcare responsibilities (Jaschik, 2014). The timeline of gaining employment after numerous years of education often aligns with the period when women begin raising families. In 2010, researchers from Barnard College in New York interviewed 21 women, all striving to be "supermoms" at the most demanding time in their careers (De Vise, 2010). Many of the participants portrayed their work, school, and family lives in irreconcilable conflict. One mother described working in survival mode to avoid expulsion from school.

The early years of one's academic career are often the most important as the focus is on establishing expertise, publishing, prepping new courses, and positioning for the

possibility of tenure (Armenti, 2004; Hill et al., 2010). Although women have made advancements in the academic world, the dual role of mothering while working in academia is a situation that men do not face (Mirick & Wladkowski, 2018). The expectations set by those in power offer little to no flexibility when women face numerous demands (Hill et al., 2010).

Researchers have long-documented the glass ceiling in academia, leaving women more likely than men to hold nontenure-track positions (Williams, 2015). In academia, women are often disadvantaged compared to men regarding the available entry-level positions (Guiney, 2018). Primarily, women in academia and higher education are less likely than their male counterparts to start out in a tenure track position (Christman, 2004). Rather, they receive positions of lower esteem, with fewer responsibilities, research requirements, classes, and growth opportunities (Sauermaun, 2017). When women in academia accept these roles, they cannot demonstrate their abilities to perform at a higher level, making career advancement harder than for men or women without children (Williams, 2015b).

Academic career prospects and experiences differ between men and women (Ortlieb & Weiss, 2018), who appear to view academia and childbearing differently. The realities of having children affect women more than men. Women are often more certain of when they want to have children, and they view the geographic mobility involved in pursuing academic careers more negatively than men. Current research documented the strong impact of having children on academic women's careers (Eagly et al., 2000; Ortlieb & Weiss, 2018). Women who have children soon after receiving their PhD are

much less likely to achieve tenure than men having children at the same point in their career (Williams, 2015b). Prestigious research universities tend to grant tenure to men at much higher rates, relegating women to second-tier teaching and adjunct positions (Mason & Goulden, 2002). The result is that most women who earn their doctorates never get near tenure, much less tenure at a leading institution (Williams, 2015b).

Ortlieb and Weiss (2018) found that after controlling for scholarly productivity, women attain tenure more slowly than men, which cannot be the result of lower standards of performance. Women publish higher-quality work than men do and are cited at a higher rate (Westoby et al., 2020). Eagly et al. (2000) found that men who believed they were interacting with a woman in a work environment were more likely to assign their partners feminine tasks, such as taking notes in work-related meetings or planning for office parties.

Many of the differences between men and women emerge in the stereotypical images of each group (Ellemers, 2018). However, both groups may share these stereotypes, further impacting how men and women define themselves and how others treat them. In an empirical study, Ellemers (2018) explored how gender stereotypes influence how people attend to, interpret, and remember information about themselves and others. The author also considered the cognitive and motivational functions of gender stereotypes to better understand the impact of implicit beliefs and communications about men and women.

Gender stereotypes are apparent when male scientists create professional expectations and practices that exclude women from the scientific community (Ceci &

Williams, 2011). Previously in academe, there had been a strong influence based on the historical construct of traditional science (Casad et al., 2019). Women in academia found these work environments better equipped to support their male counterparts, indicating that academia is more supportive of males. Furthermore, Casad et al. (2019) explained that the modern conception of academia and science-driven careers prevents a culture-free, gender-neutral environment based on standing expectations from the Enlightenment period of the 18th century.

The male perspective and cultural assumptions have often been driving forces behind numerous theoretical approaches, including the overall experiment design and data analysis (Brewer, 1996). This further substantiates men having more influence over what is a reputable study, thereby influencing and shaping the overall direction of research (Daly et al., 2011). Thus, there have been a substantial number of limitations placed on the female academic attempting to produce scholarly work.

Eagly and Steffen (1985) stressed that academia and the nature of science exclude qualified women while giving men a sense of privilege, suggesting their research is superior. This process can be damaging, putting the career trajectory of women in academia far behind men.

Research has long shown that female academics battle gendered beliefs and stereotypes in developing sustainable careers (Armenti, 2004; Foschi, 2000; Skewes et al., 2018; Williams, 2015a). In academia, there is a perception of pregnancy as unprofessional, with maternal bodies negatively perceived (Foschi, 2000; Skewes et al., 2018; Williams, 2015b). Many women fear having children once they are in an academic

position for fear of becoming “othered” in academia (Williams, 2015b, p. 17). To many, academic motherhood is filled with conflicting ideals and expectations (Foschi, 2000). Motherhood and academia add an inordinate amount of stress on individuals when the roles intersect (Skewes et al., 2018).

Success and the emotion it holds apply not only to the work environment but the home environment as well. The idea of the perfect employee and the perfect parent stems from societal beliefs that women must choose in which arena they will be successful (Skewes et al., 2018). The responsibilities of raising children, completing substantial amounts of quality research, and advising students on their own success are becoming increasingly difficult to navigate (Williams, 2015a).

The Connection of Emotion to Wellbeing in Women Who Are Mothers

In a study of wellbeing and its impact on emotions, Anglim et al. (2020) found subjective wellbeing to be fairly stable over time; in contrast, psychological wellbeing is impacted by levels of positive and negative affect. The researchers used participants’ reports to measure subjective wellbeing, with psychological wellbeing measured by surveys and questionnaires investigating depressive symptoms. Although Anglim et al. found a connection between emotions and reported wellbeing, individual differences in cognitive emotion regulation can also influence wellbeing.

Cognitive emotion regulation encompasses the conscious and unconscious strategies individuals use to reduce, maintain, or increase positive or negative emotions. These strategies can include exercise, mindfulness, therapy, and reacting to positive or negative events (Balzarotti et al., 2014). Although several scholars have examined the

relationship between cognitive strategies and the reduction of psychological symptoms (e.g., Anglim et al., 2020; Moustafa et al., 2020), there has been far less attention given to the implications of emotions and their impact on wellbeing. Researchers have largely overlooked the emotional impact on the wellbeing of women who work while being mothers.

The transition to motherhood is an important life event. Mothers experience a variety of physiological and psychological changes in a short time (Asselmann et al., 2020). Women who take on the role of a working professional while balancing career and family life face emotional and physical burdens while trying to succeed at multiple responsibilities (Moustafa et al., 2020). Moreover, the need to adjust to family situations, social identity, and role expectations as a mother can make women vulnerable to depression and anxiety. Cross-sectional and longitudinal studies have shown that women who perceive greater social support mitigate the association between environmental stressors and symptoms of depression, anxiety, and stress (Biaggi et al., 2016). Conversely, a lack of social support can increase job stress, adversely impacting the mother's mental health. Following a systematic review, Moustafa et al. (2020) found that major life transitions, including changes in career goals or the promotion process, can cause depression in women.

The dual responsibilities of being a mother and employee necessitate learning to balance these multiple roles. There are few studies to date exploring how individual emotions impact the wellbeing of these women. More specifically, there is no research

available investigating how female trainers of psychology who are mothers describe their experiences and how their emotions affect their wellbeing.

Theoretical Framework: Phenomenology

A phenomenological approach was applicable for this study. Creswell (1998) described phenomenological research as describing the meaning of the lived experience. This study of mothers who are trainers of psychology in an academic setting was an exploration of the experiences associated with the phenomenon—in this case, how the overall lived experience as a female academic and mother related to women’s perceived wellbeing as measured by levels of depression, anxiety, and stress.

Giorgi (1971) defined phenomenology as a discipline concerned with understanding the human experience, exploring the meaning of the experience for the individual, and connecting the experience to the everyday world. Stainback and Stainback (1984) described the phenomenologist as examining a phenomenon from the participants’ perspectives. In this study, mothers in academia who are trainers of psychology participated in interviews regarding their perspective on their overall wellbeing while navigating these two different roles.

Gubrium and Holstein (1995) identified three core assumptions that ground phenomenology: subjectivity, language and meaning, and indeterminacy. Subjectivity is the focus on knowledge of everyday life. The use of in-depth interviews to gather subjective data is one method of understanding human behavior and experience (Stainback & Stainback, 1984). The significance of language and meaning in day-to-day life forms the second core assumption of a phenomenological approach. Language is the

vehicle for driving meaning from interactions, allowing individuals to sort experiences (Gubrium & Holstein, 1995). In this study, the participants' use of language to fully describe their experiences provided insight into their overall perceptions of wellbeing and how they navigate multiple roles. The third core assumption is based on the idea that objects have an indeterminate quality. Because meaning is an individual construct, objects or relationships can mean various things. The use of semistructured interviews was a way to better understand the impact navigating multiple roles can have on the participants' overall wellbeing based on their descriptions and perceptions.

Analyzing the Emotions of Language

How individuals speak allows the outside world into their emotional and cognitive world (Rosenberg & Tucker, 1978). Researchers have provided evidence to suggest that people's physical and mental health align with the words they use in conversations (Gottschalk & Lolas, 1989; Pennebaker et al., 2007; Rosenberg & Tucker, 1978). Additionally, several studies have indicated that individuals who benefit from this process use many positive emotion words and fewer negative emotion words. To date, there have been no studies analyzing the stories of women in academia who are mothers.

Shapiro et al. (2006) studied medical students and their written incident reports to reflect on how these clinical experiences might enhance their communication skills, empathy, overall professionalism, and sense of wellbeing. Although the researchers found the medical students' self-perceived empathy improved, Shapiro et al. did not explore their psychological wellbeing in relation to their written communication.

Narratives in Academia

Academia is often symbolically perceived as a pipeline. Accordingly, an academic career can appear to be a linear progression, beginning at the undergraduate level and eventually leading to a tenured professorship (Shaw & Stanton, 2012). A vast amount of literature contributes to the seeming underrepresentation of women in academic careers (Heijstra et al., 2017). Heijstra et al. (2017) defined the underparticipation of women in academia by the time lags associated with overcoming traditionally very low representation. The phenomenon of women in academia and higher learning has received extensive study, particularly with regard to work-life balance and the numerous requirements for gaining tenure (O'Meara et al., 2008). However, little information is available regarding the narratives of mothers succeeding in an academic setting while balancing work and home life responsibilities, ultimately affecting their wellbeing. Without a sense of wellbeing and a balance between work and home, many women in academia face depression, a sense of inadequacy, and anxiety (Moustafa et al., 2020).

O'Meara et al. (2008) identified a set of ideas often referred to as a “narrative of constraint” (p. 2). This narrative appears to be the foundational framework affecting women in an academic setting. In the book *Faculty Careers and Work Lives: A Professional Growth Perspective*, O'Meara et al. defined a narrative as a commonly told story, which they applied to faculty careers, work, and roles. Narratives can shape the focus of research while providing context to explain meaning of the findings. Similarly, narratives can affect how individuals make sense of how and why things are, leading to

multiple misunderstandings and a lack of representation of certain groups (Guiney, 2018).

O'Meara et al. (2008) addressed the harm of placing faculty in the role of victim, often referred to as the process of scripting or following a prescribed expectation.

Hargens and Long (2002) identified the transfer of institutionalized scripts as endorsements from one set of colleagues to another. Such scripts provide a set of norms that embody acceptable or appropriate behaviors within the institution (O'Meara et al., 2018). Faculty often navigate the academic environment and absorb these scripts.

Researchers have also suggested that academics may try to change themselves or their work to more closely align with their career, resist the script altogether, or try to negotiate with the script (Guiney, 2018; O'Meara et al., 2018). When this happens, individuals can cultivate a habit of not acknowledging the multiple roles in which faculty are involved (Rusch & Wilbur, 2007).

The implications of the act of scripting can create a dysfunctional balance between work and life responsibilities (Guiney, 2018). There is a negative view of how individuals can be agents of change and create meaningful personal and professional lives for themselves. Additionally, scripting of the victim role can harm others who may aspire to a faculty position (O'Meara et al., 2008).

The Narrative of Constraint and How It Limits Women in Academia

Preventing equality in the workplace can often lead back to a narrative of constraint (Heijstra et al., 2017). Commonly, constraint involves a form of restriction or the resistance to perform certain actions. Cultural sociologists and social scientists have

broadened this definition to include constraint as a theoretical tool to understand how an individual makes sense of the links between their past, present, and future (Weissberg et al., 2016). The theory also contributes to how individuals construct their social identity from cultural building blocks.

A narrative involves an individual's lived experience or personal story (O'Meara et al., 2008). This study incorporated a narrative of constraint specific to lived experiences, including restrictions placed on women in academia who are mothers. This narrative of constraint provided an understanding of unseen obstacles regarding work-family balance in women's careers in academia. Researchers in other fields have investigated workplaces that promote the "ideal worker," identified as a person without a family or childcare responsibilities (O'Meara et al., 2008). However, scholars have failed to provide a better explanation regarding the nature of constraints for women in academia who identify as mothers. The demands placed on this marginalized group of academics require the consideration of those in authoritative roles within the university setting to better inform future policies.

According to O'Meara et al. (2008), the common narrative surrounding female academics stresses factors that limit potential, career trajectory, and work completion. Other factors include feelings of isolation, lack of support, politics-based reward systems, productivity measured against publication numbers, lack of grant opportunities, and a common theme of failure. O'Meara et al. suggested the possibility of missing these constraints in the areas of academic career trajectory, including existing talents, collaborative professional learning relationships, actual catalysts for faculty work, faculty

learning as measured by positive influences and improvements to their work, faculty who find agency to create lives that are both personally and professionally satisfying, the potential for self-directed projects, and growing as faculty throughout the academic life.

Women in academia continue to receive lower salaries than their male counterparts (American Association of University Professors, 2017) and are less likely to obtain tenure-track positions (Flaherty, 2016). In a University of California study, only 36% of female postdoctoral scholars and 28% of female doctoral students viewed tenure-track careers at research institutions as family-friendly (Hill et al., 2010). Women who leave academic careers often do so in the early career period, which coincides with the childbearing years (Heijstra et al., 2017). Female postdoctoral fellows with children are twice as likely to change careers as those without children (Hill et al., 2010). Women in academia may delay childbearing due to pressures to attain tenure as early as possible; the average age of achieving tenure is 39 years (Shaw & Stanton, 2012).

The barriers highlighted by the narrative of constraint are career hindrances. The ever-present reminder of these barriers can limit the faculty career by overshadowing opportunities for professional and personal development as well as goal achievement (O'Meara et al., 2008). Finding the best approach to fill in the gaps in the literature and obtain a more thorough understanding of the phenomenon indicates the need for further research going beyond the narrative of constraint. By adding additional components of navigating the academic sphere while investigating the overarching impact of emotions, researchers can better understand how women in academia can overcome barriers (Shaw & Stanton, 2012). Therefore, a perspective that includes what is right within the academic

world along with what is wrong would better inform the changes needed to alleviate the obstacles women face in academe. Approaching work-life balance with policy change could increase not only career goals, but the overall wellbeing of individuals who identify as mothers.

Shifting the Narrative

The narrative of constraint in academia can serve as a catalyst for policy changes to include greater equality, more opportunities, a more level playing field, and a focus on quality over productivity for women who identify as mothers. However, this focus lacks the change needed in academe. When the narrative is overly focused on the negative, the full perspective may be overlooked, along with the processes of professional and personal faculty growth and development (O'Meara et al., 2008). Thus, there is a need to practice a counternarrative approach.

Counternarratives are stories from the vantage points of historically marginalized individuals, implying a space of resistance against traditional beliefs of dominance (Mora, 2014). Counternarratives contribute to identity construction, with identity understood as a relational construct that takes form through interaction in social contexts. Additionally, these counternarratives often fill the need for individuals at odds with a socially constrained master narrative to find stories that match their experiences. Therefore, counternarratives must come from the perspectives and voices of the marginalized population. This is a particularly important construct in the areas of faculty work lives and careers based on the view that women in academia are merely surviving the demands of both their personal and professional lives (Stanley, 2007). A focus on the

growth and development driving this counternarrative would include female faculty as participants in designing and constructing the composition of their lives in ways that are both meaningful and fulfilling.

