

Mentoring Doctoral Student Mothers in Counselor Education: A Phenomenological Study



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Vanessa Kent, Helen Runyan, David Savinsky, Jasmine Knight

When the pursuit of doctoral studies and motherhood intersect, the risk of attrition increases. Although other studies have explored the challenges of student mothers in academia, this study looked at how mentorship might mediate them. This phenomenological study examined the mentoring experiences of doctoral student mothers or recent graduates in counselor education and supervision programs ($N = 12$). Unanimously, participants articulated that their professional identity was enhanced by their identity as mothers, but balancing multiple roles required supportive mentors. Participants described the personal qualities of effective faculty and peer mentors, many also mothers who understood their needs. Mentoring served as a protective factor in helping navigate barriers, providing academic and emotional encouragement, reducing isolation, and creating realistic timelines. Suggestions for mentoring programs and advocacy are discussed.

Keywords: mentoring, doctoral student mothers, counselor education, phenomenology, advocacy

Over the past decade, surveys have indicated incoming doctoral students are less traditional than previous generations (National Center for Science and Engineering Statistics [NCSES], 2017; Offerman, 2011). These students (e.g., women, minorities, and international students) may experience cultural maladjustment while attending traditionally structured academic institutions (Holley & Caldwell, 2012; Ku et al., 2008; NCSES, 2017). This may lead to dissatisfaction, isolation, and subsequent attrition (Holley & Caldwell, 2012; Ku et al., 2008; NCSES, 2017; Offerman, 2011; Stimpson & Filer, 2011).

Focusing on women, the number earning doctoral degrees has steadily increased over the past 20 years (NCSES, 2017). Percentages reached a record high in 2008–2009 as women earned slightly over 50% of all doctoral degrees, except in male-dominated fields, including engineering, mathematics, and physical science (Miller & Wai, 2015; NCSES, 2015). Furthermore, with a ratio of six females to one male completing bachelor's and master's degree programs yearly, the majority of those entering the doctoral pipeline are expected to be female (Miller & Wai, 2015). These incoming female doctoral students are likely to be in their prime childbearing years, in dual-income households if married, and caring for dependents (Lester, 2013; Offerman, 2011; Stimpson & Filer, 2011). Finding ways to assist these doctoral student mothers in completing a doctorate requires further investigation.

Although earning a degree in higher education can bring personal satisfaction, higher professional status, and economic gains, the process can also result in unforeseen stress and challenges to work–life balance, leading to dissatisfaction and attrition (Brus, 2006; Lynch, 2008; Martinez et al., 2013; Offerman, 2011; Stimpson & Filer, 2011). Despite the rigorous selection process, attrition rates for doctoral students hover between 40%–60% (Council of Graduate Schools, 2010). Beyond academics, extenuating factors that contribute to the attrition of doctoral students include stress; financial hardship; commitment conflicts; unexpected life interruptions; mental and physical health issues; and changes in the family structure,

Vanessa Kent, PhD, NCC, LCMHC-S, LMFT, is an assistant professor at Regent University. Helen Runyan, PhD, NCC, LPC, is an associate professor at Regent University. David Savinsky, PhD, ACS, LPC, LMFT, CSAC, is an associate professor at Regent University. Jasmine Knight, PhD, NCC, is an assistant professor at Regent University. Correspondence may be addressed to Vanessa Kent, 1000 University Drive, Virginia Beach, VA 23464, vaneken@regent.edu.

including having children (Brus, 2006; Lynch, 2008; Martinez et al., 2013). When the doctoral student is a new mother or the primary caregiver, these factors become exacerbated (Brus, 2006; Holm et al., 2015; Lester, 2013; Lynch, 2008; Stimpson & Filer, 2011). Because of the structural design of higher education and cultural pressures of motherhood that seem at odds with each other, graduate student mothers are at higher risk of attrition than almost any other American academic group (Lester, 2013; Lynch, 2008).

Challenges Facing Doctoral Student Mothers

The challenges of student mothers navigating the competing roles of academic scholar and primary caretaker are well documented (Holm et al., 2015; Lester, 2013; Lynch, 2008; Pierce & Herlihy, 2013; Trepal et al., 2014). Mothers pursuing doctoral degrees may find balancing academics and employment a daily challenge, compounded by the second shift of childcare and housework (Lynch, 2008; Pierce & Herlihy, 2013; Stimpson & Filer, 2011). Despite movement toward an egalitarian view of child-rearing among contemporary couples, the burden of overseeing the household duties and childcare remain largely the mother's responsibility (Lester, 2013; Medina & Magnuson, 2009; Misra et al., 2012). Student mothers juggling multiple roles report dissatisfaction in their work-life balance because of time and scheduling demands, as well as hindrances in the workplace and higher education (Brus, 2006; Holm et al., 2015; Lynch, 2008; Trepal et al., 2014). Research on support for this vulnerable population points to faculty and peer support as possible mitigating factors to attrition and dissatisfaction (Bruce, 1995; Holm et al., 2015; Trepal et al., 2014).