Within this counternarrative process, the faculty members responsible for teaching, service, and research would also be responsible for developing supports for their own processes of learning and growth (Stanley, 2007). This development would occur in a collaborative environment, alleviating the feelings of isolation described by many people in academia. The conceptual framework presented by O'Meara et al. (2008) showed four constructs to better understand a collaborative work environment: learning, agency, professional relationships, and commitments. Learning includes the ability to engage professionally and personally, which is the core of faculty work and contributions. Agency is the ability to overcome barriers by utilizing faculty's power, talent, will, and desire for work. At the center of learning and growth are professional relationships, best described as how individuals' unique identities and experiences will shape what and how they learn and contribute to their professions. The last construct in O'Meara et al.'s 2008 framework is commitment. Faculty are individuals with long-term personal and professional investments in their careers, making conscious and responsible choices of the content and focus of their work commitment.

Women's academic career paths often vary from their male counterparts. A reconceptualization of the career paths of women in academia could entail a connection to growth as a desirable outcome (Stanley, 2007). Consideration of faculty growth and development for women in academia should include long-term professional and personal

commitments. Utilizing an investigative approach would allow for further exploration of these dual roles, fulfilling multiple demands while achieving satisfaction and meaning in both.

Shortage of Women in the Professorate

The United States Congress passed Title IX in 1972, which prohibits sex discrimination in educational institutions (Shaw & Stanton, 2012). However, women continue to face barriers in achieving top faculty ranks at the university level. Increasing numbers of women have entered the academic pipeline since the early 1970s, with women now outnumbering men at the undergraduate level. A logical assumption would be that more women are entering the professorate; however, despite a vast presence of female students on higher education campuses, women are still underrepresented in full-time faculty roles (Scruton, 2013).

Academic advisors have cautiously approached preparing for a career as a higher education faculty member with women, instead highlighting the potential challenges of being a woman in academia (Scruton, 2013). Mentors advised female students of the difficult decisions they would face when choosing between a personal life and gaining tenure at the university level. Scruton (2013) examined the job satisfaction of female faculty members at 4-year postsecondary institutions to determine if there was a link between demographic and institutional characteristics. In 2008–2009, women earned 58.6% of all bachelor's degrees, 61.3% of all master's degrees, and 51.2% of all doctorates; however, the pipeline to full professorship was narrowing. In 2015, approximately 44% of full-time faculty at degree-granting postsecondary institutions

were female (American Association of University Professors, 2017). However, despite the increase of women in the professorate, the overall representation is far from equal.

Research on the shortage of women in academia provides conflicting views of the causes and solutions (Stanley, 2007). It is well documented that fewer women than men are in tenured or tenure-track positions in academia (Shaw & Stanton, 2012). Within the early stages of academic careers, individuals experience an apparent degree of insecurity, specifically among women (Dorenkamp & Stefan, 2016). These insecurities frequently stem from significant differences in the treatment of professional men and women. Academic institutions hire men and women at roughly equal rates; however, the numerical equality is incongruent with status differences. In general, tenured professors are four times more likely to be male, leading a considerable number of female scholars to feel discouraged from choosing or continuing a career in academia (Ortlieb & Weiss, 2018). Regardless of purported widespread support for equality for women, the sparse number of women in tenured positions in academia is disproportionate to that in the general academic population (Shaw & Stanton, 2012).

Tenure and Promotion

Studying the processes of tenure and promotion was a means to better understand advancement in academic settings. Promotion in an academic setting is different than other professions. Although the professorate has changed dramatically in the 21st century, many embedded values and expectations for advancement requirements and timelines have remained static (Mitchneck et al., 2016). The work of academics is complex, requiring specialized judgment beyond the job descriptions. Promotion and

tenure committees greatly emphasize quantitative measures of research output, which increases the pressure to produce publications (Sauermann, 2017). Duyar and Normore (2012) suggested that academics' optional activities are the central characteristics in their performance. More favorable faculty evaluations often require exceeding requirements by offering mentorship to new employees, becoming involved in university-sponsored events, or volunteering for more complex responsibilities (Casad et al., 2019). Until academics receive tenure, their career trajectory can include fixed-term contracts, expansive performance requirements, and high levels of competition (Ortlieb & Weiss, 2018).

Deci and Ryan (2000) explored the theory surrounding motivational factors influencing autonomous behaviors. According to SDT, self-determined experience is central to human motivation, goal pursuit, performance, persistence, and wellbeing. The three psychological needs of autonomy, relatedness, and competence are the primary factors necessary for self-determination; however, when ranking these needs, Deci and Ryan found that autonomy supersedes the other two. Because autonomy is a significant component of the promotion and tenure process, it is necessary to consider the role of relatedness and competence in this experience.

SDT (Deci & Ryan, 2000, 2012) posits that creativity, motivation, and performance thrive when individuals can satisfy their universal psychological needs of autonomy, relatedness, and competence. Subsequently, individuals experience an event, job, or task as self-determined, with their behavior motivated by internal factors emerging

from personal goals and values as opposed to external reinforcements or demands (Deci & Ryan, 2000).

In contrast to SDT, many feminist theorists have argued that relatedness plays a central role in achieving both autonomy and self-determination (Anderson & Christman, 2005; Buss, 1994; Christman, 2004; Friedman, 1997; Mackenzie, 2008). Feminist theory indicates that self-determination is best understood in terms of relational autonomy (Jaschik, 2014), or the ability to influence outcomes, and can be significantly affected by relationships with others and alliances with social, political, and economic institutions. Academia is an institution influenced by such constructs. There is, however, limited information on how gender and gender biases can impact review outcomes in the process of promotion and tenure.

Addressing the lack of female representation in academia often returns to the idea that hiring more women assistant professors will result in more female associate and full professors (Skewes et al., 2018). In 2013, only 29.5% of senior faculty involved in social sciences were women. Creating a more gender-inclusive academy for people working in academia requires addressing the promotion and tenure processes.

Motherhood

Valian (1998) attributed gender schemas (i.e., implicit notions of masculinity and femininity) to assumptions of different behaviors and roles from men and women. Similar research found that women may internalize the feminine gender role expectation of being a primary caregiver, viewing this role as incompatible with occupational

requirements (Anders, 2004). Mothers struggle to reconcile the prescriptive images of the 24/7 ideal worker and the 24/7 ideal mother (Ridgeway & Correll, 2004).

Hochschild (1997) found that mothers sometimes faced informal social sanctions for violating the prescriptive norm of the ever-available mother. Women who were not mothers were often more disapproving of mothers in the workforce, regardless of their position upon return from maternity leave (Ridgeway & Correll, 2004).

Previous studies (e.g., American Association of University Professors, 2017; Armenti, 2004) found that women want to have children at younger ages than men, and women are more certain at which career stage they want to have children. The research suggests that women are aware of the need to plan childbearing in accordance with their fertility and their professional career. Mason and Goulden (2002) revealed that men and women perceive childbearing differently: Men view it as something that will happen; women view it as something they need to fit into their lives and careers. Jaschik (2014) found that men with early babies (within 5 years post-PhD) were more successful in earning tenure than women with early babies or individuals without babies.

Williams and Segal (2003) supported the idea of a “maternal wall” thought to inhibit women’s progress once they become mothers. Traditionally, social status in the workplace has served as a predictor for perceived competence. Within a controlled laboratory setting, Foschi (2000) found men assigned more status than women based on their body language. Women’s professional accolades were more closely scrutinized and assessed by stricter standards than men (Williams, 2015a). The struggle to be perceived as competent affected women in multiple ways, indicating that women are members of

the out-group and afforded fewer rewards than men (Brewer, 1996). In a study by Eagly et al. (2000), when an in-group member outperformed an out-group member, the in-group wanted to distribute awards based on equity (with awards tied to percentage produced). In contrast, when an out-group member outperformed an in-group member, in-group members wanted to divide awards based on equality (identical percentages regardless of individual production figures).

Women willing to follow feminine stereotypes are more likely to thrive in departments where other women do not (Eagly et al., 2000). Hochschild (1997) reported that women who make use of family-friendly policies often suffer career detriments because of negative competence assumptions associated with motherhood. Eagly and Steffen (1985) found women who work part-time viewed as less warm and nurturing than homemakers despite having the same lack of aspirational qualities.

Far fewer scholars have explored the patterns of bias and stereotyping that affect working mothers compared to women in general. Maternal wall bias can emerge at any point when maternity becomes salient, including when a woman announces her pregnancy, begins to look pregnant, requests parental leave, stops the tenure clock, or seeks a modified schedule (Williams, 2015b). Because of the maternal wall, women may experience benevolent as well as hostile prescriptive stereotyping (Williams, 2015a). Benevolent stereotyping policies place women into traditionalist roles in a “kinder and gentler” way (Williams, 2015a, p. 22). After women have children, some receive advisement to work shorter hours or avoid travel so they can spend more time with their families.

Work-Life Balance

Academics who identify as mothers balance multiple roles and prioritize responsibilities. Smith and Roebuck (2013) discussed employers' difficult positions in employing women from different generations. The researchers found that the competitive nature of society and organizations cause employee conflict between commitments and personal responsibilities. As a result, work-life balance has become a key topic of discussion. Smith and Roebuck uncovered significant differences among three generations: Generation Y, Generation X, and Baby Boomers. Although these generations gave varying definitions of work-life balance, the generational demographic faded as most reported struggling to find a balance. Smith and Roebuck asserted that women traditionally bear most of the burden of caring for children, grandchildren, and aging parents while simultaneously managing household duties and work expectations.

Women who pursue academic careers face an inordinate number of challenges to balance the multiple roles they assume (Allan, 2011). These roles often create work-family conflicts, frequently stemming from institutional practices and policies not historically supportive of work-family balance (Allan, 2011; Moustafa et al., 2020; Williams, 2015a). The marginalization of women in leadership positions in higher education settings grows with the lack of family-supportive policies and workplace cultures (Moustafa et al., 2020; Williams, 2015a). Women holding faculty positions advance at a much slower rate than men, and there are significantly fewer female tenured professors nationwide (Allan, 2011). A substantial amount of evidence shows that women identifying as mothers in academia struggle with greater challenges in their

personal relationships regarding how to balance family demands and career obligations (Moustafa et al., 2020). According to Glover (2009), learning how to balance both worlds is only one part of women's advancement in higher education. Further research into the other barriers women in academia face is warranted and overdue.

Women Trainers in Psychology

There is a significant gap in the research exploring the intersectionality of women who are mothers and also trainers of psychology. Data are lacking regarding the lived experiences of women psychology trainers who are mothers and have succeeded in displaying a certain level of competence in their career trajectory. The available literature (e.g., Glover, 2009; Moustafa et al., 2020; Williams, 2015b) showed the ideas of wellbeing and wellness, work-family integration, higher education, and psychology training programs. However, no researchers to date have qualitatively explored the lives of women who identify as mothers and are trainers of psychology.

Founded in 1892, the American Psychological Association was the first organized group of psychologists in the United States (Cherry, 2020). Clinical psychology is a branch of psychology most concerned with the assessment and treatment of abnormal behavior, mental illness, and psychiatric problems. Clinical psychology has an integrative approach, linking the science of psychology with the treatment of complex human problems. Approaching treatment for mental illness through talking with the patient drove early clinical psychology. The first psychological clinic opened in 1896 with a focus on children with learning difficulties. By 1914, there were 26 other clinics focused

on the study of individuals through observation and experimentation with the intention to promote change.

Clinical psychology became more established during the World Wars as practitioners demonstrated the usefulness of psychological assessments (Cherry, 2020). Created in 1917, the American Association of Clinical Psychology was an organization to oversee practitioners and ensure the uniform following of guidelines. The American Psychological Association dissolved the Association of Clinical Psychology 2 years later and assumed the duties of monitoring practitioners and their practices.

The U.S. Veterans Administration offered the first doctoral degree in clinical psychology in the 1940s. By 1950, more than half of the doctorates awarded in psychology were in the area of clinical psychology (Cherry, 2020).

School psychology has its roots in clinical psychology, special education, and child study (Fagan, 1981). Among the titles assigned to school psychologists are clinical psychologists, psychometrists, psychoeducational testers, and psychoclinicists. Despite Munsterberg introducing the term “school psychologist” in 1898, school psychology was not a distinct profession until the 1920s.

At the American Psychological Association’s inception, there was no separate division delineating school psychology. However, in 1944, revised American Psychological Association bylaws led to the creation of Division 16 to represent school psychologists. This division represented practitioners working as psychologists in schools or within school districts.

In 1954, the Thayer Conference clarified the role, function, and credentialing of school psychologists (Fagan, 1981). The recommendation to reserve the title for those credentialed at the doctoral level was not widely adopted. Hence the creation of the National Association of School Psychologists (NASP) which was created in 1969 to represent practitioners not credentialed at the doctoral level. Additionally, NASP addressed the concerns of the profession where the American Psychological Association did not. Furthermore, NASP supported psychologists through the promotion of educationally and psychologically healthy environments for all students.

Psychology has changed dramatically from the first training program to the present day. The percentage of adults and children with mental health problems has continued to increase despite the intensified focus and resources committed to improving mental health outcomes (Perou et al., 2013). While the early focus in clinical psychology had mainly been on science research, graduate programs began adding additional emphasis on psychotherapy. Modern clinical psychology programs refer to this focus as the scientist-practitioner model (Cherry, 2020). Within this model, clinical psychologists utilize different approaches when working with various clients (Perou et al., 2013).

The earliest school psychologists were diagnosticians who studied children's attributes to predict school success and determine the need for remedial or specialized instruction (Fagan & Wise, 2000). Students typically receive referrals for assessment when they are failing academically or exhibiting presenting emotional or behavioral disturbances.

A medical model of diagnosis and classification emerged in the mid-1970s with the first federal special education regulations (Cherry, 2020). School psychologists can spend more than 50% of their work time in tasks related to psychoeducational assessment, most often in determining eligibility, new or continued, for special education programs and services (Fagan & Wise, 2000). In response to children's changing needs, school personnel have begun to recognize the roles they can play in service delivery. As frontline practitioners, school psychologists are well-positioned to provide appropriate services.

Despite the important role of school and clinical psychologists, demand exceeds the capacity of training programs in the United States (American Psychological Association, 2016; NASP, 2017). Psychology trainer shortages have necessitated creative approaches to training. To increase the number of practitioners, many universities have added an online modality to their psychology programs (Perou et al., 2013). Virtual courses relieve the professors of additional classwork as a graduate teaching assistant assumes these duties. In a survey of 63 school psychology program directors in the United States, Hendricker et al. (2017) found that 35% of master's, specialist, and doctoral programs offered a portion of coursework online, ranging from one to nine courses per program. However, 81% of the school psychology program directors surveyed did not believe the quality of online learning was equal to face-to-face classes. Also, the directors overwhelmingly felt that the programs offering online courses were less reputable than strictly face-to-face programs.

Training programs were initially ways to produce more practitioner-focused graduates (Curtis et al., 2004). However, with the growing population and need for more practitioners, there is now an even greater demand for individuals to return to the academic setting to increase the number of practitioners. Psychologist shortages are not new, with this deficiency incorporating trainers as well as practitioners. Curtis et al. (2004) urged professionals to take responsibility for the needed changes and called for the collaboration of university trainers and individual psychologists to effect more widespread change. Some psychology doctoral graduates may avoid pursuing academic careers, fearing the “publish or perish” syndrome. They may lack confidence in their research and writing skills and their potential for reasonable levels of scholarly productivity that will ultimately be necessary for tenure and promotion.

Over the past several years, job postings have shown an abundance of available faculty/academic positions in psychology training programs in the United States and Canada (Cherry, 2020). Little and Tingstrom (2004) identified 54 available positions at 53 institutions advertised in Fall 1999. Fagan (2004) described a shortage of qualified school psychologists as an ongoing problem projected to last until at least 2025. To reverse this decades-long shortage, research to identify contributing factors is necessary (Boccio et al., 2016). Attrition rates of school psychology trainers and practicing psychologists are an estimated 5% of those exiting the field (Boccio et al., 2016); however, the exact rates are unknown. A systematic investigation identifying common themes or the overall root cause is necessary to remediate the current trends.

Since Little and Tingstrom's (2004) original analysis, the number of psychology faculty openings has been similar each year. These data are consistent with projections by Fagan and Wise (2000), who found that "many training programs are having difficulty filling available faculty positions and perhaps a decreasing proportion of new doctorates are interested in such positions" (p. 398). An examination of current trends shows that women are consistently entering the professorate in greater numbers than men (Boccio et al., 2016). Boccio et al. (2016) reported the psychology graduate student population as 80.5% female. Even though training programs are becoming overwhelmingly female, female graduates are not entering the professorate relative to their overall numbers in the profession.

Women apply for academic positions less often than men (Chinn, 2018). However, women have made steady gains in academia since the early 1970s (Michas, 2020). In 1971, women comprised only 18% of school psychology faculty (Fagan, 2013). This increased to 24% in 1977, 34% in 1989, 46% in 1998, and 51% in 2002. The expectation was that women would continue to increase proportionately to men, with women making up 65% of faculty and 50% of program directors by 2010. The most recent National Association of School Psychology (NASP) demographic data showed that 83% of practicing school psychologists were female (Proctor et al., 2017); in comparison, the American Psychological Association's most recent reports indicated that 65.5% of clinical psychologists are female (Michas, 2020). Although women outnumber men in terms of practitioners, a lower proportion of women enter the psychological professorate due to dissatisfaction with workplace conditions, salary discrepancies, and

personal reasons, including parenting demands (Boccio et al., 2016). There are gender differences in workplace satisfaction, with untenured faculty women reporting significantly less satisfaction than males. In addition to these barriers, almost 25% of female psychology trainers reported experiencing sexual harassment in their current academic setting.

Women in academia are also affected by policies related to parental or maternity leave. According to a study by Perna (2005), only one quarter of female psychology faculty indicated that the paid maternal leave at their institution was adequate, while one third reported having no maternity leave. Additionally, 40% of female psychology faculty reported no possibility of extending their tenure timeline (Boccio et al., 2016).

Anders (2004) found that women, more than men, self-select away from academia in response to specific systemic barriers related to parenting and mobility instead of other aspects inherent to the professorate. Based on this evidence, the assumption that women are less represented in academia because they are less interested is erroneous, especially due to a lack of supporting empirical evidence. Many academics and administrators perceive the nonrepresentative number of women in academia as a nonproblem, which is an incorrect supposition.

Ceci and Williams (2011) surveyed psychology program directors to better understand the reasoning behind unfilled open positions for psychology trainers. The researchers identified a number of barriers to filling these positions. Almost 73% of directors reported that the applicants were not qualified due to a lack of practitioner experience, publications, and research and interpersonal issues. When surveyed on their

approach to recruitment and retention, only 7% of the directors reported improving policies on university and departmental support; instead, most of the focus was on program reputation.

The Voyage of Wellbeing for Academic Mothers

The 1993 Family and Medical Leave Act requires academic institutions to provide unpaid parental leave opportunities to primary caregivers (Williams, 2015a). Many universities also offer stop-the-clock policies, and some are beginning to incorporate reduced-hours tenure tracks. Even with these policies in place, the incidence of childlessness among women academics is high. Over 50% of tenured women have no children (Mason & Goulden, 2002). The result is that female academics are more likely than women in many other fields to find themselves isolated. Workplaces with fewer women, particularly academia, result in polarized evaluations, either very good or very bad (Ellemers, 2018). In addition to polarization, social psychologists have identified the “solo effect” (Biernat & Wortman, 2013), which often results in feelings of isolation and pervasive unhappiness.

The definition of the ideal worker in academia continues to be someone who needs no time off for family care and is available at all times. Most parents request specialized accommodations, including time off or flexible work schedules (Williams, 2015a). Women need a certain level of comfort in their roles of academic and mother to garner political support for the proposed accommodation. If a woman has encountered glass ceiling problems, she may be in an uncomfortable position, lacking the political

support necessary to obtain favors (Biernat & Wortman, 2013). Presently, this is the most obvious way the glass ceiling exacerbates the maternal wall.

A subtle interaction between the glass ceiling and the maternal wall, particularly in academia, is the idea that advancement may require relocation. In that context, nonmothers (including men) will tend to move up if they reach a certain level of accomplishment, whereas mothers are more often unable to relocate (Eagly et al., 2000; Heijstra et al., 2017; Moustafa et al., 2020; O'Meara et al., 2008).

The underrepresentation of women in faculty who hold higher positions (e.g., associate professor or full professor) and the issues academic women face have strong historical representation (e.g., Hargens & Long, 2002; Hewlett, 2002; Hill et al., 2010). Scholars have previously offered biological/essentialist explanations for the lower number of women holding these positions in academia. The assumption is that women self-select away from academic careers because they are biologically predisposed to prefer child-rearing and family roles to professional roles (Cherry, 2020).

Based on data from the 2014 American Psychological Association's Center for Workforce Studies review, 46% of all male psychology faculty were full professors compared to only 28% of female faculty (Guiney, 2018). Further, the report acknowledged that women's choices could account for some of the disparities (e.g., working part-time). However, viewing these choices should be from a sociocultural context that constrains women's options.

Among early-career psychologists, balancing a family and geographic location were negatively associated with planning for a faculty career; how other variables affect

graduate students' intentions to pursue academic careers remains unexplored (Anders, 2004). Among the influx of literature focusing on the intersection of paid work and family and how women balance the two, there have been certain experiences investigated. However, little research has taken place on the experiences of mothers working in professional careers that offer a certain degree of flexibility and autonomy, such as faculty tenure-track positions at colleges or universities (Foschi, 2000). Most of these careers require years of education before gaining an entry-level position. Academia offers a certain appeal to mothers because of the autonomy it provides, at least in theory. The flexibility and opportunity to complete work on one's schedule while caring for a family is drastically different than corporate positions or clerical work with standard office hours. Faculty members must maintain certain qualifications required before achieving the next promotion or milestone.

Women in academia are unique due to the role conflicts they face daily. The choice to prioritize being a good student, a good professor, or a good mother is often difficult. Another challenge is the alignment of the childbearing years with the time-intensive years of publishing, developing classes, and determining service activities in the early years in academia when striving for promotion from assistant to associate and meeting strenuous tenure requirements. The demands of a new baby or parenting a young child conflict with the expectations for academic success.

The concept of success emerged as a common theme when investigating issues related to women in academia who concurrently identify as mothers. Abundant research suggests a positive correlation between feeling unsuccessful in one or both roles and the

decision to leave academia altogether. Mason and Goulden (2002) examined the work and family conflicts of women and men in academia. Ultimately, the researchers determined that decisions surrounding having children matter in the lives of academics. Notably, women who have children within 5 years of earning their PhD are much less successful than men in earning tenure.

The glass ceiling in academia has been a topic of conversation and research for numerous years. Many scholars have suggested that because of the glass ceiling, women are more likely than men to end up in nontenure-track positions (Williams, 2015b). Stronger turnover intentions among women are highly correlated with dissatisfaction with research support, advancement opportunities, and free expression of ideas. The findings suggest that the underrepresentation of women reflects an academic culture that provides fewer opportunities, limited support, and inequity in leadership rather than gender-based differences, such as roles in family responsibilities. This, among other factors (e.g., family considerations), may be particularly true for women (Hargens & Long, 2002).

Far from supporting a biological disposition toward childrearing, evidence has shown that this difference in responsibilities only pertains to everyday tasks. Men and women spend equal amounts of time playing with their children, and women report discontent with unequal distributions of household labor (Biernat & Wortman, 2013). Instead, women self-select away from academia because of issues related to parenting and mobility. Women and men see academia as less suitable for parents or people with partners, which significantly impacts women's—but not men's—plans to enter the professorate. That more men than women think that academia is compatible with having

children, despite no gender differences in desire to have children, supports this contention.

Summary

Women who are mothers and trainers of school or clinical psychology share the unique role of balancing work and family demands, which can lead to a lack of wellbeing (Moustafa et al., 2020). Universities must recognize the challenges facing female faculty with children (Heijstra et al., 2017). Addressing the processes of recruitment and retainment requires a better understanding of these challenges. Exploring the perspectives of women in academia who are mothers can lead to greater support for the wellbeing of female school and clinical psychology trainers.

The present study was an investigation of the barriers women in academia faced and how those barriers contribute to the lack of psychology trainers in training programs. The study reduced the gap in information on current trends involving female trainers of school and clinical psychology who are mothers. Further, the study contributed to research on ways to enhance the professoriate for the overall wellbeing of female professors who identify as mothers.

CHAPTER III

METHODOLOGY

This study was a means to better understand the lived experiences of women in academia who are trainers of psychology. Phase I of the study was an exploration of participants' levels of depression, anxiety, and stress. Phase II had a phenomenological approach to discover the participants' perceptions of wellbeing and the factors affecting their wellbeing. Specifically, this study connected the participants' emotions to their individual experiences in academia while they navigated multiple roles.

Utilizing the Paradigm

This study had a mixed methods research approach, a model that combines elements of both qualitative and quantitative methodology. To better define the broad purposes of breadth and depth of understanding and corroboration, the research methods included qualitative and quantitative viewpoints, data collection, analysis, and inference techniques (Schoonerboom & Johnson, 2017). In 1989, Greene et al. introduced a classification of purposes behind utilizing mixed methods research that is currently still in use as cited in Johnson et al., 2007. This study offered an enriched view in using this paradigm by providing both quantitative and qualitative views of how each participant approached being a female in academia.

Participants – Phase I

Participants for Phase I were women from the 66 school psychology doctoral training programs and 162 clinical psychology doctoral training programs accredited by

the American Psychological Association. A purposive sample of 85 women in academia who were trainers of clinical or school psychology participated in the study (40 school psychology trainers and 45 clinical psychology trainers). Self-reported ethnicity for Phase I was 64% Caucasian/White ($n = 55$), 12.8% Hispanic/Latina ($n = 11$), 14% African American ($n = 12$), 2.3% Native American ($n = 2$), 1.2% American Indian ($n = 1$), and 5.8% Asian American ($n = 5$). The age range for Phase I participants was 30 to 65 years ($M = 44.6$, $SD = 8.7$). Classification, or position, for the participants in Phase I was as follows: 23.3% reported being a full professor with tenure ($n = 20$), 33.7% associate professor ($n = 29$), 36% assistant professor ($n = 31$), 3.5% instructor ($n = 3$), and 3.5% instructor with tenure ($N = 3$). Regarding marital status, 24.4% reported being single or never married ($n = 21$), 48.8% married ($n = 42$), 7% widowed ($n = 6$), 16.3% divorced ($n = 14$), and 3.5% separated ($n = 3$). A flyer explaining the study was sent to the directors of the respective programs was the approach used to solicit participants from each university program.

Participants – Phase II

Participants in the qualitative portion of the study were 13 women recruited from Phase I who met the criteria of being a mother, who had a child aged 18 or younger who lived with her for at least half the calendar year, and a trainer of school or clinical psychology. Phase II participants were seven clinical psychologists and six school psychologists. Anderson and Holloway-Libell (2014) reported that an adequate sample size in a qualitative study must meet two criteria: sufficiency and saturation of information. Sufficiency refers to having a range of participants reflecting a substantial

enough number to connect their experiences with others in the population; saturation entails the researcher asking controlled questions and hearing the same information reported during the data collection phase. To achieve saturation, the researcher utilized a semistructured interview with set questions for each of the 13 participants. Creswell (1998) and Anderson and Holloway-Libell (2014) recommended five to 20 participants in a phenomenological study.

Measures

Phase I

Demographic Questionnaire

The participants completed a demographic survey (see Appendix A), providing information to elicit the qualities of the sample and address the research questions. Participants reported their email address, age, title, ethnicity, marital status, employment status, length of commute to work, if they identified as a mother, number of children, disabilities of children, and type of childcare for children. The participants created a unique identification number (i.e., first 2 letters of the town they were born in, double digit month of birth, and last two digits of the year of birth) so the researcher could link the collected data to the participants while maintaining their privacy. In addition to these demographics, each participant responded to open-ended questions:

- How would you describe your work-life balance as a trainer of psychology?

- Has the current pandemic of COVID-19 impacted your ability to maintain your overall wellbeing? Why or why not? (i.e., Do you feel as though you are able to meet the demands your job requires?)
- What type of self-care activities, if any, do you participate in? Do you find them to be beneficial?
- Would you consider yourself to be successful? Why or why not?)

The final question on the demographic survey served as the recruitment tool for Phase II, asking participants if they met the criteria as a mother who is a trainer of school or clinical psychology and would be interested in participating in a semistructured interview.

Depression Anxiety and Stress Scale

Each participant completed a quantitative survey describing her symptoms of depression, anxiety, and stress over the past week. The assessment instrument used was the Depression Anxiety and Stress Scale (DASS-21; see Appendix B). The scale's authors reduced the symptom overlap between the subscales to measure the unique symptoms of each state (Lovibond & Lovibond, 1995). On the DASS, participants rated the presence and severity of negative emotions using a 4-point Likert-type scale ranging from 0 (*did not apply to me at all*) to 3 (*applied to me very much/most of the time*), with higher scores indicating worse symptoms. The DASS depression scale shows high convergent validity with the Beck Depression Inventory ($r = .74$), and the anxiety scale is convergent with the Beck Anxiety Inventory ($r = .81$). The subscales have high internal

consistency, with a Cronbach's alpha of .81 for depression, .73 for anxiety, and .81 for stress.

Phase II: Semistructured Interview

Phase II of the study entailed collecting qualitative data from those individuals who expressed interest in participating in a semistructured interview (see Appendix C). The semistructured interview consisted of open-ended questions relating to the daily lived experiences of each participant who identified as both a mother and a trainer of school or clinical psychology. Questions included the following: "As a faculty mother, do you feel welcomed at your university? Why or why not?"; "How do you balance the demands of family and work?"; and "What supports does your university offer you as a faculty mother?"

Procedure

Phase I

Each participant indicated consent through the demographic survey accessed through PsychData (see Appendix D). PsychData is a secure data collection platform that enabled participant confidentiality. The researcher-created survey was an instrument to gather information about work and family life (e.g., hours spent on work, number of children in the home, children's ages, disabilities the child may have, current partner situation, etc.). After completing the demographic portion, participants advanced to the DASS-21 (Lovibond & Lovibond, 1995) to assess their levels of depression, anxiety, and stress. The DASS is a set of three self-report scales designed to measure the negative emotional states of depression, anxiety, and stress. The short version (DASS-21) was

appropriate for this study to minimize the time required from participants. The short version contained seven items per subscale, with participants using a 4-point severity/frequency scale to rate the extent to which they had experienced each emotional state over the past week. The participants answered each question using *never*, *sometimes*, *often*, or *almost always*. Examples of the questions included “I found it hard to wind down,” “I found it difficult to find the initiative to do things,” and “I felt I was close to panic.” On average, participants completed the DASS-21 survey in 15 minutes or less. The researcher extracted each participant’s DASS-21 from PsychData, placed the file into an Excel spreadsheet, and then scored the responses utilizing the DASS-21 scoring manual. Linking the scores to each participant’s unique identification number assisted with the qualitative portion of the phase, which utilized thematic analysis for the open-ended question at the end of the demographic survey.

Phase II

The question at the end of the demographic questionnaire served as a recruitment tool for Phase II. Participants were to indicate if they met the criteria of being both a mother and a trainer of clinical or school psychology and if they would be willing to participate in a semistructured, recorded interview to discuss their lived experiences navigating academia and motherhood. The participants who indicated interest were directed to a consent form in PsychData (see Appendix E) for Phase II of the study. Once the respondents indicated consent, the researcher placed the interested participants’ unique IDs into a random number generator and selected 13 participants.

The researcher sent a scripted email to each participant for Phase II (see Appendix F) that explained the semistructured interview process, including information regarding using Zoom as the platform to connect with each participant and record the interview for transcription. Included in the email were three available dates and times for the participants to schedule their Zoom interview with the researcher. The participants were aware of their rights, possible risks, and potential benefits prior to taking part in the study.

Each interview lasted approximately 45 minutes and the participants had the choice to have their video on or off. A semistructured interview was the data collection instrument for this phase of the study. If participants showed reluctance in answering the questions or did not provide enough information, appropriate prompts were ways to gain additional information (e.g., “Tell me more”; “Please give me some examples”; “Would you like to add anything else?”).

Analytic Plan – Phase I

The data from Phase I underwent cleaning and uploading into SPSS. Checking the assumptions occurred before performing the analyses. The results from the DASS-21 survey were the data used to compare the two groups of participants (e.g., nonmothers/mothers and clinical psychologists/school psychologists) using two multivariate analyses of variances (MANOVA) to determine if there was a statistically significant difference between the groups. The open-ended question at the end of the demographic survey underwent analysis using Kriukow’s (2020) thematic analysis, separating the responses into overarching themes and subthemes. This approach was

beneficial to investigate how female trainers in clinical and school psychology programs, in general, view their abilities to navigate academia as a woman. The researcher transcribed the responses into Microsoft Word and separated the data into themes to determine if these responses were similar to the Phase II participants.