Mentoring Relationships That Mitigate Attrition

Research spanning almost two decades correlated strong advisor and mentor relationships with successful student outcomes (Bruce, 1995; Clark et al., 2000; Holley & Caldwell, 2012; Patton & Harper, 2003). Mentoring has been especially important for underrepresented populations such as international students; students of color; first-generation college graduates; women in science, technology, engineering, and mathematics (STEM) disciplines; and female students/faculty who were also mothers (Brown et al., 1999; Holm et al., 2015; Kendricks et al., 2013; Ku et al., 2008). A *mentor* is a person who provides professional and personal support to assist the less skilled mentee in becoming a full member of a particular profession (Brown et al., 1999; Clark et al., 2000). This study focuses on academic mentors, both formal and informal. Formal mentoring involves a faculty member, formally assigned to or requested by the student, whose roles may include but also extend well beyond that of an advisor, dissertation committee member, supervisor, or instructor (Hayes & Koro-Ljungberg, 2011; Patton & Harper, 2003). Informal mentoring can be categorized by who provides the mentoring: faculty or a peer. Informal faculty mentoring occurs as a faculty member organically connects with a student on common interests to provide support, often around motherhood, suggesting the importance of access to a faculty member who is also a mother (Hermann et al., 2014; Holm et al., 2015; Trepal et al., 2014). Peer mentoring provides that connection through an informal relationship between a more senior doctoral student and a junior doctoral student (Noonan et al., 2007). Peer mentoring may occur as part of a structured program, but it more often occurs organically as upperclassmen fill this need through joint interests, scholarly activities, or motherhood (Lynch, 2008; Noonan et al., 2007).

Shifting from a traditional hierarchical model, relational mentoring encompasses not only the advising relationship to promote career and professional development but also the genuine empathic relationship that emerges from a reciprocal, collaborative approach (Gammel & Rutstein-Riley, 2016; Kelch-Oliver et al., 2013). Results are greater accessibility to the mentor, opportunities to share knowledge in research and publishing, extended support to students, knowing students on a more personal level, fostering friendships, and building community (Brown et al., 1999; Bruce, 1995; Hadjioannou et al., 2007; Hayes & Koro-Ljungberg, 2011). Benefits of relational mentoring include mutual growth opportunities for both

the mentor and mentee, greater academic achievement, personal satisfaction, and increased social and emotional support (Gammel & Rutstein-Riley, 2016; Kelch-Oliver et al., 2013).

Connections with other student mothers is an important support mechanism, reducing isolation with increased social support (Hermann et al., 2014; Lynch, 2008; Patton & Harper, 2003; Trepal et al., 2014). Chief factors influencing female doctoral students' satisfaction in their programs were female faculty and peers serving in supportive/mentoring roles, sharing resources (such as childcare), addressing stress, and encouraging healthy choices around family life (Bruce, 1995; Brus, 2006; Holm et al., 2015; Trepal et al., 2014). Studies specific to African American women in psychology found that same race/gender mentorship was imperative in recruitment, retention, and training of this population (Kelch-Oliver et al., 2013; Patton, 2009).

Female mentorship may be an untapped resource in counselor education and supervision (CES), as there is little research exploring the mentoring of doctoral student mothers (Bruce, 1995; Holm et al., 2015; Trepal et al., 2014). Without clear guidelines on how mentoring might support doctoral student mothers, current mentoring programs and training practices may be inadequate. In this study, we sought to investigate the mentoring experiences of students who were navigating the dual roles of mother and student in CES programs. Although past studies have explored mentoring programs of doctoral students (Clark et al., 2000; Holley & Caldwell, 2012; Ku et al., 2008) and the experiences of student mothers in doctoral programs (Holm et al., 2015; Trepal et al. 2014), we sought to determine *how* mentoring benefits doctoral student mothers.

Method

Qualitative research is a suitable choice for investigating questions pertinent to counselor education, as it lends itself to rich data collection through interactions between the researcher and participants (Hays & Singh, 2012). A subset of qualitative research, phenomenological research is aimed at increasing understanding of the complexity of people's lives by examining the individual and collective experience of a particular phenomenon (Creswell, 2013). We chose a phenomenological approach to understand how student mothers experienced mentoring while in a CES program. This seemed to be the best lens through which to explore our research question: What is the lived experience of doctoral student mothers formally or informally mentored by faculty and/or peers? With a greater understanding of this phenomenon, counselor educators may apply this knowledge in recognizing and meeting the needs of student mothers to reduce attrition.

Research Team

Our research team consisted of a doctoral student mother (first author and now a faculty member) and three faculty members in a CACREP-accredited CES program at a small, private university. During their doctoral studies, two of the three women were mothers of young children and the male faculty member became a first-time father. Currently, the faculty researchers are advancing through their tenure track while parenting elementary-age children.

Before the study, we met as a team to discuss our experiences of mentorship as students and junior faculty as well as how we experienced the climate of our institution toward families. The first author shared that her research interest grew out of her own experience as well as the struggles of doctoral student mothers in her cohort, necessitating support from peers and faculty members. Eager to learn how doctoral student mothers experienced faculty and peer mentoring across institutions, we watched this study begin to take shape. Acknowledging our biases and bracketing our assumptions,

we set them aside to allow a fresh perspective of the participants' experiences to emerge. LeVasseur (2003) described this process of bracketing as suspending understanding of the topic to shift toward a position of curiosity.

Procedure and Participants

After receiving approval from the university's Human Subject Review Committee, we recruited participants using a professional counseling electronic mailing (CESNET-L) and by emailing CES department heads at four universities in the Eastern United States. The email provided criteria for the study with a link to the demographic questionnaire and informed consent form. Criteria included: (a) completed at least one year of doctoral studies in a CACREP-accredited CES program or had graduated within 2 years; (b) formally or informally mentored by faculty, peers, or both; and (c) mother of at least one child below the age of 18 residing with them during their counselor education doctoral training. Not wanting to limit participants because of location, we chose to interview participants using a telehealth video platform. This resulted in a wide geographical sample as shown in Table 1. University types included three Research 1, one historically Black college and university (HBCU), one hybrid, and seven liberal arts institutions. Twelve participants were selected to be interviewed based on meeting criteria and in keeping with sample size guidelines for phenomenological studies (Creswell, 2013). Participants ranged in age from 29–37 ($M = 34$, $SD = 2.4$). Participants identified racially as European American ($n = 9$) and African American ($n = 3$). Ten became pregnant during their doctoral studies: six were first-time mothers, and two miscarried twice. Children's ages ranged from 10 months to 12 years, with most under the age of 3. In addition to being students, all participants were employed during their studies as school counselors, in private practice, or in agency clinical work. Six of the seven interviewees were employed as an adjunct professor, school counselor, researcher/consultant, program director of a counseling department, private practice counselor, and university counseling center director; the seventh was a new doctoral graduate.

Table 1

Participant Demographic Information

Geographic Location		Status in CES Program		Pregnant While in Program		Ages of Participants' Children		Type of Mentor by Gender	
Midwest	2	2nd year	2	1st year	2	3 years or under	6	Faculty	Female: 16 Male: 4
Northeast	2	3rd year	3	2nd year	3	4–6 years old	6	Peer	Female: 13
Northwest	2	Graduated ≤ 6 months	5	3rd year	4	7–12 years old	4	Supervisor	Female: 7
Southeast	4								
Southwest	2	Graduated 2 years	2	4th year	2	13 years old +	1	Other	Female: 1

Data Sources

Each participant completed a demographic questionnaire and signed an informed consent form for voluntary participation. The questionnaire inquired about age; sex; race/ethnicity; relationship status;

length of time in the CES program; year graduated; if they were pregnant or adopted children and the number of children/their ages while in the program; and if they were mentored by faculty, peer, or both.

The first author conducted the 12 interviews through V-SEE, a Stanford-created, telehealth videoconferencing application that supports online collaboration. It allowed the participants and research interviewer to interact synchronously via audio and video. Interview length ranged from 60–75 minutes as participants described their mentoring experiences. The interview settings were descriptively “in the field,” as they were interviewed in their offices, cars, and homes. Three had their babies/toddlers with them during the home interviews. Participants described their university type, cohort structure, and employment status. The first author asked each participant open-ended questions using a semi-structured interview format developed from our review of the literature on mentoring, motherhood, and issues concerning doctoral student mothers. The questions included: (a) “What factors, if any, influenced your decision to be mentored?” (b) “Can you describe your mentoring experience in detail?” (c) “Can you speak to your work–study–life balance while being mentored?” (d) “Can you speak of your academic progress and/or professional development while being mentored?” (e) “Describe the characteristics or traits of a mentor that are important for doctoral student mothers,” and (f) “What, if anything, could a counselor education department do to promote successful mentoring experiences for doctoral student mothers?” With qualitative inquiry, the goal is to include enough participants to adequately understand the phenomenon in question (Hays & Singh, 2012). Wanting to capture a fresh perspective from these doctoral students who were mentored, many while becoming mothers for the first time, all 12 interviews were retained, yielding in-depth descriptions of their experiences. Pseudonyms were assigned to participants prior to data analysis to protect their identities.

Data Analysis

Phenomenological data analysis is concerned with examining participants’ experiences to understand the depth and meaning of those lived experiences (Hays & Singh, 2012; Moustakas, 1994). Delving into large amounts of transcription data, the goal is to develop a composite description or essence of the experience that represents the group as a whole (Moustakas, 1994). The first author began the inductive method of analysis by engaging in horizontalization, the process of identifying non-repetitive, non-overlapping statements from the first three interview transcripts (Hays & Singh, 2012; Moustakas, 1994). Next, the first author clustered these statements in units of meaning or themes and then wrote textual descriptions of “what” the participants experienced, including verbatim examples from the transcripts (Creswell, 2013; Moustakas, 1994). The first and second investigators met weekly to discuss and rework these themes. From there, they wrote a structural description, “how” the experience happened in the context of the setting or circumstances and who was involved (Creswell, 2013; Moustakas, 1994). The first author used these themes to analyze the rest of the transcripts with care given to reanalyzing previous interviews as new themes or subthemes emerged. The team met to finalize the central themes and subthemes that emerged collectively from the participants’ reflections, contextualizing them into a holistic understanding of the essence of the mentoring experience (Hays & Singh, 2012).

Validation strategies included recognizing and controlling for research bias through bracketing, capturing participants’ viewpoints through substantial engagement, and triangulation through cross-checking codes and themes and by using thick participant descriptions (Denzin & Lincoln, 2011; Lincoln & Guba, 1985). Using basic member checking, participants reviewed their transcripts for accuracy, with two making clarifying comments (Creswell, 2013; Hays & Singh, 2012). The first and second authors met weekly to process reflection notes to bracket any biases and discuss themes to allow triangulation of data (Creswell, 2013; Hays & Singh, 2012). The two other members of the team reviewed the themes/subthemes matched with descriptive statements for cross-checking purposes

(Hays & Singh, 2012; Lincoln & Guba, 1985). To address confirmability and transferability, they kept an audit trail beginning with interview notes, transcripts, reflective journals, and coding pages with descriptive statements. Finally, the authors provided thick descriptions, allowing the reader to enter into the study to a greater degree to reach their own conclusions and stir further discourse around these critical issues in counselor education (Denzin & Lincoln, 2011).