Analytic Plan – Phase II

Although transcription software is available, its interpretation is not always correct. Therefore, the researcher elected to transcribe each interview recording into a Microsoft Word document manually. The researcher then read through the transcripts, first for content and then for organizing the data. Anderson (2014) suggested studying and reducing the text by examining the participants' transcribed responses and marking the passages of interest with brackets. This procedure is consistent with Seidman's (2013) process of identifying meaningful chunks of text, making a judgment as to what is significant in the transcript. The next step in data analysis was creating themes and profiles. Sorting full transcripts into statements of interest reduced them to categorizable forms. A third read of the transcripts allowed the identification of dominant themes, with the data then grouped according to meaning, using a phenomenological approach to identify themes (Creswell, 1998; Kriukow, 2020). Coding the interviews entailed thematic analysis, breaking each participant's responses into major themes and subthemes (Kriukow, 2020). Upon establishing themes, the researcher was able to link each interview script and its thematic analysis to the participants' DASS-21 scores to further explore their emotional wellbeing as reflected on the DASS-21.

Trustworthiness

Qualitative research must meet the trustworthiness criteria of credibility, transferability, dependability, and confirmability (Anderson & Holloway-Libell, 2014). These four areas are comparable to the concepts of internal validity, external validity, reliability, and objectivity in quantitative research (Marshall & Rossman, 1995).

Credibility

For research to be credible, the researcher must accurately describe the respondents (Marshall & Rossman, 1995). Qualitative credibility is similar to quantitative internal validity. To achieve credibility, researchers must provide in-depth descriptions, illuminating the complexities in such detail that the findings “cannot help but be valid” (Marshall & Rossman, 1995, p. 143). To achieve credibility, the researcher verified answers with respondents throughout the interview process, ensuring understanding and correct interpretation.

Transferability

Qualitative research findings’ transferability, or generalizability to populations other than those studied, often proves problematic. A lack of transferability—comparable to external validity in quantitative research—is a perceived weakness in qualitative research (Anderson & Holloway-Libell, 2014). The researcher utilized rich, thick descriptions (see Creswell, 1998) of the interview responses to allow the participants’ words to reveal whether the findings were transferable to other settings. Quotes from the transcribed data supported emerging themes.

Dependability

Dependability is the third criterion for trustworthiness in qualitative research (Anderson & Holloway-Libell, 2014). The researcher addressed dependability by accounting for changes in conditions and design using accurate and appropriate documentation throughout the data collection process. The researcher served as a human research instrument (Anderson & Holloway-Libell, 2014), clarifying any preconceived beliefs or biases that could ultimately impact the interpretations and approach to the study.

Confirmability

The final concept of trustworthiness, confirmability is specific to the objectivity of the overall findings. The researcher repeatedly reviewed emerging themes and the meanings attached to them prior to finalizing the results. Reviews occurred on different days with clean transcripts to ensure the emergence of consistent themes. Additionally, researchers (Anderson & Holloway-Libell, 2014; Creswell, 1998) have suggested enlisting a second transcript reader to ensure the discovery of similar themes and subthemes. A graduate student from Texas Woman's University with qualitative research experience read the participants' transcripts, with broad themes and subthemes agreed upon before final data analysis.

Summary

A purposive sample of 85 women who are trainers of clinical or school psychology completed a demographic survey and the DASS-21 to evaluate their overall wellbeing as a female in academia. Additionally, 13 women who are trainers of clinical

or school psychology and mothers took part in a semistructured interview regarding their ability to navigate multiple roles as a trainer and a mother while maintaining their overall wellbeing. All participants were aware of their rights and the purpose of the study. The researcher reviewed the transcripts of participants' Zoom interviews to identify dominant themes and draw conclusions from all data collected. The following research questions and hypotheses guided the study.

Research Questions

Research Question 1: Do women who are mothers in academia experience greater levels of depression, anxiety, and stress compared to women in academia who are not mothers?

Hypothesis 1: Women who are mothers and trainers of psychology experience higher levels of depression, anxiety, and stress than women who are not mothers and trainers of psychology.

Research Question 2: Is there a difference in levels of depression, anxiety, and stress between female trainers of school and clinical psychology?

Hypothesis 2: Women who are trainers of school psychology will have higher levels of depression, anxiety, and stress compared to female clinical psychology trainers.

Research Question 3: How do women in academia who are mothers and trainers of psychology describe their experiences of multiple professional and family roles?

Hypothesis 3: Women who are mothers and/or trainers of psychology will describe their experiences in academia as having a negative impact on their multiple roles.

Research Question 4: How do women in academia who are mothers and trainers of psychology perceive their roles impacting their overall sense of wellbeing?

Hypothesis 4: Women in academia who are mothers and trainers of psychology will describe having a low sense of wellbeing in both roles due to the large number of barriers they face.

To further explore the participants lived experiences, the three subquestions were:

4a. To what extent do these women feel able to navigate their various professional and family roles?

Hypothesis 4A: Women in academia who are mothers and trainers of psychology will describe difficulties navigating both their professional and family roles that impeded their perception of success.

4b: What influences the abilities of women who are both mothers and female trainers of school or clinical psychology to overcome the barriers they face?

Hypothesis 4B: Women in academia who are mothers and trainers of psychology will indicate family structure as a benefit in overcoming barriers.

4c: What factors or strategies do these women find helpful in managing their various roles and overcoming the barriers they face in academia?

Hypothesis 4C: Women in academia who are mothers and trainers of psychology will indicate numerous sources of support and resources as being helpful in managing their multiple roles and assisting them in overcoming the barriers they face in academia.

CHAPTER IV

RESULTS

The presentation of this study's results appears in three sections for clarity. First are the results from Phase I, which answer the hypotheses relating to the differences in DASS-21 scores between the two groups (e.g., mothers/nonmothers and clinical/school psychologists). Second is the findings from the qualitative analysis of the open-ended questions on the demographic survey. Finally, there is a presentation of the qualitative analysis, including the themes that emerged from the Phase II semistructured interviews, which provided answers to the final four research questions and hypotheses.

The purpose of this study was to explore the perceptions of women who are trainers and mothers of psychology and their ability to maintain their overall wellbeing while navigating the rigorous demands of multiple roles. This chapter includes a description of the sample and participants, the quantitative results identifying their perceived self-reported emotional wellbeing, and the themes that emerged from the data analysis. Chapter IV concludes with a summary of the findings.

Differences in DASS-21 Between Groups

Research Question 1: Do women who are mothers in academia experience greater levels of depression, anxiety, and stress compared to women in academia who are not mothers?

Hypothesis 1: Women who are mothers and trainers of psychology experience higher levels of depression, anxiety, and stress than women who are not mothers and trainers of psychology.

A MANOVA was the statistic used to understand the impact motherhood and academia had on the participants' reported DASS-21 scores. Using Wilk's statistic, the researcher discovered there was not a significant effect of being a mother and an academic on participants' reported perceptions of stress, anxiety, and depression, $\Lambda = .94$, $F(3, 81) = 1.60$, $p > .05$ (see Table 1).

A MANOVA was the statistic used to understand the intersectionality of being a mother and trainer type. Using Wilk's statistic, the researcher discovered there was not a significant effect of being a mother and trainer type on participants' reported perceptions of stress, anxiety, and depression, $\Lambda = .90$, $F(2, 77) = .119$, $p > .05$ (see Table 2).

Research Question 2: Is there a difference in levels of depression, anxiety, and stress between female trainers of school and clinical psychology?

Hypothesis 2: Women who are trainers of school psychology will have higher levels of depression, anxiety, and stress compared to female clinical psychology trainers.

A MANOVA was the statistic used to understand differences between clinical and school psychology trainers' DASS-21 scores. Using Wilk's statistic, the researcher discovered there was not a significant effect of training type on participants' reported perceptions of stress, anxiety, and depression, $\Lambda = 1.00$, $F(3, 81) = .121$, $p > .05$ (see Table 3).

Table 1*Differences in DASS-21 Scores Between Mothers and Nonmothers*

	Value	<i>F</i>	Hypothesis <i>df</i>	Error <i>df</i>	<i>p</i>
Wilks' lambda	0.94	1.60	3.0	81	0.198

Table 2

Differences in DASS-21 Scores Between Trainers Who Are Mothers of Clinical and School Psychology

	Value	<i>F</i>	Hypothesis <i>df</i>	Error <i>df</i>	<i>p</i>
Wilks' lambda	0.90	0.119	2.0	77	0.89

Table 3*Differences in DASS-21 Scores Between Trainers of Clinical and School Psychology*

	Value	<i>F</i>	Hypothesis <i>df</i>	Error <i>df</i>	<i>p</i>
Wilks' lambda	1.00	0.121	3	81	0.95

Phase I: Open-Ended Question

The following data collected during Phase I were responses to open-ended questions at the end of the demographic survey. The information underwent thematic analysis by transferring the text responses to a Microsoft Word document. Upon transferring the responses to the document, the researcher analyzed each participant's answer by underlining, bracketing, and highlighting key information that assisted in answering the research question. The researcher noted potential broad themes,

categorizing those identified as salient, recurring ideas and patterns into subthemes.

Participants responded to the following questions:

- How would you describe your work-life balance as a trainer of psychology?
- Has COVID-19 impacted your ability to maintain your overall wellbeing? (i.e., Do you feel as though you are able to meet the demands your job requires?)
- What types of self-care activities if any do you participate in? Do you find them to be beneficial?
- Would you consider yourself to be successful? Why or why not?)

The organization of the overall theme and subthemes was in alignment with the following research question.

Research Question 3: How do women in academia who are mothers and trainers of psychology describe their experiences of multiple professional and family roles?

Hypothesis 3: Women who are mothers and/or trainers of psychology will describe their experiences in academia as having a negative impact on their multiple roles.

Eighty-five participants, both mothers and nonmothers, responded to a request to describe their experiences with multiple professional and/or family roles. The first theme that emerged from the data was their perceived quality of life (see Table 4). These women related their direct experiences of being a woman in academia to their current quality of life. Women in academia who are trainers of clinical or school psychology

described their experiences, with the descriptions subsequently categorized as negative, positive, and neutral. Thirty-seven experiences were negative based on the participants' language (e.g., "impossible," "difficult," "not good"), with 28 experiences described as positive (e.g., "great," "great amount of success," "supportive") and 20 described as neutral (e.g., "ebbs and flows," "taken in stride," "fluctuates"). The excerpts chosen for this phase were reflective of the following demographics: clinical psychologists ($n = 4$), school psychologists ($n = 5$), married ($n = 6$), single ($n = 1$), divorced ($n = 2$), mother ($n = 5$), nonmother ($n = 4$), tenure ($n = 3$), and nontenure ($n = 6$). The researcher added each participant's DASS-21 scores below her response. For the DASS-21, the descriptors used were:

- Depression: normal 0–9; mild 10–13; moderate 14–20; severe 21–27; extremely severe 28+
- Anxiety: normal 0–7; mild 8–9; moderate 10–14; severe 15–19; extremely severe 20+
- Stress: normal 0–14, mild 15–18, moderate 19–25, severe 26–33, extremely severe 34+

Table 4

Terms to Describe Perceived Quality of Life

Negative	Positive	Neutral
Impossible (16)	Great (11)	Decent (9)
Difficult (18)	Good (7)	Depends (6)
Unbearable (2)	Able (6)	Okay (12)
Unreasonable (5)	Balanced (2)	Average (5)
Tough (7)	Nice (3)	
Challenging (8)	Manageable (1)	

Note: Values listed are the frequency of mentions of these or similar term.

The following quotes are examples of participant responses used to assist in understanding the perceptions of women who are trainers of school or clinical psychology about their experiences in academia.

Theme 1: Perceived Quality of Life

Negative Perception

One perception was having an overall negative experience being a female trainer of school or clinical psychology. These experiences indicated various levels of difficulty and conflict throughout the participants' careers in academia. These experiences were related to administrative changes within their university, feelings of rejection based on their gender, and the overall impact of COVID-19 and the strain it added to their workloads. The participants who fit into this category utilized recurring language that was negative in tone. These participants generally described the work environment as nonsupportive and felt it was difficult to meet the demands placed on them. The female trainers in this category shared perceptions of their experiences as shown in the following excerpts:

One participant stated, “Since the pandemic began, it is impossible to find work-life balance. No one really knows what it has been like to have both kids home 24/7 for over a year while balancing full-time work.”

Another participant reported, “I don’t know what self-care means anymore. Work-life balance is hard. Academia makes juggling time difficult, at least in my experience. You have a lot of autonomy, but you also have a lot to do.”

A third participant stated,

My work-life balance is not good. My only time for self-care is when my daughter is sleeping. As far as life at the university goes, I feel gender bias, even before I was a parent. I find myself afraid to ask for accommodations for fear of rejection.

Positive Perception

The second perception type conveyed by the participants was having an overall positive experience being a female trainer of school or clinical psychology. These experiences indicated various levels of support and encouragement throughout participants’ careers in academia and included supportive directors, colleges with a strong female presence, and supportive family members. The participants in this category utilized recurring language that was positive in tone. These participants generally described their work and home environments as supportive, which assisted them in managing multiple responsibilities. The female trainers in this category described their perceptions of their experiences in the following examples:

One participant stated, “I feel as though I am able to meet the demands of my job, but largely because I have tenure already. I am consistent with my work hours. In terms of self-care, I watch a fair amount of TV.”

The next participant added, “My work-life balance is dictated by the needs of my relationship and wellbeing. Although I am able to complete all the required activities for my position, I am not always able to take on additional tasks.”

Another participant said, “My work-life balance is pretty good. Having young children and working full-time does not leave much time for me, but I enjoy reading. I am lucky to have a great deal of family support.”

Neutral Perception

The final categorization of participants’ perceptions was having a neutral experience being a female trainer of school or clinical psychology. These experiences indicated situations that were often dependent on the time of year or semester they described. Participants’ experiences were related to the timelines for tenure and promotion and the amount of service and research to which they had committed. The participants who fit into this category utilized recurring language that was neutral in tone. These participants generally described their experiences as changing quickly from one day to the next. The female trainers in this category described their perceptions of their experiences as follows.

One participant stated, “I believe I am able to meet the demands of my job most of the time. At times, it comes at a personal cost, but I engage in self-care, but not always on a daily basis.”

Another participant added, “I find that my work-life balance ebbs and flows depending on the time of year and our accreditation cycle. I use exercise, reading, and spiritual activities to maintain my mental health.”

A third participant responded, “It’s difficult to be efficient in all the roles at all times; work is OK, but my time is somewhat limited. I guess it depends on what is happening at the time. Self-care takes place, but it’s minimal.”

Phase I: Results of DASS-21

Each participant in Phase I completed the DASS-21 survey to assess her perceived levels of depression, anxiety, and stress. After scoring the individual DASS-21 responses according to the DASS-21 manual, the researcher calculated the levels of depression, anxiety, and stress for all 85 respondents. Reported depression levels ranged from 17.8 to 25.3, which placed participants in the Moderate to Severe range. Reported anxiety levels ranged from 15.9 to 21, which placed participants in the Severe to Extremely Severe range. Finally, reported stress levels ranged from 22.8 to 33.7, which placed participants in the Moderate to Severe range. The thematic analysis of the participants’ responses indicated positive, negative, and neutral experiences, which reflected the DASS-21 scores. Of note, the DASS-21 is not used as a diagnostic tool but as an indicator that respondents are experiencing certain levels of these constructs at this time in their lives (Lovibond & Lovibond, 1995).

Phase 2: Semistructured Interviews

Phase II of the study was a qualitative exploration using a phenomenological approach to delineate common themes that better explained the lived experiences of

women who are trainers of clinical or school psychology and identify as mothers. In Phase II of the study, the researcher was most interested in how women who are mothers in academia balance their overall wellbeing while navigating multiple roles.