Results

Three overarching themes centered on identity: the qualities and shifting identities of doctoral student mothers, the qualities and roles of faculty/professional and peer mentors, and the barriers and hardships that led to losses and unmet goals despite mentorship experiences. Participants shared how mentoring evolved around their identities as mothers, students, and professionals; what they experienced as support or discrimination by faculty and peers; how their mentors served as a protective factor despite hardships and barriers; and what was needed in terms of advocacy to successfully develop counselor educator identities.

Theme I: Identities and Qualities of Doctoral Student Mothers

Perseverance and resilience characterized the lived experiences of these doctoral student mothers facing unexpected challenges that threatened to slow progress or impede career goals. Sara, who found out she was pregnant shortly after being accepted into her doctoral program, shared, "I ended up having a really horrible labor and a C-section. My baby spent the first week in ICU. We were only home a short time after having major surgery, but I still went back to school 3 weeks later." Natalie also shared her version of perseverance: "I took my comps when I was 38 weeks pregnant [laughter]. I had to keep standing up and going to the bathroom. 'Then I said, I can have this baby now!'"

Making the shift from student to mother or mother to professional requires integrating multiple identities and corresponding roles. "I always had it drilled into my head by my mother that I would be called 'doctor' before I was called 'mom.' So many of us are both education-oriented and family-oriented, being in counseling," remarked Allison. Similarly, Lisa voiced how she embraced her changing identity: "You grow in confidence as a person and through motherhood. Learning what worked and what didn't work. Just having a better sense of myself, my strengths, knowing my worth, knowing my value, and just feeling secure in it."

With the multiple identities came the challenge of meeting academic rigor and motherhood responsibilities, often with conflicting timelines. Although all the participants described themselves as serious students, they made it clear that their children were their number one priority. They willingly sacrificed time and personal needs in hopes of careers that offered greater flexibility and financial stability. "Yes, you're exhausted because you are running a marathon every single day. At the end of the day, you don't have that little space for yourself," said Lisa. Mothers often felt the pull between having to choose work or studies and time with their families. Bethany, a school counselor, explained, "I struggle with mommy guilt even with my job, as my child is one of the first ones in the building and last ones to leave every day." Bethany also recounted, "One of the biggest mom guilts is a picture of my child around the age of 5. I am sitting in a chair surrounded by books and papers as he fell asleep on the couch waiting for me to do something with him. That was really tough." Amy described her typical schedule:

I get up at 6:00, play with the kids, get them off, and get to work . . . until 10:00 pm, kids come in my bed and snuggle. Then I finish grades and go to bed at 3:00 am.

100% of the weekends are dedicated to the children. Want them to say . . . 'Mom was present.' That's hard when the career path and academics are so consuming.

Lisa felt inadequate in both roles at times: "I'm working so hard. . . . and I am not a good enough mom and I'm not a good enough student. . . . not doing a great job at anything."

Several participants reported that their mentors helped them establish healthy boundaries and taught them how to prioritize commitments. Tonya shared, "Today is going to be about work . . . or today is going to be about school. I appreciated having faculty members who had young families, knowing that someone understood that." When the demands of work became unhealthy, Bethany revealed it was her mentor who said, "You've got to reshuffle. You are drowning, and you are miserable. You have to let some of this school stuff go." On prioritizing, Natalie shared, "When I went into this program, I said that I am not going to miss anything in my personal life, even if it takes 4 or 5 years."

Doctoral student mothers commonly identified as non-traditional students. Not only was this gender-influenced, it was also the result of added caregiving responsibilities that prevented them from engaging in opportunities afforded to traditional students. They often felt isolated from their peers or labeled as less committed, which resulted in differential treatment and exclusions. Lisa explained:

I always felt like some kind of outlier . . . like all the other cohorts are like these tight little units. I'm always slipping in and then dropping back out. Would see them on Facebook all hanging out and going out for drinks . . . or they would be publishing or going to conferences. I was working and taking care of children.

On being non-traditional, Morgan, a mother of two, working 25–27 hours per week, shared, "No one in my cohort had children and none had outside jobs." Several participants noted how their male counterparts were able to go full-time without having to deal with family-related interruptions, be questioned for having babies, experience guilt when traveling, or juggle as many commitments. Kayla, reflecting on experiencing negative remarks about her clingy child when she had to travel for work, noted, "They had wives that stayed at home, so their experience has been completely different." On comparing her needs to those of traditional students, Lisa shared, "Mentoring for students who don't have kids, it's . . . talking about publishing together or presenting together. For me, it really is how are you helping me navigate this program."

Theme II: Identities and Qualities of Effective Mentors

For all participants, mentoring was more than academic advising. Often, it was the mentor's combined qualities of temperament, leadership, scholarship, and friendship that helped these doctoral student mothers navigate their programs effectively. Participants described the criteria for selecting their mentors: specific personality traits, women who were also mothers, who shared research interests, and those who modeled career–life balance. The three African American women also considered race an essential factor in mentor selection. Tonya, the sole woman of color in her cohort, connected with other African American faculty outside her department and graduates who were mothers, while Dana experienced mentoring by most of the faculty at her HBCU. Allison based her mentorship selection on personality: "I needed someone who doesn't have my exact personality but who can keep my ideas focused and keep me on track—tough, but supportive."

Some chose female mentors because they believed they would provide greater support and speak to the female experience in academia. Lisa's mentor selection was through gender matching: "I

chose the only woman in my program that has children . . . so I feel like she gets me, and she gets the experience of motherhood and has a great perspective on things." Amy shared that her mentor "could speak to my strengths and could commiserate the experience of being a woman in academia."

Participants described effective mentors as encouraging, supportive, and flexible, displaying qualities of warmth, empathy, and trustworthiness. Most depicted their mentors as master cheerleaders and challengers. Morgan explained that two mentors filled different roles: "I have the mentor's office that I go cry into . . . and the office that I go in and come out sharper for. I think you need both of them." Sharon chose four mentors: "One was especially about writing and research . . . one that was just about my self-care and well-being, and one primarily about the academics. . . [and] one that kind of combined it all, but who I could talk to about the mommy guilt."

Mentors provided a balance between the demand for excellence and practicality and compassion. Creative flexibility and realistic expectations without judgment rounded out the mentors' qualities. Mentors were available beyond the usual office hours and willing to meet at convenient locations such as a coffee shop or home. Morgan commented on the open-door policy of her mentor: "Availability is important. You can walk in and talk . . . whether it is just casual conversation or coming in with a need." Participants described how their mentors went above and beyond to provide creative accommodations. Lisa shared the flexibility of her mentor: "We co-taught and she would work around whatever my schedule was. We would have meetings after the kids went to bed. She really understood my situation and was just so affirming."

Mentoring had a personal side that provided not only a safe interchange of ideas but allowed for vulnerability and transparency. As doctoral student mothers verbalized their hardships, their trusted mentors were not only an emotional outlet but a therapeutic balm providing empathy and care. Their mentors often shared similar lived experiences that created a deeper connection, emotional bonding, and lasting friendship. Sharon found comfort when she faced a personal challenge: "My youngest child was diagnosed with autism very early. When I went to my mentor, she shared that her child was diagnosed with autism as well. We were able to connect and really process our lives as working moms." During hardships and personal challenges, mentors provided comfort and encouragement. Tonya shared how her mentor was there for her after her miscarriage: "I told [my mentor] that I had this little person inside of me and now I don't. She started crying and asked me, 'What do you need right now?'" Tonya's mentor encouraged her to put off writing her comps for a semester to process the loss.

Effective mentors provided professional modeling and career guidance, being personally supportive while navigating the logistics of becoming a counselor educator. Mentors endorsed them for leadership positions, taught them how to negotiate salaries, and helped create a pathway for career satisfaction. On developing their professional identity, graduates were indebted to the mentors. Bethany explained how mentorship groomed her for research: "When I was accepted to the program, [my mentor] took me under her wing and said, 'Let's find a research project to do together.' So we wrote a grant for it and she mentored me through that whole process." Natalie explained how her mentor helped develop her professional identity: "She pushed me to see myself better. . . . something that women have a hard time doing is advocating for themselves in the workplace. She not only modeled that, but she taught me how to do it."

Participants valued the family orientation of their mentors and voiced the need for their mentors to be family advocates. Without these advocates, many felt unequipped to compete with negative voices and dismissive attitudes. Allison shared her experience of feeling supported in her decision to get pregnant:

My advisor/mentor and I were having one of those heart-to-heart conversations. I actually started crying and said, “All my husband and I talk about is babies . . . every weekend. I’m ready; but education-wise, it just doesn’t seem like a possibility.” My advisor looked me straight in the eye and said, “If you want a baby, have a baby.” I shouldn’t have needed permission, but I wanted to know that I was going to be supported.

Mentors helped doctoral student mothers create timelines that respected their family needs as well as their academic and professional goals. Morgan’s mentor said, “We’ll navigate your schedule in an appropriate way that works for the program and for your family.” She then built her plan based upon her schedule and personal journey.

Effective mentoring paralleled hallmarks of counselor education in promoting wellness, advocacy, and empowerment. Seven of the 12 described how their mentors practiced good self-care and modeled positive well-being. Allison discussed how her mentor helped to put work–life balance in perspective: “She was a role model of balance. She would say, ‘You’re working too hard. You need to spend some time with your family.’ I have been able to come out of the program . . . [with] great work–life balance.” Mentors’ practice of self-care made it easier to emulate wellness practices and achieve greater work–life balance. Allison summed it up: “My mentor has this beautiful, wonderfully doting family. . . . Successful children, a supportive husband, and a career—that’s the type of woman I want to be.”

Participants described how mentoring served as a protective factor in reducing attrition. Their rich mentoring experiences helped them succeed in the program and manage the challenges of conflicting roles. Their mentors’ encouragement and support became their lifeline through transitions such as marriage, pregnancy, divorce, and illness. Mentors were especially protective of participants facing cultural or institutional barriers, advocating during their pregnancies and beyond. Allison described how she felt protected from other faculty by her mentor throughout her pregnancy: “I was tired a lot during my pregnancy. If other faculty members got upset that I wasn’t able to fulfill a requirement, she went to bat for me . . . supporting me by saying, ‘Well, in all fairness, she is pregnant.’”