Descriptions of Participants

Thirteen mothers who are trainers of school or clinical psychology in an accredited American Psychological Association program participated in this phase of the study. To meet the criteria for Phase II, the participants had to be mothers with a child or children aged 18 years or younger living with them at least half the calendar year and be a trainer of school or clinical psychology. Respondent recruitment occurred during Phase I, after participants completed the demographic survey. A convenience sampling method was appropriate for Phase II. In Phase II, the researcher collected various descriptive information. Regarding self-reported ethnicity, 77% identified as Caucasian/White ($n = 10$), 7.7% as Hispanic/Latina ($n = 1$), and 15.4% as African American ($n = 2$). The age range for Phase II participants was 30 to 44 years ($M = 38.1$, $SD = 7.3$). Classifications, or positions, reported by the participants in Phase II were 31% full professor with tenure ($n = 4$), 38.5% associate professor ($n = 5$), 23% assistant professor ($n = 3$), and 8% instructor ($n = 1$). Participants' self-reported tenure status was 38.5% tenured ($n = 5$) and 62% nontenured ($n = 8$). Participants' marital status was 85% married ($n = 11$) and 15.4% divorced ($n = 2$). Finally, participants' children ranged in age from 2 months to 16 years.

Findings

The researcher transcribed the audio-recorded interviews into a Word document and read through them repeatedly to identify themes. The first reading was for content

and the second reading was for organizing the collected data. The transcripts underwent review and reduction by exploring the transcribed participant responses and noting information applicable to the study. Potential themes emerged, marked as such. Each passage then underwent categorization and organization according to the themes. The researcher organized the themes to correspond with the research questions (see Table 5).

Table 5

Mothers in Academia Research Questions and Corresponding Theme

Research Question	Theme
1. How do women in academia who are mothers and trainers of school or clinical psychology perceive their roles impacting their overall sense of wellbeing?	Theme 2: Perception of overall wellbeing <ul style="list-style-type: none"> • Subtheme: Positive • Subtheme: Negative • Subtheme: Neutral
2. To what extent do these women feel able to navigate their various family and professional roles?	Theme 3: Perception of success <ul style="list-style-type: none"> • Subtheme: Successful • Subtheme: Nonsuccessful
3. To what extent do these women feel able to navigate their various family and professional roles?	Theme 4: Impact of support <ul style="list-style-type: none"> • Subtheme: Negative • Subtheme: Positive Theme 5: Types of support <ul style="list-style-type: none"> • Subtheme: Social support • Subtheme: Environmental factors

Theme 2: Perception of Overall Wellbeing

Research Question 4: How do women in academia who are mothers and trainers of psychology perceive their roles impacting their overall sense of wellbeing?

Hypothesis 4: Women in academia who are mothers and trainers of psychology will describe having a low sense of wellbeing in both roles due to the large number of barriers they face.

Thirteen participants described how they perceived their multiple roles impacting their overall sense of wellbeing. The women presented their perceptions of wellbeing, with the descriptions subsequently categorized into three categories: positive, negative, and neutral. Four respondents perceived their wellbeing as positive based on the language utilized in the interview (e.g., “I’m happy where I am,” “great experience,” “well balanced,” “content”). Six respondents perceived their wellbeing as being negatively impacted, as shown in the language they used (e.g., “chaotic,” “constantly stressed,” “overwhelmed,” “expectations too high”). Finally, three respondents were noncommittal, utilizing language that was neutral in tone to describe their wellbeing while navigating multiple roles (e.g., “depends,” “ebbs and flows,” “variable”).

Table 6

Terms to Describe Perceived Overall Wellbeing

Negative	Positive	Neutral
Chaotic (4)	Happy (2)	Variable (3)
Stressed (3)	Great (1)	Ebbs and flows (4)
Overwhelmed (5)	Well balanced (3)	Depends (2)
Expectations too high (3)	Content (1)	

Note: Values listed are the frequency of mentions of these or similar terms.

Positive Perception of Wellbeing

The first subtheme that emerged surrounding the participants’ perception of their overall wellbeing was described in positive terms. Participants revealed multiple positive

experiences, leading them to gauge their wellbeing as sufficient. These experiences were related to flexibility within the job, policies that support parents, and a level of work that did not exceed their abilities. The participants fitting into this category utilized recurring language that was positive in tone. These participants generally described the work environment as supportive, which assisted them in having time to focus on self-care to manage their wellbeing. The female trainers who are mothers in this category described their perception of their experiences as shown in the following excerpts.

One participant responded, “I’m lucky, I guess, because I see some of my colleagues struggling, but I feel as though I am on top of it. I also achieved tenure prior to having children. I love the flexibility of academia.”

Another participant added, “My wellbeing is how I judge when I’ve had enough of something. I’ll pull away from saying ‘yes’ so much and keep going. I would describe my experience overall as well-balanced between juggling the demands of motherhood and academia.”

A third participant stated, “I am happy with what I have accomplished and content in my career and my home life. My children are a little older, and I gained tenure before having my second one, so that helps. My workload is manageable.”

Negative Perception of Wellbeing

The second subtheme that emerged surrounding the participants’ perceptions of their overall wellbeing was explained in negative terms. These participants revealed multiple negative experiences that affected them. These experiences were related to feelings of isolation, ambiguity surrounding university administrative policies, and a lack

of departmental support. The participants who fit into this category utilized recurring language that was negative in tone. These women described the work environment as difficult to manage, which led to a lack of focus on self-care. The female trainers who are mothers in this category described their perceptions of their experiences as in the following excerpts.

One participant stated, “It may just be me, but I think that is an impossible task in the line of work we are in. The expectations to research, publish, teach, and mentor are extremely high. I’m overwhelmed 90% of the time.”

Another participant said, “After 12 years, I still have not found a groove. I feel pulled in every direction most days. My days are chaotic, and it doesn’t seem to be getting better. I used to be a runner; not anymore.”

Another participant responded, “Over time, climates have changed where expectations are getting higher. I do feel like I put people off by setting boundaries. One of my colleagues decided to only have one child to not interfere with their work and career trajectory.”

Neutral Perception of Wellbeing

The final subtheme that emerged surrounding the participants’ perceptions of their overall wellbeing was utilized neutral terms and language. The participants shared varying experiences that were neither good nor bad. The experiences were related to the participants’ workload and the amount of research required for their university. The participants who fit into this category utilized recurring language that was neutral in tone. These participants discussed how experiences would often fluctuate from one semester to

the next. The female trainers who are mothers in this category described their perception of their experiences, as indicated in the following excerpts.

For example, one participant stated, “My wellbeing changes based on what I am working on. If I have a hard deadline, my focus is there. But that’s not always the case, so sometimes I have time for me. I guess it fluctuates.”

Another participant added, “I tend to go with the flow of work. Some days are busier than others. For the most part, I would say my productivity varies, which means my self-care varies.”

Theme 3: Perception of Success

Research Question 4a: To what extent do these women feel able to navigate their various professional and family roles?

Hypothesis 4A: Women in academia who are mothers and trainers of psychology will describe difficulties navigating both their professional and family roles that impeded their perception of success.

Thirteen participants responded to requests describe to what extent they felt able to navigate their various roles as a mother and a trainer of school or clinical psychology. The women described their experiences navigating these roles, with the descriptions then categorized into two categories: successful and unsuccessful. Six respondents perceived themselves as being successful in navigating both their professional and personal lives as a mother based on their language (e.g., “accomplished,” “achievements,” “effective,” “feeling competent”). Seven respondents shared perceiving themselves as being

unsuccessful based on their language use (e.g., “unproductive,” “ineffective,” “failing,” “lack of confidence,” “resentful”; see Table 7).

Table 7

Terms to Describe Perceived Success

Successful	Unsuccessful
Accomplished (2)	Unproductive (7)
Effective (2)	Inefficient (2)
Competent (2)	Failure (4)
Achievements (3)	Resentful (1)

Note: Values listed are the frequency of mentions of these or similar terms.

Perceived Feelings: Success

The first subtheme that emerged surrounding the participants’ perceived ability to navigate their various roles as a mother and trainer of school or clinical psychology was the idea of success. These experiences revealed multiple descriptors indicating that participants feel successful navigating being in academia while being a mother. The experiences were related to accomplishing large tasks, having extra time for family-related activities, and accolades received throughout their career. The participants who fit into this category utilized recurring language that reflected this construct. The experiences of the female trainers who are mothers in this category included the following excerpts.

One participant reported, “I have accomplished quite a bit, even after having my children. I am a director now, so that is quite an accomplishment. But I have also felt very comfortable asking for help.”

Another respondent answered, “Over the years, I have been able to reflect on my success. Sometimes I don’t realize it, but at the end of the day, I am effective as a mom while teaching future practitioners.”

Another participant added, “Success is so ambiguous. My success will look different from the next person. But, for me, I feel successful. My family is happy, my students are happy, and that matters to me.”

Perceived Feelings: Lack of Success

The second subtheme that emerged surrounding the participants’ perceived ability to navigate their various roles as a mother and trainer of school or clinical psychology was a perceived lack of success in one or both environments. Participants used multiple descriptors showing that they lacked feelings of success navigating both academia and motherhood. These experiences were related to time management, criticism from peers, and feelings of inadequacy throughout their careers. The participants who fit into this category utilized language consistent with these feelings. The experiences of the female trainers who are mothers in this category included those shared in the following excerpts.

One participant responded, “I feel as though I am drowning. There is never enough time to get things done. I make lists and try to stay on top, but I’m just completely ineffective these days. The same goes for home; nothing’s right.”

Another participant stated, “The number of responsibilities I have is unmanageable. I’m consistently late with everything: timelines, picking up my children. I would say I am really struggling with being good as both a mom and a professional.”

Another respondent said, “As a faculty member and a parent, it always feels like I am less than, as if I should be doing more at work and at home. I feel judgment from society and colleagues.”

Theme 4: Impact of Support

Research Question 4b: What influences the abilities of women who are both mothers and female trainers of school or clinical psychology to overcome the barriers they face?

Hypothesis 4B: Women in academia who are mothers and trainers of psychology will indicate family structure as a benefit in overcoming barriers.

Thirteen participants discussed what influences their ability to overcome the barriers they face as a mother who is also a trainer of school or clinical psychology. The women described their experiences and discussed the impact and type of supports they received. These descriptions fell into two categories: positive and negative. Five respondents endorsed helpful supports they have in place as indicated by keywords in their descriptions (e.g., “grateful,” “supportive,” “understanding,” “empathetic”). Eight respondents identified a negative association with supports not in place, as indicated by keywords used in their descriptions (e.g., “alone,” “isolation,” “uncaring,” “bothersome,” “indifferent”; see Table 8).

Table 8

Terms to Describe Perceived Support

Positive	Negative
Grateful (2)	Uncaring (6)
Supportive (4)	Indifferent (2)
Understanding (5)	Bothersome (3)
Empathetic (2)	Isolated (5)

Note: Values listed are the frequency of mentions of these or similar terms.

Positive Perception of Support

The first subtheme that emerged surrounding the participants' perceptions of the type of supports they receive was described in positive terms. The participants revealed multiple positive experiences that assisted them. These experiences were related to feelings of being heard and seen, feelings of appreciation, and validation for their work. The participants who fit into this category utilized recurring language that was positive in tone when describing their perceived supports. These participants identified numerous factors having a positive effect on their overall wellbeing. The female trainers who are mothers in this category described their perception of their experiences as shown in the following excerpts.

One participant described, "I'm grateful for my partner. He is amazing and gets what I need to do to make it work. He always has my back and helps me see the big picture."

Another participant added, "My university is really family-friendly and empathetic to our needs. At home, I'm able to concentrate on home because I have so much flexibility with work."

Another respondent said, “It’s nice to have your feelings validated. It shows the amount of support people are willing to give. It makes my life easier for sure.”

Negative Perception of Support

The second subtheme that emerged surrounding the participants’ perception of the type of supports they received was described in negative terms. The responses indicated multiple negative experiences that affected the participants. These experiences were related to feelings of being misunderstood as a mother and academic, isolation, and concern with self-advocating for fear of repercussion. The participants who fit into this category utilized recurring language that was negative in tone when describing their perceived supports. These participants described numerous factors having a negative effect on their wellbeing, causing stress and anxiety. The female trainers who are mothers in this category described their perception of their experiences, with some of their words in the following excerpts.

One participant stated, “Better support at home and at work would decrease my anxiety. I just cover it and push through; some days are difficult. My partner appears upset when I work at home, but I have no choice.”

Another example was, “I need more support at the university. The constant state of panic does not help. I guess I feel misunderstood the majority of the time. I like my job, but I love my family.”

Another participant explained, “My director says she has an open-door policy [but] I feel like a bother asking for accommodations. My daughter has medical problems,

and that makes it hard. My husband doesn't understand why I can't just ask. It's complicated."

Theme 5: Types of Support

Research Question 4C: What factors or strategies do these women find helpful in managing their various roles and overcoming the barriers they face in academia?

Hypothesis 4c: Women in academia who are mothers and trainers of psychology will indicate numerous sources of support and resources as being helpful in managing their multiple roles and assisting them in overcoming the barriers they face in academia.

Thirteen participants volunteered to discuss factors and strategies helpful in overcoming barriers as a mother who is also a trainer of school or clinical psychology. Building upon the impact of supports, the women elaborated on the types of supports they deemed beneficial in overcoming the barriers they faced as both a mother and a trainer of school or clinical psychology. The women described their experiences and discussed the variety of supports they received. These descriptions fell into two categories: social supports and environmental factors offering support. Nine respondents endorsed social supports they have in place, indicated by keywords utilized in their descriptions (e.g., "family," "church," "cohorts," "partners"). Four respondents identified environmental factors that offer support, indicated by keywords utilized in their descriptions (e.g., "commute," "flexibility," "administration," "university setting"; see Table 9).

Table 9

Terms to Describe Types of Support

Social	Environmental
Family (7)	Flexible schedule (6)
Religious affiliation (2)	Commute (2)
Cohort (3)	University setting (7)
Partner (8)	Administration/director (6)

Note: Values listed are the frequency of mentions of these or similar terms.

Social Support

The first subtheme that emerged surrounding the impact and types of supports participants received was varying types of social supports. The women’s descriptions included feelings of being supported socially as a mother and academic. Some of these descriptions included familial support as well as support at the university level. The participants who fit into this category utilized recurring language that was inclusive of societal acceptance as a working mother. These participants described numerous factors having a strong impact on their wellbeing and abilities to overcome the barriers they face. The female trainers who are mothers in this category described their perception of their experiences as shown in the following excerpts.

One participant stated, “I lean on my cohort of mothers that I work with in my department. We all face the same trials, so it’s nice to know I am not alone. I also have moms outside the university with whom I socialize.”

Another participant added, “If it weren’t for my in-laws, I would be stuck. They help pick up so much slack when my husband and I just can’t be present.”

A third participant explained, “My husband works from home, so I don’t really have a lot of responsibilities once I’m there. I get to be Mom when I’m home and not Professor Mom. If I need to stay late, he supports that.”

Environmental Factors Offering Support

The second subtheme that emerged surrounding the impact and types of supports received was environmental factors that offer support. Some of these descriptions included greater societal support based on the environment in which the women were involved. The participants who fit into this category utilized recurring language elaborating on the benefits of specific environments that offered acceptance as a working mother. These participants discussed numerous factors having an impact on their wellbeing and abilities to overcome the barriers they face. The female trainers who are mothers in this category described their perception of their experiences, as shown in the following excerpts.

One participant said, “The university I am in now is very different from my prior university. I decided to go part-time based off home responsibilities and it was very well accepted. My other university would never have supported that.”

Another respondent stated, “My kids’ daycare, believe it or not, is so great. They know to call my partner, which allows me to get my work done. Society is changing and understanding that dads can be parents, too.”

Another participant shared, “My commute to work is about 15 minutes, which saves time and lets me do school drop-offs without being late to work. I’m close to home, so if I need to run by, I can.”

Finally, a participant related, “The college is big on diversity. Even in the written communication in our mission statement, I can see it. It’s not just geared toward students but faculty as well. And being a mother is diverse.”

Phase II: Results of DASS-21

Each participant in Phase II completed the DASS-21 survey to assess her perceived levels of depression, anxiety, and stress. After scoring the individual DASS-21 responses according to the DASS-21 manual, the researcher calculated the levels of depression, anxiety, and stress for all 13 participants who completed the interview. Reported depression levels ranged from 14 to 25.3, which placed participants in the Moderate to Severe range. Reported anxiety levels ranged from 20.9 to 24, which placed participants in the Extremely Severe range. Reported stress levels ranged from 16 to 33.7, which placed participants in the Mild to Severe range. These scores are apparent in the thematic analysis of the participants’ responses, which included a variety of positive, negative, and neutral responses as well as perceived supports that assist in overcoming barriers of academia as a mother. It should be noted that the DASS-21 is not used as a diagnostic tool but as an indicator that respondents are experiencing certain levels of these constructs at this time in their lives (Lovibond & Lovibond, 1995).