Qualities of Peer Mentors

Three-fourths of the participants were peer mentored, having sought out peers who were also mothers. Although only two of the participants were involved in a peer mentoring program, all 12 conveyed the value of having a more senior member of their program available for questions, advice, encouragement, and engagement in academic activities. Many shared how mentors offered supportive advice, as they were familiar with the journey ahead. Nicole said, “Peer mentoring is beneficial because you get to see someone who has recently been there, and having others from older cohorts can provide help and insight.” Participants gravitated toward other mothers who understood their plight and built mentorships based on the common ground of motherhood intersecting with student life. Peer mentors shared their journeys, insider information on coursework, and realistic timelines; they became fellow presenters and publishers, and provided encouragement along the way. Bethany shared that she often wrote with a peer mentor who understood when she said, “Let’s have a realistic mom timeline.” Natalie shared the reciprocal nature of peer mentoring: “She and I relied a lot on each other just for support and mentorship. She had her baby 6 months before I did and I am learning a lot about the work–life balance and stuff from her.”

Peer mentorship was relational as well as academic. Several participants shared how peer mentoring helped reduce feelings of isolation, as their availability for meet-ups and socializing differed greatly from their peers who did not have children. Tonya explained how she was able to receive encouragement over

mommy guilt from a peer mentor who was also a mother. She “talked to her a lot about what worked for her, how she really tried to put her son first . . . which was helpful for me to hear, because I just felt terrible about it all the time.” Navigating the program without a faculty mentor, Kayla found much of her support through her peer mentor: “We became close and she would let me know about the things to be looking for, to be preparing for upcoming classes. She really had my best interest in mind.” On the close friendships forged through mentorship, Dana stated, “She has become my sister. . . . We talk about frustrations, helping me lay boundaries and be okay leaving my child.”

Participants provided specific ideas as to how to implement peer mentorship programs. Ideas included identifying other student mothers for networking opportunities and information, such as childcare services, understanding school policies, and general support. They also recommended working through organizations such as Chi Sigma Iota to create networks, organizing graduate student meet-ups that are family-friendly, and having older cohorts reach out to newer cohorts throughout the year.

Theme III: Identifying Barriers Facing Doctoral Student Mothers

Stigma and discrimination, lack of accommodations, and need for advocacy emerged from the participant interviews. These barriers produced the hardships these mothers encountered, generating losses and unmet career aspirations. Ten out of 12 expressed awareness of faculty and students’ bias toward non-traditional students, especially women who had families. A majority of the participants felt that as doctoral student mothers, they did not have a strong voice in the institutions that they represented. Often, attitudes of faculty toward doctoral student mothers were dismissive and discriminating when they did not fit into the traditional mold of academia. Others determined that faculty and department heads were simply unaware of the hardships and needs of student mothers and therefore perceived them as less motivated or incapable of meeting the rigorous demands of academia. Perhaps some experienced it most deeply through the lack of research and training opportunities, such as graduate assistantships (GA). Amy discussed her frustration and discouragement at being overlooked for a GA position: “I got the strong inclination that it was because I [got] married and that I couldn’t dedicate myself as a typical GA. . . . I would have liked to have been given a chance to prove myself.”

Others also felt that their limited visibility resulted in biased and discriminatory attitudes from faculty and peers. Lisa explained feeling written off as “not the person looked [at] to do a presentation with someone or to do a publication.” While her peers were writing with faculty, she regretted that she couldn’t “be physically present . . . especially when [she] was working and trying to juggle all of these roles.”

Over half of the participants experienced negative attitudes toward their decisions to marry or start their families while in their doctoral programs. Lisa shared that “a faculty member told me point blank that I shouldn’t have a second child in the program.” Amy shared the messages she received on becoming pregnant in her last year of coursework: “Comments from students and faculty were like ‘Why can’t you just wait until after you are done as you are so close?’ or ‘What are your plans when you have a kid?’” Bethany explained how the faculty’s lack of understanding of her minimum progress on her dissertation during her season as a mom, new wife, and full-time school counselor was demoralizing: “For my [program evaluation] this year, I received a grade of no progress in all areas . . . so I have two articles published and won a regional school counselor of the year award. I walked away feeling like I don’t measure up.”

Many participants spoke of the feeling of invisibility as doctoral student mothers by the lack of accommodations such as lactation facilities, childcare options, and clear or even existent leave of absence

policies. Of the participants interviewed, only two spoke of having access to childcare on campus. Most had to rely on partners, parents, babysitters, or other students to meet these needs, especially those needing evening hours or experiencing long commutes. During emergencies, when childcare failed or a child was sick, these mothers were at the mercy of professors, department chairs, and supervisors to decide if they could get coverage for their duties or bring their babies to meetings, classes, or groups. Few felt childcare issues or illnesses were justification for missing classes or meetings. Similarly, lactation facilities were haphazard, as the majority of buildings had no dedicated nursing rooms. These new mothers had to use student lounges, borrow windowless offices, pump in their cars, or get up early to pump to avoid the hassle on campus. Sharon revealed that “the only place to pump was the bathroom or car. I don’t feed my child in the bathroom so I’m not pumping in the bathroom.”

Finally, participants described frustration over the lack of clear policies when attempting to stop the doctorate clock for maternity leave and in taking time off from assistantship positions that carried weighty financial penalties. Some maneuvered through with placeholder internships, others accumulated hours so that they could take off after their babies were born, and still others shifted down to part-time. In most cases, their mentors helped them find the path of least hardship and greatest flexibility. Lisa reflected on a lack of clear policies: “There need to be better structures to support women and support children. It shouldn’t all have to fall on me, because I’m always going to come up short.” Despite these barriers, five participants were satisfied with the support provided and viewed their department as accommodating non-traditional students effectively even with ambiguous policies.

Regardless of the hardships encountered, what participants regretted the most was their unmet career aspirations. These doctoral student mothers worked diligently to complete their programs but often had significant delays. The range of doctoral completion/expected completion was 3–7 years. Some regrets included not being able to complete hours for licensure, having fewer research opportunities, presenting less often at conferences, and missing out on other duties that would have enhanced their curriculum vitae. Allison lamented her losses: “I wasn’t able to commit the time to seeing clients, as I didn’t want to be at the clinic until 9:00 pm when my son goes to bed.” Lisa added humor to her dilemma of unfulfilled aspirations: “I want to be a full-time faculty member, tenure track at the end of this. That is going to be really challenging because my CV is very short. I am going to attach pictures of my children.”

Call for Advocacy and Awareness

Although discrimination and other barriers in higher education institutions were fairly commonplace, participants articulated several solutions: (a) expand mentorship opportunities, (b) teach and model work–life balance, (c) improve accommodations for students with families, (d) provide professional opportunities around flexible scheduling, (e) increase awareness and support from faculty, and (f) promote advocacy at departmental and university levels. Five participants had already positioned themselves in the role of mentors and advocates for those coming behind them. Three were involved with research that highlighted these issues. “Mentorship should be a requirement and not an option because we know we work well if we have mentors,” remarked Sharon. Dana suggested that graduate programs should survey students to determine the climate of the program and if students are receiving mentorship, and identify mentors who could best address their needs. Bethany believed that universities must expand mentorship, even if it means extending beyond department lines: “Counselor ed departments need to say, ‘Hey, we can’t meet all of your needs as a mother, or a single mother, but I know someone who can, and I want to be intentional and connect you with this person.’” Bethany also suggested that “peer support groups would be really cool. I was the ‘lone wolf’ for a little bit. Could create campus-wide support groups for graduate students . . . and provide childcare and free pizza for the kids.” The important piece was not having to navigate this alone, as Sara remarked: “Facilitating

connection between doctoral student mothers, rather than us having to find our own connections, would be helpful. Making sure there's a space for moms."

The main component named was to increase the visibility of the needs of student mothers and provide an understanding of their experiences by shifting the mindset of lowered expectations by faculty and peers to knowing that they can and will be successful with support. Advocacy requires understanding the experiences of women, especially mothers, and identifying the barriers they still face in academia and the workplace. Sara shared the need for greater equity for doctoral student mothers, saying that it "isn't fair that women who have decided to be moms have to put their own dreams secondary. Women need to know that they are welcome and there is a place for them if they do decide to get pregnant."

Participants suggested that counselor education programs should teach how to create a framework of work–life balance. Flexible timelines were part of the template for success. Allison suggested that timelines could be a helpful option for those considering doing both doctoral work and motherhood, because her mentor said, "Don't do it until after second year . . . [it's a] lot easier to stop and start the dissertation process."

Providing for physical needs, such as having a lactation room, was also critical to sending a welcoming message. Participants described the need for maternity and sick leave policies that were family-friendly. Participants agreed that they needed faculty and departments to acknowledge their capability to complete their doctorates, accept their value to the profession, and support their life choices. Allison voiced a clear directive for faculty and peer mentors:

The biggest characteristic needed for a mentor is supporting and that it just takes one person . . . one relationship at the school who was going to be accepting of me regardless and who was going to help me with my goals . . . not just my goals to be a PhD but [my] goal to be a mother and a good wife.

Discussion

Participants' voices highlighted how, with the support of their mentors, they were able to navigate the often murky waters of a PhD program. Perhaps because 10 of the 12 mothers were pregnant while in their program, they neither cared nor were able to hide their motherhood identity. This is only the second study at the time of this review that specifically included women who were pregnant while in CES programs. Similar to the findings of Holm and colleagues (2015), these participants viewed motherhood as a positive attribute that blended well with CES principles in enhancing their work and vice versa.

Participants experienced mentoring as relational and protective. Building on the findings of several studies that suggested mentoring might add a protective factor for success and satisfaction (Holm et al., 2015; Lynch, 2008; Neale-McFall & Ward, 2015; Trepal et al., 2014), this study found that mentors focused on providing logistical support to bolster academic progress while fostering work–life balance to promote the overall well-being of the student. These mentors provided emotional support for the participants' decision to become pregnant and provided regular check-ins throughout the pregnancy, new motherhood, and in many cases, beyond graduation into a professorship.

Also important to this study was the reciprocal relationship. Beyond responding with care and compassion, mentors shared their own motherhood experiences that mirrored their mentees. Supervisors

who expressed vulnerability increased the feeling of friendship and deepening of the relationship. This supported other research that described mentoring relationships that include an emotional connection that was both empathic and empowering (Gammel & Rutstein-Riley, 2016; Holm et al., 2015; Trepal et al., 2014). In a similar finding to that emerging from Kelch-Oliver and colleagues' (2013) study of mentorship, the three African American participants experienced "mothering" by female African American faculty mentors and the "sisterhood" of peer mentoring that went beyond academic walls. For these women, mentoring helped navigate cultural barriers. Not only was it important that they have female faculty, but also choosing women who lived under "double minority" as Patton (2009, p. 71) described gave them both perspective and support around the complexity of race, gender, and motherhood in academic settings and society as a whole.