Summary

Phase I

Eighty-five women in academia, both mothers and nonmothers, who were trainers of school or clinical psychology completed a demographic questionnaire and a measure (DASS-21; Lovibond & Lovibond, 1995) used as a tool to gauge their current levels of

depression, anxiety, and stress. The study was an attempt to determine if there was a significant difference between the participants' current levels of depression, anxiety, and stress. The results from the DASS-21 survey indicated that there was no significant difference between the two groups investigated: school psychologists/clinical psychologists and mothers/nonmothers.

The demographic questionnaire provided an opportunity for the researcher to gather a qualitative description of how participants described their experiences of navigating multiple professional and family roles with the following question:

- How would you describe your work-life balance as a trainer of psychology?
- Has COVID-19 impacted your ability to maintain your overall wellbeing? (i.e., Do you feel as though you are able to meet the demands your job requires?)
- What types of self-care activities if any do you participate in? Do you find them to be beneficial?
- Would you consider yourself to be successful? Why or why not?)

These results underwent thematic analysis, and the broad theme that emerged was the participants' perceived quality of life, subsequently broken down into three subthemes: negative, positive, and neutral. Direct quotes from the participants supported the discussions of the themes.

The researcher analyzed the DASS-21 scores for the group to determine the ranges in which these women were experiencing these emotions. Reported depression

levels ranged from 17.8 to 25.3, which placed participants in the Moderate to Severe range. Reported anxiety levels ranged from 15.9 to 21, which placed participants in the Severe to Extremely Severe range. Reported stress levels ranged from 22.8 to 33.7, which place participants in the Moderate to Severe range.

Phase II

Thirteen participants engaged in semistructured interviews through a recorded Zoom meeting. Phase II was a qualitative exploration using a phenomenological approach to delineate common themes that reflect the lived experiences of women who are both trainers of clinical or school psychology and identify as mothers. Phase II of the study was mostly focused on how women who are mothers in academia balance their overall wellbeing while navigating multiple roles. Four themes emerged in answering the questions “How do women who are mothers and trainers of school or clinical psychology perceive their roles impacting their overall wellbeing?”; “To what extent do these women feel able to navigate their various roles?”; and “What factors or strategies are helpful in overcoming barriers?” The themes received discussion supported by direct quotes from the participants.

The participants’ perception of overall wellbeing was a dominant theme of the interviews. The participants described their perceptions of their wellbeing, with the descriptions categorized into three subthemes: positive, negative, and neutral. Four participants utilized verbiage indicating an overall positive sense of wellbeing, six expressed a negative perception of wellbeing, and three were neutral and neither positive nor negative.

The participants' perception of success was another theme that emerged throughout the interview process. Six participants utilized language indicating they felt successful in both environments, whereas seven participants described multiple experiences of feeling unsuccessful in one or both environments. Through this emerging theme, the participants reported that their feelings had a significant impact on their sense of wellbeing and how they approached their daily lives.

The participants further elaborated that impact of support they received played a large role in how they maintained their wellbeing. The women described two support systems: support in the home setting and support in the university setting. The interviewees further delineated these impacts into two subthemes of positive and negative impacts: Some impacts are beneficial and help the academic, whereas others hinder productivity and motherhood. Five respondents identified impacts that were helpful; eight discussed impacts that were negative in tone.

The final theme discovered through the participant interviews was the types of support received to assist in overcoming the barriers of being both an academic and a mother. This theme had two subthemes, social supports and environmental factors offering support. Social supports included feeling supported at home and within the community; environmental factors included the commute to work or the actual department in which the participants worked.

Finally, the DASS-21 produced the following levels of depression, anxiety, and stress for all 13 participants who completed the interview. Reported depression levels ranged from 14 to 25.3, which placed participants in the Moderate to Severe range.

Reported anxiety levels ranged from 20.9 to 24, which placed participants in the Extremely Severe range. Finally, reported stress levels ranged from 16 to 33.7, which placed participants in the Mild to Severe range. These scores were apparent in the thematic analysis of the participants' responses, which included a variety of positive, negative, and neutral language and perceived supports that assisted in overcoming barriers of academia as a mother.

CHAPTER V

DISCUSSION

This study was an investigation to better understand the lived experiences of women in academia who are trainers of school or clinical psychology. The current study had two phases. Phase I involved exploring levels of depression, anxiety, and stress for all participants. Accompanying Phase I was a phenomenological investigation of each participant's qualitative description of how she navigated multiple professional and family roles. Phase II entailed an in-depth phenomenological analysis for selected female trainers of school or clinical psychology who also identified as mothers. Data collection occurred via a semistructured interview with participants who met the study criteria. Specifically, the findings connected the participants' emotions to their individual experiences in academia while they navigated multiple roles.

This study was an exploration of how female trainers of school or clinical psychology navigate their wellbeing while fulfilling multiple roles. Previous research suggests that combining multiple roles and responsibilities in day-to-day life can often create external and internal conflict, impacting the woman's overall wellbeing (Helgeson, 2012); however, no current research was available to discuss the impact of motherhood on women in academia. Therefore, the researcher hypothesized that women who are mothers and trainers of school or clinical psychology would experience higher levels of depression, anxiety, and stress than women who are not mothers and trainers. Phase I of the study did not indicate a significant relationship between higher levels of distress

(depression, anxiety, or stress) and those trainers who identified as mothers; however, Phase II interviews with trainers of school and clinical psychology who also identify as mothers indicated several themes that add to the existing body of literature.

This mixed methods approach provided quantitative results reflecting participants' views on their current levels of depression, anxiety, and stress. In Phase I, participants completed an online demographic survey, completed the DASS-21, and answered several qualitative questions. The majority of the participants scored in the Severe to Extremely Severe range on the DASS-21 survey, indicating that this group of women in academia had high levels of depression, anxiety, and stress. The qualitative section in Phase I enabled free responses for a rich description of the quantitative results, providing a greater understanding of how women in academia navigate their overall wellbeing under the pressures of multiple responsibilities.

Phase I

Differences in Depression, Anxiety, and Stress for Mothers and Nonmothers

The researcher hypothesized that for Phase I of the study, the participants who identified as mothers would report significantly higher levels of depression, anxiety, and stress than participants who were not mothers. Previous research indicates that mothers face an inordinate amount of stress navigating the roles of ideal worker and ideal mother (Ridgeway & Correll, 2004). The current study revealed that women who choose to work and be mothers receive advice on how to approach their multiple responsibilities while lacking the support they deem necessary to be successful. Based on the social demands and expectations of women who are mothers and employees, the researcher expected to

see higher numbers associated with depression, anxiety, and stress among participants who identified as mothers. However, there was no significant effect of being both a mother and an academic on the participants' self-reported perceptions of depression, anxiety, and stress. Additionally, there was no significance found between mothers and trainers of clinical or school psychology. Overall, both mothers and nonmothers demonstrated similarly higher levels of depression, anxiety, and stress. Based on these results and those of previous studies (e.g., Ortlieb & Weiss, 2018; Westoby et al., 2020), women in academia, both mothers and nonmothers, face gender stereotypes and implicit beliefs, which may account for higher levels of all three constructs investigated in this study.

Finally, the researcher hypothesized that in Phase I of the study, women who were trainers of school psychology would demonstrate higher levels of depression, anxiety, and stress than women who are trainers of clinical psychology programs. Previous research has suggested that school psychologists have higher turnover and burnout rates than clinical psychologists. That assertion is directly related to the idea that school psychologists are a significant part of the public school system; in contrast, clinical psychologists appear to have more autonomy in choosing their work environment. However, the researcher found no significant difference between the two groups of trainers on their self-reported perceptions of depression, anxiety, and stress. All participants reported similarly higher levels of depression, anxiety, and stress. Overall, both sets of professionals share similar experiences.

Perhaps this commonality is due to the distress created by the academic environment and women's experiences in that environment, regardless of the area of study. A lack of adequate funding for mental health services within a university setting is thought to be a contributing factor for higher levels of distress among academics. Similar to findings by Westoby (2020), women, in general, are at a disadvantage when it comes to academia. Gender bias and the roles women undertake at the university level may impact their perceptions of current emotions. Another contributing factor may be that within individual training programs, not all students are required to attend therapy. Therefore, trainers of psychology might never have experienced the benefits of therapy to enhance their overall wellbeing throughout their own training as a practitioner.

Qualitative Analysis From the Demographic Survey

A phenomenological approach was the design utilized for the qualitative portion of this study. Creswell (1998) defined a phenomenological study as describing the meaning of the lived experience. This study was an exploration of the female academics' experiences associated with the phenomenon—in this case, how their overall experience related to their perceived wellbeing as measured by levels of depression, anxiety, and stress.

Giorgi (1971) defined phenomenology as the discipline concerned with understanding the human experience, exploring the meaning of the experience for the individual, and connecting the experience to the everyday world. Taylor and Bogdan (1984) described the phenomenologist as examining the phenomena from the

participants' perspectives. The current study provided the lived experiences of women and mothers in academia who are trainers of school or clinical psychology.

Theme 1

Eighty-five women in academia, both mothers and nonmothers, who were trainers of school or clinical psychology provided a qualitative description of their experiences navigating multiple professional and family roles by answering the following question:

- How would you describe your work-life balance as a trainer of psychology?
- Has COVID-19 impacted your ability to maintain your overall wellbeing? (i.e., Do you feel as though you are able to meet the demands your job requires?)
- What types of self-care activities if any do you participate in? Do you find them to be beneficial?
- Would you consider yourself to be successful? Why or why not?)

These results underwent thematic analysis, and the broad theme that emerged was that participants perceived quality of life broken down into three subthemes: negative, positive, and neutral. These themes provided insight into how women in academia who are trainers of school or clinical psychology navigate the multiple roles placed upon them. The women described their lived experience of being a female trainer in school or clinical psychology and how managing multiple roles had impacted their overall wellbeing. These lived experiences served to categorize the participants' perceived quality of life related to their overall wellbeing.

Within the negative perceived quality of life, participants described difficulties with administrative decisions, feelings of rejection based on their gender, and the impact of COVID-19 having a negative effect on their wellbeing. Previous researchers provided similar findings. O'Neil and Bilimoria (2005) discovered that women faced multiple complexities compared to their male colleagues because of the unique experiences of women. Women in academia are often at a disadvantage compared to men regarding the types of employment opportunities they receive (Ginther & Kahn, 2006). In addition to the limited opportunities afforded females in academia, leaders in academia tend to give men a sense of privilege and view their work as being superior (Keller, 1985). Psychological wellbeing is subject to impacts from an individual's levels of positive and negative affect (Anglim et al., 2020). In a systematic review, Moustafa et al. (2020) validated that major life transitions, including complex work environments, increase the risk of depression and anxiety in women. The present study's participants described a negative perception of their overall quality of life within their lived experiences of being a trainer in school or clinical psychology, which directly related to their perceived abilities to navigate multiple professional and family roles and quality of life.

The group of participants in the positive subgroup said their perceived quality of life had a positive effect on their wellbeing due to their colleges' treatment of women and having supportive directors within the university. Previous researchers have noted that external factors (e.g., open-door policies, compassion in the workplace) help the individual thrive and achieve happiness. Relational autonomy, which has shown to positively influence outcomes, is affected by relationships with others as well as social

and employment opportunities (Christman, 2004). These participants described a positive perception of their overall quality of life within their lived experiences of being a trainer in school or clinical psychology, which directly related to their perceived abilities navigating multiple professional and family roles and quality of life.

The participants who fell within the neutral subgroup identified their perceived quality of life as having neither a positive nor negative effect on their wellbeing. These participants described varying experiences that were neither good nor bad. These experiences were related to the participants' perceptions of their workload, the amount of research required for their university, and the overall cyclical nature of academia. Previous research supports that collaborative professional learning environments provide an environment that allows faculty to create lives that are both personally and professionally satisfying, serving as catalysts for productivity within academia (O'Meara et al., 2008). This study's participants described a neutral perception of their overall quality of life within their lived experiences of being a trainer in school or clinical psychology. Their experiences can account for the participants' perceived abilities navigating multiple professional and family roles and quality of life.

Phase II

Interview Qualitative Data

Thirteen women who were both mothers and trainers of school or clinical psychology participated in semistructured interviews to describe how they perceived their multiple roles impacting their overall sense of wellbeing. Using a phenomenological approach, the researcher analyzed the semistructured interview transcripts, finding four

overarching themes: perception of overall wellbeing, perception of success, impact of support, and types of support. Subthemes emerged within these main themes. For perception of overall wellbeing, the subthemes were negative, positive, and neutral. The next theme, perception of success, broke down into successful and lacking success. The third theme, impact of support, produced two subthemes: resulting in a positive impact and a negative impact. The fourth and final theme was types of support, which held the two subthemes of social support and environmental factors offering support.

Theme 2: Perception of Overall Wellbeing

Within the negative perception of overall wellbeing, participants described experiences that revealed feelings of isolation, ambiguity surrounding university policies, insufficient time for self-care, and a lack of departmental support. Generally, the participants described a work environment that was difficult to navigate as a parent, which led to a lack of focus on self-care. These participants had received unsolicited advice regarding family planning and felt that work expectations were becoming unbearable. Mason and Goulden (2002) observed that women in academia who are mothers find themselves more isolated than women who work in other fields. Additionally, social psychologists discovered that these feelings of isolation often produce a pervasive mood of unhappiness (Biernat & Wortman, 2013). Within the same study, the researchers determined that a female in academia who does not feel supported from an administrative level is less likely to advocate for change for fear of exacerbating the problem and polarizing herself even further. Previous studies determined that women in academia often find themselves in a position of being overworked and not allowing

time for personal activities because the societal view of the ideal worker maintains that work is first (Williams, 2015a). The experiences described by the participants support their perceptions of their overall wellbeing as negatively impacting their lives.

Within the positive perception of overall wellbeing, participants described experiences that revealed multiple positive experiences, including flexibility within their jobs, policies at the university level that support parents, and a level of work that is manageable, allowing them to maintain a balance between work and home responsibilities. These participants described a work environment that was supportive, allowing time for self-care and fulfilling responsibilities between both environments. It is crucial for universities to recognize the challenges facing female faculty with children (Ortlieb & Weiss, 2018). With policies in place that support parents (e.g., family-friendly policies, paid leave), faculty members report a much stronger tie to their positions and tend to be more productive (Stinchfield & Trepal, 2010). Women who pursue academic careers face a multitude of challenges balancing the multiple roles they take on (Allan, 2011). With policies in place to protect this marginalized population (i.e., extending the tenure timeline, paid time off, and reduced workloads), the female academic who is also a mother will encounter fewer work-family conflicts stemming from institutional practices. The participants' perceptions of their overall wellbeing were positive based on the welcome resources provided.

Within the neutral perception of overall wellbeing, participants described experiences that were neither good nor bad. The experiences described by participants in the neutral subtheme included the recurring idea that academia tends to fluctuate, the

cycle of work ebbs and flows, and the amount of time spent on self-care is reflective of that cycle. Chinn (2018) reported that viewing time as cyclical provides an opportunity to leverage the amount of productivity individuals can accomplish. Higher education offers a unique experience by viewing this concept as adding to the career trajectory of the individual. When there is extra time in the academic world, mothers often spend this time raising their children, including transporting them to events and activities (Mujic, 2021). Utilizing the short pieces of time in between these duties is key to maintaining a sense of self. The participants within the neutral subtheme described experiences with the ebb and flow of academia, allowing time for multiple responsibilities. As reflected in their individual experiences, these feelings accounted for the women's overall perception of a neutral outlook on their current wellbeing.

Theme 3: Perceptions of Success

From the participants' perception of success, the first subtheme that emerged was one of success. Women who are both mothers and trainers of school or clinical psychology felt they had successfully navigated their multiple roles as a mother and a trainer. The descriptions the participants used were related to completing tasks while having enough time for family-related activities. The participants also appeared to base their determination of success on the accolades they had received throughout their careers. This finding coincides with previous research. Sauermann (2017) found that although people experience the emotion of success in different ways, most link it back to the individual innate urge to further their status while impressing their peers with their abilities, integrating this construct across the multiple roles they hold. The participants in

this category valued the idea of success, measuring it based upon the numerous roles they could fulfill. This measurement accounts for their feelings of being successful at navigating the multiple roles they face daily.