Doctoral student mothers connecting with other student mothers reported experiencing greater encouragement and satisfaction in those academic peer relationships compared with their relationships with peers without children. Similar to previous findings (Lynch, 2008; Trepal et al., 2014), peer mentoring by other student mothers reduced feelings of isolation, as often these women were the sole mothers in their cohort. They relied on other mothers in earlier cohorts or recent graduates to guide them on how to balance academics and family life.

Participants who had wellness and work-life balance modeled felt better equipped to pursue an academic career path, while those who had poor work-life balance modeled felt less prepared to be successful in academic institutions. Participants who experienced greater discrimination from their institution lacking in family-friendly policies shared their intentions to put their family's needs first by accepting non-academic jobs, moving closer to relatives, or waiting until their children were older to enter a tenure-track position. This coincides with decades of research (Alexander-Albritton & Hill, 2015; Wolfinger et al., 2008) on graduate women with academic careers that are perceived as non-supportive of family-work balance.

Results also gave voice to the need for change that promotes advocacy concerning parenthood and family-friendly accommodations to aid in decreasing discrimination, both structurally and psychologically. These women had already become advocates and peer mentors. Congruent to earlier research findings, participants identified the need for institutional support in the form of establishing peer mentorship networks that connect other mothers across cohorts and departments, clarifying maternity leave policies, adopting non-penalizing pause-the-clock policies for dissertation work, offering accommodations such as lactation rooms and childcare, and providing flexibility around timelines (Holley & Caldwell, 2012; Holm et al., 2015; Lester, 2013; Lynch, 2008; Stimpson & Filer, 2011). Finally, participants challenged counselor educators to lead the way in addressing inequalities and dismissive attitudes of motherhood in academia by creating a level of openness to family life and choosing to support their students' goals as counselor educators and mothers.

Limitations and Future Directions

This study has limitations because of transferability issues, the possibility of research bias, and delimiting criteria. Although major geographic regions and university types were represented, participants were racially, culturally, and economically similar, as all were married and in dual-income families. As this study recruited only mothers in CES programs, implications from this study for doctoral student fathers who are primary caregivers or doctoral student mothers in other disciplines may not be transferable. Additionally, several mothers in this study had children with medical or mental health issues, but this study did not specifically set out to focus on families with special needs.

Concerning the research design, as research instruments, we may have inadvertently interjected personal biases into the interview process and coding. The goal was to minimize this through bracketing, journaling, member checking, and reviewing themes with research members. Although semi-structured interview questions guided the research and allowed for organic responses, perhaps another approach might have yielded additional themes. All the participants held jobs in addition to their studies and motherhood duties. Several discussed the effects of work on life balance and needing to reduce hours to part-time, but no distinct theme emerged. Perhaps a specific question on how mentoring may mediate the strains of employment might reveal additional content. Finally, the experiences recorded represent women who remained in their programs. With attrition close to 50% (Council of Graduate Schools, 2010), this research did not address those who dropped out of the program, so other needs or barriers may be missed.

Suggestions for future research include either expanding the concept of caregiving or narrowing the focus to specific sub-groups. Specific to CES, research might investigate mentoring from a faculty point of view to determine why and how faculty choose to mentor, as well as any training for the role. A focus group or interviewing both the mentor and other faculty who interacted with these student mothers might also add to the thickness of the context. Revealed reciprocal benefits that mentors and mentees incur in their relationship could be applied to future training programs for counselor educators. A study specific to peer mentorship might yield unique findings and inform strategies for launching or enhancing successful programs. Quantitative studies might evaluate the effectiveness of existing mentoring programs and expand them for non-traditional students.

Conclusion

Findings from this phenomenological study are cautiously optimistic, as they appear to strengthen the body of knowledge around the importance of relational mentoring and suggest it may be an important protective factor for doctoral student mothers. Research suggests that mentoring is an effective means of support for women (Bruce, 1995; Holm et al., 2015; Kelch-Oliver et al., 2013), but in this study, it appeared to be the most salient component for successful completion of their doctoral programs. Combining the effects of dual roles, medical and mental health hardships, isolation, lack of family-friendly accommodations and policies, and struggles with work-life balance made the mentoring experience essential.

Adding to the body of knowledge around mentoring, this research denotes specific qualities of effective mentors and provides rich descriptions of the relationships and roles valued by these student mothers. This may be helpful in CES training, in selecting future mentors, and in setting up mentorship programs. Equipped with clear directives, CES departments can develop mentorship programs, pairing senior professor mentors with junior professors to teach mentoring skills, rewarding faculty for outstanding mentorship, establishing peer mentoring programs, and developing alumni mentorship opportunities. Within programs and across campus, faculty and staff can assist in connecting student and faculty mothers, promote family support groups, and organize family-inclusive activities. Meanwhile, counselor educators can provide flexibility around scheduling comprehensive exams, dissertation timelines, and research opportunities. Counselor educators can lead in bringing this issue to the discussion table around program development and advocacy initiatives. Medina and Magnuson's (2009) statement that "Mothers are the people through whom others' lives are changed" (p. 90) fits well with the ideals of counselor educators; therefore, retaining these mothers in higher education is an important endeavor.

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