Those participants who perceived themselves as lacking success in one or both environments linked it to time management, peer criticism, and feelings of inadequacy throughout their careers. These women described themselves as less than and ineffective in both their professional and personal lives. Feeling unsuccessful in one or both roles as a mother and an academic contributes to women leaving the professorate (Mason & Goulden, 2002). These feelings and lack of success could exacerbate the shortage of psychology trainers at the university level. There is a lower proportion of women entering the professorate due to their dissatisfaction with workplace conditions, salary discrepancies, and personal reasons, including the demands of being a mother (Sauermann, 2017). These participants' lived experiences accounted for their perception of feeling unsuccessful navigating the roles of academic and mother.

Theme 4: Impact of Support

Throughout the semistructured interview phase, there was a common theme of support. The participants discussed two types of support received throughout their time in academia as a mother. The first had a positive impact. These women felt their colleagues and partners heard them and appreciated the work they were doing. In addition to being heard, the participants felt validated both at home and at work. The predictors of overall maternal wellbeing are directly related to a sense of efficacy as a parent, as influenced by the rigors and demands of being a working mother (Nelson-Coffey et al., 2019). The

women in this study described their wellbeing as good due to the positive impact of the support they received. Sauermann (2017) reported that when the presence of a support system fluctuates, mothers' wellbeing will vary.

Participants described the second impact of support in negative terms. These women revealed the negative impact of not feeling supported and how it affected their abilities to complete the multiple roles they assumed. The descriptions included feelings of being misunderstood as a mother and an academic and a certain level of discomfort self-advocating for themselves for fear of repercussions instead of accommodations. Stanley (2007) determined that developing supports in a collaborative environment should alleviate feelings of isolation. According to O'Meara et al. (2008), a lack of support has a negative impact on the female academic's stress that limits her career potential and advancement.

Theme 5: Types of Support

In addition to the impact of support, participants described the types of support beneficial to them as both mothers and trainers of school or clinical psychology in overcoming the barriers they face. The first subtheme was social supports. The women in the current study described an overall societal acceptance that included familial support, social support, and support at the university level. University-level support meant individuals identified with their situations and like-minded people with whom to socialize, both in and out of the work environment. Whether supervisory or peer-to-peer, mentorship within an academic setting is especially beneficial for women (Erlich et al., 2017). Support at the university level can facilitate a more positive and nurturing

environment, adding a degree of comfort for the female academic who is a mother.

Women with such support are more comfortable discussing professional topics, including tenure and promotion (Mandleco, 2010). Familial support for the working mother can decrease her vulnerability for depression and anxiety (Moustafa et al., 2020).

The participants described environmental support as directly influencing their abilities to navigate being an academic and a mother simultaneously. Some of these influences included the work environment and the women's treatment (e.g., physical space, diversity messages, mission statement), commute to work, and the outside environments with which they interact. Neuroscientists have studied the use of language and how it can positively and negatively affect individuals (Casad et al., 2019). An academic climate can be either chilly or supportive for women, beginning with the offer letter for initial employment. The participants who endorsed the commute to work as being beneficial supports Ortlieb and Weiss's (2018) finding that women consider geographic location when considering employment positions, including the length of commute.

Application of Results

The mixed methods design of the current study provided a quantitative and qualitative outlook on how women in academia navigate their multiple roles while maintaining their overall sense of wellbeing. The quantitative data collected were to assess self-reported levels of depression, anxiety, and stress for 85 female trainers of school ($n = 40$) or clinical ($n = 45$) psychology. Unexpectedly, Phase I revealed that there was not a significant effect of being a mother and an academic on participants' reported

perceptions of depression, anxiety, and stress. Additionally, Phase I showed there was not a significant effect of training type on the participant-reported perceptions of depression, anxiety, and stress. These results were surprising in that previous literature has indicated that school psychologists are under an extreme amount of stress based on the environment in which they work. However, the overall results of the DASS-21 indicated significantly high levels of depression, anxiety, and stress for the majority of participants, findings further supported by the qualitative data collected through semistructured interviews.

The qualitative data came from an open-ended question on the demographic survey and 13 one-on-one semistructured interviews. These findings aligned with the limited previous studies indicating that women in academia who are mothers experience greater difficulty managing their responsibilities than nonmothers and men (Ortlieb & Weiss, 2018). Conclusions regarding the overall wellbeing of mothers in academia who are trainers of school or clinical psychology and how they maintain their overall wellbeing followed based on this study's findings. There has been limited research conducted on women who are mothers and trainers of school or clinical psychology and how they navigate multiple roles while maintaining their overall wellbeing. However, the women in this study clearly identified their wellbeing as impacted by the numerous responsibilities for which they are responsible. In general, the participants'—both mothers and nonmothers—levels of depression, anxiety, and stress were of concern, which likely directly relates to their lived experiences as women in academia.

The qualitative component of the study was a means to broaden the general knowledge pertaining to the unique experiences women in academia face. The participants' interactions and experiences were not always consistent. This finding supports Mason and Goulden (2002), who asserted that family planning decisions as an academic vary: Some women put off having children until after achieving tenure or choose not to have children at all. The study's findings suggest that women in academia who are mothers desire a better understanding of the multiple roles they endure and the importance of managing their wellbeing through various strategies.

The study adds to the limited body of current literature by elucidating the lived experiences of women who are mothers and trainers of school or clinical psychology. From the detailed interviews, the researcher discovered numerous constructs that are lacking for this population of academics. These include the level of support within the university setting, a lack of transparent policies concerning the tenure and promotion process, and the ambiguity of maternity leave. Furthermore, these women described an inability to maintain their overall wellbeing, corroborated by the DASS-21 scores, with responses related to being overwhelmed, inefficient, and lacking time to focus on self-care activities. Participants also shared numerous strategies they deemed important for their success in being both a mother and a trainer of school or clinical psychology. These strategies included social supports in both settings (i.e., cohorts of mothers within the university and social network outside of work) and environmental supports, including family-friendly and diverse language within the work environment and flexible class

scheduling or part-time opportunities time without repercussions for promotion and tenure timeline.

Overall, this study's combined results contributed to a deeper understanding regarding the shortage of women entering and leaving the professorate. The DASS-21 scores revealed significantly high levels of depression, anxiety, and stress for all participants in the current study. Similar to previous research (e.g., Biaggi et al., 2016; Ceci & Williams, 2011), these findings identify a contributing factor to women's lack of representation in psychological training programs. The current study involved participants from throughout the United States who are trainers of school or clinical psychology in multiple university settings. This study provided insight into how these women in academia perceive their current levels of wellbeing based on the climate in which they work, the supports they have in place, and their abilities to manage multiple roles. Although prior researchers (e.g., O'Meara et al., 2018; Williams, 2015b) described a change in the continuum and a better experience for women in academia, the current study did not reflect those findings.

Implications

The results and findings from this current study will benefit those in administrative positions in university settings. Furthermore, this research presents the stories of women in academia to others having the same experiences. The new information gathered from this study has implications for university policies, a workplace culture that supports the working mother and female academic, and the importance of wellbeing in the career trajectory.

University administration and faculty can utilize this research to support female faculty members, both mothers and nonmothers, in achieving their career goals while maintaining a balance between multiple roles. Although this research did not find a significant difference between the type of training environment and its effect on participants' levels of depression, anxiety, and stress, there is a need for administration within the university setting to assess restructuring specific policies to better support these women. The results of the current study indicate that mental health should be a focus for universities to investigate. In addition to mental health, universities should attend to parenting policies to address the unique needs women in academia encounter.

These results provide further information regarding workplace culture and practices that encourage manageable workloads and autonomy in decision-making and self-care practices. The implication is that directors must routinely provide frequent and productive feedback to determine when the female trainer shifts from feeling productive to feeling overwhelmed. In this study, participants who reported being in academia for longer periods had a better perception of their time management and abilities to navigate their multiple roles. These practitioners could serve as mentors to newer faculty members to help them understand time management while navigating both roles as a mother and a trainer of school or clinical psychology.

Limitations

One possible limitation to the current investigation was the limited sample size of female trainers of school and clinical psychology for Phase I of the study. Previous literature suggested a sample size between 200 to 500 participants for qualitative research

(Small, 2011). The Phase I sample size was 85 participants. Given this limitation, the results of the current study could be unique to this sample and not reflective of females in academia across disciplines.

The impact of the COVID-19 pandemic and social distancing were not topics of exploration in the current study. Feelings of isolation due to social distancing requirements contribute to rising depression rates throughout the United States (Immun, 2020). Although the researcher asked about the impact of COVID-19, it was more directed to how the participants were managing the multiple responsibilities, not specifically how COVID-19 had changed their abilities to manage their wellbeing. Additionally, within numerous university settings, COVID-19 has required faculty members to shift their pedagogical approach to an online or hybrid format (Jandrić et al., 2020). The current study was further limited by not investigating specific questions regarding how the shift in content delivery affected the participants' ability to manage their wellbeing while navigating that new responsibility. Lastly, COVID-19 has required some parents to shift their children's way of learning to at home or in school with protective measures in place. Although some participants shared how this change had affected them, it was not a direct question and therefore cannot be identified as a noncontributing factor to the participants' perceptions of navigating their multiple professional and family roles.

Another potential limitation of the study is the lack of inquiry into the university resources available to each participant. Having specific resources in place could have influenced participants' responses on both the quantitative and qualitative portions of the

study. Based on previous studies (e.g., Abrams, 2020; Mitchell & Ortega, 2019), employee assistance programs, mentoring programs, and university-based counseling centers can improve overall employee satisfaction and productivity.

Finally, the current study could have been limited by the lack of investigation of other variables on the DASS-21 (i.e., length of time in position, length of time at current university, length of time in current relationship). Examining these other variables could have identified factors that influenced the DASS-21 scores. Additionally, the researcher did not consider preexisting diagnoses of depression, anxiety, or stress among the participants. Having a preexisting condition could have influenced participants' responses and overall experiences in academia.

Future Research

It is evident that more research is needed regarding the lived experiences of women in academia who are mothers. Given the impact on the overall wellbeing of this group of women, more research is necessary to effect current policies and create better strategies to enhance the wellbeing and career trajectory of this marginalized population. Future scholars could extend the current study to multiple disciplines of psychological trainers. Such expansion would enhance the generalizability to a larger population of female trainers of psychology and possibly provide a better understanding of the impact navigating multiple roles can have on wellbeing.

It could be beneficial to replicate this study but separate the mothers according to their children's ages. Motherhood has a multitude of demands and stages that are sometimes related to their children's needs, with age playing a large role. By separating

the participants into preschool, elementary, middle school, and high school, scholars could find more complexity in the levels of depression, anxiety, and stress.

In addition to examining other disciplines of psychology, expanding the study could involve investigating the experiences of trainers in a community college or 2-year college setting. Such a study would allow a comparison of the experiences of female faculty across both settings. Although faculty requirements are not as rigorous in a 2-year college, the data gathered could provide key information to enhance the climate within both environments.

It may be beneficial to repeat this study, adding another measure to better assess emotional constructs. Although the DASS-21 is a reliable measure showing strong reliability and validity (Lovibond & Lovibond, 1995), other assessment measures (e.g., Zung's self-rating depression scale and self-rating anxiety scale) may better assess the emotions of women in academia (Dunstan et al., 2017). By adding an additional measure, confirmation of the participants' current emotional state could be stronger.

It would also be beneficial to build upon this study using male trainers of school and clinical psychology who identify as fathers to determine if their experiences are similar. Although the woman is often the main caregiver (De Vise, 2010), society increasingly recognizes the role fathers play in childrearing (Deluth, 2018). In addition to examining fathers' experiences, researchers could investigate single parents and their experiences within the academic setting.

Future studies of female graduate students in psychological training programs might provide insight into how they perceive their wellbeing while in a training program.

Investigating this population and providing early interventions could increase the likelihood of more females self-selecting to join the professorate, perhaps increasing the number of female trainers in psychology.

Finally, additional research investigating varying faculty status (i.e., full professor, associate professor, assistant professor, or instructor) and length of time in academia may add to the current results. Specific to the length of time in the professorate, those who have been in practice for 10 years or longer could help the newer female faculty members learn how to acquire self-care and time management practices. These strategies could be helpful in maintaining a sense of overall wellbeing.

Conclusions

Women often take on multiple roles throughout their lifespans, such as being a caregiver to aging parents, a partner to a spouse, and a mother to children. These roles are often more complex when the woman chooses to pursue employment outside the home. Helgeson (2012) defined a role as “a position in society governed by a set of norms, which are expectations for behavior” (p. 441). These roles may exist by themselves or in combination with one or more others. Within these responsibilities, women maintain a wide range of personal identities. In essence, women often relate to themselves and others in various ways through these diverse roles. Through each relationship and intersectionality of these duties, women learn who they are (Helgeson, 2012). However, combining these roles and responsibilities in day-to-day life can frequently create external and internal conflict, impacting the woman’s overall wellbeing. Often, these roles hold a multitude of expectations, which include the ideals that a woman must be the

perfect mother and the perfect employee, which can lead to burnout in one or both roles. In combination with a career, motherhood can create an inordinate amount of stress (Moustafa et al., 2020). However, with societal views in constant flux, the decision to be a working mother can have various influences, including financial responsibilities, planning for the future, and contributing to society with a certain amount of productivity (De Vise, 2010).

This mixed methods study added to the body of literature pertaining to female trainers of school or clinical psychology. Using the DASS-21 and qualitative questions concurrently in Phase I, the study gave participants an opportunity to provide demographic information and share thoughts and feelings related to their overall perceptions of how well they navigated multiple roles in academia and their current perceptions of their wellbeing. Phase II allowed for a more in-depth exploration of how women who are both mothers and trainers of school or clinical psychology navigate the multiple roles they hold and how they perceive their current levels of wellbeing. This current study is unique, as the qualitative data provided a richer description of the respondents' self-reported levels of depression, anxiety, and stress on the DASS-21. Being a mother versus not being a mother was not statistically significant, and there was no difference between perceived levels of depression, anxiety, and stress between the groups of clinical and school psychologists. However, although there was no difference between either group, both groups reported high levels of all three constructs (i.e., depression, anxiety, and stress).

Throughout Phase II of the study, it was apparent that women experience multiple difficulties as female trainers who are mothers based on their responses in the semistructured interviews. As previously noted (e.g., De Vise, 2010; Mason & Goulden, 2009; Moustafa et al., 2020), women in academia are at a disadvantage compared to their male counterparts, and women in academia who are mothers are at an even more significant disadvantage. By capturing the lived experiences of these women in real time, the researcher was able to add to minimal literature and highlight what appeared to be barriers for female trainers of school and clinical psychology who are mothers. The lack of support and ineffectiveness the participants described correlates with prior studies (O'Meara et al., 2008; Williams, 2015) and their perception of their overall wellbeing. In addition to revealing the multiple barriers these individuals encountered, the current study provided information on why women, in general, are not entering the professorate or are leaving the professorate all together. The undue amounts of depression, anxiety, and stress clearly contribute to participants' overall perceptions of wellbeing or the lack thereof.

Additionally, the researcher was able to illuminate factors and strategies reported as helpful to women in academia who are mothers. Although women in academia have been subjects of research, there has not been a thorough investigation or determination of recommendations to better assist this group (Helgeson, 2012). The women in this study identified social and environmental supports as being key to their overall perceptions of success and wellbeing. Overall, the results of the current investigation indicate that

women in academia require better strategies to achieve a clear sense of wellbeing in both their personal and professional environments.

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APPENDIX A

School and Clinical Psychology Doctoral Programs

Ball State University	Pennsylvania State University
Central Michigan University	Rutgers, The State University of New Jersey
Duquesne University	Syracuse University
Florida State University	Teachers College, Columbia University
Fordham University	Temple University
Georgia State University	Texas A&M University
Illinois State University	Texas Woman's University
Indiana State University	The Ohio State University
Indiana University – Bloomington	The University of Memphis
James Madison University	The University of Montana
Kent State University	Tulane University
Lehigh University	SUNY Buffalo
Louisiana State University	University of Arizona
Loyola University Chicago	University of California, Berkeley
Michigan State University	University of California, Riverside
Mississippi State University	University of California, Santa Barbara
North Carolina State University	University of Central Arkansas
Northeastern University	University of Cincinnati
Northern Arizona University	University of Connecticut
Northern Illinois University	University of Florida
Nova Southeastern University	University of Georgia
Oklahoma State University	

University of Houston

University of Kansas

University of Kentucky

University of Maryland, College Park

University of Massachusetts Amherst

University of Massachusetts Boston

University of Minnesota

University of Missouri-Columbia

University of Nebraska-Lincoln

University of North Carolina-Chapel

Hill

University of Northern Colorado

University of Oregon

University of Rhode Island

University of South Carolina

University of South Florida

University of Southern Mississippi

University of Tennessee, Knoxville

University of Texas at Austin

University of Utah

University of Virginia

University of Washington

University of Wisconsin-Madison

University of Wisconsin-Milwaukee

Utah State University

William James College

APPENDIX B

United States Census Information by Division

Region I: Northeast

Division 1: New England

- Connecticut
- Maine
- Massachusetts
- New Hampshire
- Rhode Island
- Vermont

Division 2: Middle Atlantic

- New Jersey
- New York
- Pennsylvania

Region 2: Midwest

Division 3: East North Central

- Indiana
- Illinois
- Michigan
- Ohio
- Wisconsin

Division 4: West North Central

- Iowa
- Kansas
- Minnesota
- Missouri
- Nebraska
- North Dakota
- South Dakota

Region 3: South

Division 5: South Atlantic

- Delaware
- District of Columbia
- Florida

- Georgia
- Maryland
- North Carolina
- South Carolina
- Virginia
- West Virginia

Division 6: East South Central

- Alabama
- Kentucky
- Mississippi
- Tennessee

Division 7: West South Central

- Arkansas
- Louisiana
- Oklahoma
- Texas

Region 4: West

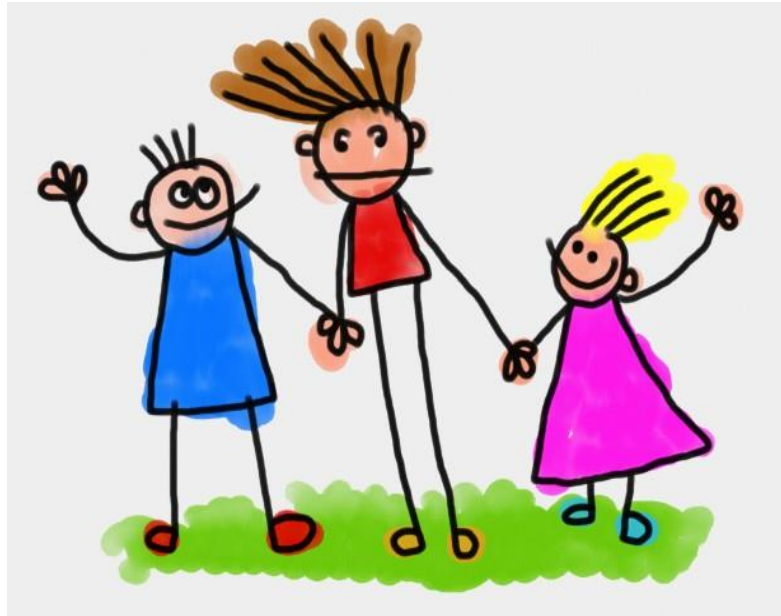
Division 8: Mountain

- Arizona
- Colorado
- Idaho
- New Mexico
- Montana
- Utah
- Nevada
- Wyoming

Division 9: Pacific

- Alaska
- California
- Hawaii
- Oregon
- Washington

APPENDIX C
Proposed IRB Flyer



Are you a female faculty member at a university and a trainer of school or clinical psychology?

I am looking for volunteers to complete a survey regarding your experiences as a female who is a trainer of school psychology at your university. The survey should take less than 30 minutes of your time and will potentially help researchers better understand the experiences females in an academic setting face on a daily basis.

Please keep in mind that all participation is voluntary, and there is a potential loss of confidentiality in all email, downloading, electronic messages, and internet transactions.

Please find the survey at the following link:

<https://www.psychdata.com/s.asp?SID=193077>

If there are any questions regarding this survey, please feel free to contact:

Wendi Johnson wjohnson4@twu.edu or Amy Skinner aporter5@twu.edu

Thank you for your consideration!

APPENDIX D

Demographic Questionnaire

Demographics Information:

1. Age: _____

2. Email Address: _____

(This information will only be used to contact you if you choose to participate in phase II of the study)

3. Race/Ethnicity: Please choose one

White

Hispanic or Latin

Black or African American

Native American

American Indian

Asian or Pacific Islander

Other

4. Classification: Please choose one

Professor

Associate Professor

Assistant Professor

Instructor

Instructor-Tenured

5. Commute:

Length of commute to campus in minutes _____

6. Employment Status:

Full Time

Part-time

7. Marital Status: Please choose one

Single or Never Married

Married or Domestic Partnership

Widowed

Divorced

Separated

8. Number of Children: ____

9. Age of Children:

- First Child: ____

- Second Child: ____

- Third Child: ____

- Fourth Child: ____

10. Do any of your children have special needs?

Yes

No

11. If you answered yes to the previous question, please indicate the child's/children's disability area:

12. Please select all of the following methods of childcare you currently use and how many children are in each setting:

Type of Childcare	How many children in this setting?
<input type="checkbox"/> In home childcare	_____
<input type="checkbox"/> Childcare facility	_____
<input type="checkbox"/> A paid family member	_____
<input type="checkbox"/> An unpaid family member	_____
<input type="checkbox"/> Public/Private School	_____
<input type="checkbox"/> After school care	_____

13. How would you describe your work-life balance as a trainer of psychology? Has COVID-19 impacted your ability to maintain your overall wellbeing? (i.e., Do you feel as though you are able to meet the demands your job requires? What types of self-care activities if any do you participate in? Do you find them to be beneficial? Would you consider yourself to be successful? Why or why not?)

13. If you are a mother who is also a trainer of school psychology, would you be willing to participate in a semistructured, recorded interview to gather your lived experience as both a mother and an academic? The researcher will contact you at the email address you provided to set up the interview which will not last more than 1 hour. (Mother is defined as having a child/children who are 18 years or younger that live with you for at least half of the calendar year). yes no

APPENDIX E

Depression, Anxiety, and Stress Scale (DASS-21)

DASS-21

Please read each statement and write 0, 1, 2 or 3 which indicates how much the statement applied to you over the past week. There are no right or wrong answers. Do not spend too much time on any statement.

The rating scales is as follows:

0 Did not apply to me at all – NEVER

1 Applied to me to some degree, or some of the time – SOMETIMES

2 Applied to me to a considerable degree, or a good part of time – OFTEN

3 Applied to me very much, or most of the time - ALMOST ALWAYS

1. I found it hard to wind down ____
2. I was aware of dryness of my mouth ____
3. I couldn't seem to experience any positive feeling at all ____
4. I experienced breathing difficulty (e.g., excessively rapid breathing, breathlessness in the absence of physical exertion) ____
5. I found it difficult to work up the initiative to do things ____
6. I tended to over-react to situations ____
7. I experienced trembling (e.g., in the hands) ____
8. I felt that I was using a lot of nervous energy ____
9. I was worried about situations in which I might panic and make a fool of myself

10. I felt that I had nothing to look forward to ____
11. I found myself getting agitated ____

12. I found it difficult to relax ____
13. I felt downhearted and blue ____
14. I was intolerant of anything that kept me from getting on with what I was doing

15. I felt I was close to panic ____
16. I was unable to become enthusiastic about anything ____
17. I felt I wasn't worth much as a person ____
18. I felt that I was rather touchy ____
19. I was aware of the action of my heart in the absence of physical exertion (e.g.,
Sense of heart rate increase, heart missing a beat) ____
20. I felt scared without any good reason ____
21. I felt that life was meaningless ____

Scoring the DASS

The scale to which each item belongs is indicated by the letters D (Depression), A (Anxiety) and S (Stress). For each scale (D, A & S) sum the scores for identified items. Because the DASS-21 is a shortform version of the DASS (the Long Form has 42 items), the final score of each item groups (Depression, Anxiety and Stress) needs to be multiplied by two (x2).

Interpreting the DASS

Once multiplied by 2, each score can now be transferred to the DASS profile sheet, enabling comparisons to be made between the three scales.

DASS Severity Ratings

(Multiply summed scores by x 2)

Severity	Depression	Anxiety	Stress
Normal	0-9	0-7	0-14
Mild	10-13	8-9	15-18
Moderate	14-20	10-14	19-25
Severe	21-27	15-19	26-33
Extremely Severe	28+	20+	34+

The DASS should not be used on its own to assess the presence or absence of Depression, Anxiety, or Stress.

APPENDIX F
Semistructured Interview

Phase II: Semistructured Interview Questions

1. As parent and an academic, do you feel welcomed at your university? Why or why not?
2. What support do you have at home that is helpful for childcare needs?
3. Do you have reliable childcare? What do you do if your plan for childcare that day fails?
4. How do you balance the demands of family and work?
5. Do you feel supported by leadership and fellow faculty at your university? Why or why not?
6. Does your work environment meet your satisfaction? (e.g., open door policies, flexibility, communication)
7. What support does your university offer you as both a mother and an academic?
8. How do you feel about the process of gaining tenure at your university?
9. What policies do you feel are missing for mothers who are academics?
10. Based on your experience as a faculty mother, what has the most impact on your career success?

APPENDIX G
Consent – Phase I

TEXAS WOMAN'S UNIVERSITY (TWU)

CONSENT TO PARTICIPATE IN RESEARCH

Title: Mothers in Academia and Their Unique Needs: The Process of Navigating Multiple Roles While Maintaining Personal Wellbeing

Principal Investigator: Amy Skinner B.A.
aporter5@twu.edu
940-435-2160

Summary and Key Information about the Study

You are being asked to participate in a research study conducted by Doctoral Candidate Amy Skinner to fulfill the universities dissertation requirement. The purpose of this research is to survey experiences of female faculty members who are trainers of school or clinical psychology in a university setting. As a participant you will be asked to take part in an online survey that will collect demographic information and then you will participate in a survey that will rate your current levels of depression, anxiety, and stress. The total time commitment for this study will be about 30 minutes. The greatest risks of this study include potential loss of confidentiality. We will discuss these risks and the rest of the study procedures in greater detail below.

Your participation in this study is completely voluntary. If you are interested in learning more about this study, please review this consent form carefully and take your time deciding whether or not you want to participate. Please feel free to ask the researcher any questions you have about the study at any time.

The return of your completed questionnaire constitutes your informed consent to act as a participant in this research.

Description of Procedures

As a participant in this study, you will be asked to spend approximately 30 minutes of your time participating in an online demographic questionnaire followed by a survey. The researcher will ask you questions about your experiences as a faculty member who is a trainer of school or clinical psychology at your university. You will be able to take the survey where and when it is convenient for you. In order to be a participant in this study, you must identify as a female, you must be a faculty member who is a trainer of school or clinical psychology at your university, you must be at least 18 years of age or older and have access to the internet.

Potential Risks

The researcher will ask you questions about your experiences as a female trainer of school or clinical psychology at your university. A possible risk in this study is discomfort with these questions you are asked. There is also a risk of feelings of coercion

during the recruitment process and the actual study. If you become tired or upset, you may take breaks as needed. You may also stop answering questions at any time and end the survey. If you feel you need to talk to a professional about your discomfort, the researcher has provided you with a list of resources. (Listed at the end of this consent)

In addition, there is a potential risk of loss of confidentiality in all email, downloading, electronic meetings and internet transactions.

The researchers will try to prevent any problem that could happen because of this research. You should let the researchers know at once if there is a problem and they will try to help you. However, TWU does not provide medical services or financial assistance for injuries that might happen because you are taking part in this research.

Participation and Benefits

Your involvement in this study is completely voluntary and you may withdraw from the study at any time. Although you may not directly benefit from the results of this study, the information provided may help improve supports available to female faculty members who are trainers of school or clinical psychology at the university level. If you would like to know the results of this study, we will email or mail them to you.

Questions Regarding the Study

If you have any questions about the research study, you should ask the researchers; their contact information is at the top of this form. If you have questions about your rights as a participant in this research or the way this study has been conducted, you may contact the TWU Office of Research and Sponsored Programs at 940-898-3378 or via e-mail at IRB@twu.edu.

Below is a list of resources you may want to access after completing this survey for any mental health needs following your participation in this study:

American Psychological Association Psychologist Locator
<http://locator.apa.org/>

National Register of Health Service Psychologists
<http://www.findpsychologist.org/>

Mental Health of America Referrals
<http://www.nmha.org/go/searchMHA>

Psychology Today Find a therapist
<http://therapists.psychologytoday.com/rms/>

National Board for Certified Counselors
<http://www.nbcc.org/CounselorFind>

APPENDIX H

Consent – Phase II

TEXAS WOMAN'S UNIVERSITY (TWU)

CONSENT TO PARTICIPATE IN RESEARCH

Title: Mothers in Academia and Their Unique Needs: The Process of Navigating Multiple Roles While Maintaining Personal Wellbeing

Principal Investigator: Amy Skinner B.A.
aporter5@twu.edu
940-435-2160

Summary and Key Information about the Study

You are being asked to participate in a research study conducted by Doctoral Candidate Amy Skinner to fulfill the universities dissertation requirement. The purpose of this research is to survey experiences of female faculty members who are mothers and trainers of school or clinical psychology in a university setting. As a participant you will be asked to take part in a recorded semistructured interview that will collect your lived experience of being both a mother and a trainer of school or clinical psychology in a university setting. The total time commitment for this study will be about 1 hour. The greatest risks of this study include potential loss of confidentiality. We will discuss these risks and the rest of the study procedures in greater detail below.

Your participation in this study is completely voluntary. If you are interested in learning more about this study, please review this consent form carefully and take your time deciding whether or not you want to participate. Please feel free to ask the researcher any questions you have about the study at any time.

The return of your completed questionnaire constitutes your informed consent to act as a participant in this research.

Description of Procedures

As a participant in this study, you will be asked to spend approximately 1 hour of your time participating in a semistructured interview that will gather information on your lived experience of being a female who is a mother and trainer of school or clinical psychology in the university setting. The researcher will ask you questions about your experiences as a faculty member who is both a trainer of school or clinical psychology and a mother at your university. The researcher will schedule a time convenient for you to complete a recorded semistructured interview. In order to be a participant in this study, you must identify as a female, you must be a faculty member who is a trainer of school or clinical psychology at your university, you must be a mother with a child 18 years of age or younger that lives with you for at least half of the calendar year, you must be at least 18 years of age or older and have access to the internet.

Potential Risks

The researcher will ask you questions about your experiences as a female who is a mother and a trainer of school or clinical psychology at your university. A possible risk in this study is discomfort with these questions you are asked. There is also a risk of feelings of coercion during the recruitment process and the actual study. If you become tired or upset, you may take breaks as needed. You may also stop answering questions at any time and indicate you would like to stop being interviewed. If you feel you need to talk to a professional about your discomfort, the researcher has provided you with a list of resources. (Listed at the end of this consent)

In addition, there is a potential risk of loss of confidentiality in all email, downloading, electronic meetings and internet transactions.

The researchers will try to prevent any problem that could happen because of this research. You should let the researchers know at once if there is a problem and they will try to help you. However, TWU does not provide medical services or financial assistance for injuries that might happen because you are taking part in this research.

Participation and Benefits

Your involvement in this study is completely voluntary and you may withdraw from the study at any time. Although you may not directly benefit from the results of this study, the information provided may help improve supports available to female faculty members who are trainers of school psychology and mothers at the University level. If you would like to know the results of this study, we will email or mail them to you.

Questions Regarding the Study

If you have any questions about the research study, you should ask the researchers; their contact information is at the top of this form. If you have questions about your rights as a participant in this research or the way this study has been conducted, you may contact the TWU Office of Research and Sponsored Programs at 940-898-3378 or via e-mail at IRB@twu.edu.

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Psychology Today Find a Therapist
<http://therapists.psychologytoday.com/rms/>

National Board for Certified Counselors
<http://www.nbcc.org/CounselorFind>