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Rogers, Chrissie (2021) *Their 'life' in your hands, or just a job? Exploring the PhD supervisor self and performance of caring work*. In: Twinley, Rebecca and Letherby, Gayle, eds. *The Doctoral Journey as an Emotional, Embodied, Political Experience*. Routledge Taylor & Francis group, London. ISBN 978-0-429-33038-4.

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Ref: Rogers. C. (2021) 'Their 'life' in your hands, or just a job? Exploring the PhD supervisor self and performance of caring work, in R. Twinley and G Letherby [Eds.]. *The Doctoral Journey as an Emotional, Embodied, Political Experience: Stories from the Field*, London, Routledge.

Abstract

Exploring the PhD supervisor self and performance of caring work

To my PhD students, I am the one who metaphorically holds their hand through their research journey, I am the one who knows what buttons to push, and what to say and when to say it - I am the one who can reduce them to tears or place them so high they reach cloud nine and burst with pride. I too can feel these range of emotions vicariously. I question, who am I in my professional role? I am an academic, a researcher, a teacher, a colleague, a PhD supervisor. All roles I take seriously. The PhD student cannot and will not always be my priority yet is part of my academic role in supporting the academy in, I hope, a *care-full* manner. Via an auto/biographic narrative and a care ethics framework I explore the self as a doctoral supervisor. Their doctoral life is in my hands, but at what point does the PhD student take control and recognise the supervisor is 'going home'.

Exploring the PhD supervisor self and performance of caring work

Introduction

The pathway to a PhD is a journey where you will be called to account, is full of seemingly 'other worldly' people too distant sometimes to talk to, and it is always entangled within your own personal story. As a supervisor I am a guide, an academic and a person with history, with my own story. I have travelled the research student route. I understand the necessity of professionalism and the possibility of emotional highs and lows. I also recognise I have expectations and am aware of the assumed and actual power I hold. I do not necessarily bring all this to the supervision table – not to *my* research students' story, but perhaps there is leakage?

To my PhD students, I am the one to metaphorically hold their hand through their research journey. I am the one who feasibly knows what buttons to push, and what to say and when to say it. I am the one who can reduce them to tears or place them so high they reach cloud nine

and burst with pride. I too feel this range of emotions vicariously. Invariably over a period of three or more years, I am part of their story: *emotionally* as they move through their life, *practically* as they negotiate supervision and *socio-politically*, as they navigate bureaucracy, gain a doctorate and perhaps become an academic. I also acknowledge that the supervisory relationship might involve more than one supervisor. In recognition of this, when dual supervision occurs, supervisors do not always see eye to eye theoretically or empirically, or simply there are a clash of personalities. These things happen with human interaction. It is up to the ‘team’ to *care-fully* navigate this and recognise the tensions in a meaningful and caring manner. Necessarily so this chapter is about my supervision and is therefore a sociological auto/biographical reflection (Rogers 2020).

Introducing a care ethics model

Via my disability research I have developed a care ethics model of disability that incorporates and critiques three spheres of caring work – *the emotional*, where love and care are psycho-socially interrogated, *the practical*, where day-to-day care is carried out, and *the socio-political* where social intolerance and aversion to difficult differences are played out (e.g. Rogers 2016, Rogers 2020). I have also mapped my argument onto higher education (Rogers 2017), important for this chapter because the premise of a care ethics model is not about disability *per se*, but about social and political relations where care-less-ness is a form of abuse - emotionally, practically and socio-politically. At the heart of my care ethics model is interdependence. We are all interdependent.

Yet, crucially it is not enough just to say we are all interdependent as it might relinquish socio-political or legal responsibility (Herring, 2013). Or in this case, our responsibility as a supervisor, as according to Held, (2006: 10) ‘human progress and flourishing hinge fundamentally on the care that those needing it receive, and that the ethics of care stresses the moral force of the responsibility to respond to the needs of the dependent’ and that ‘[m]oralities built on the image of the independent, autonomous, rational individual largely overlook the reality of human dependence and the morality for which it calls’ (ibid). In the context of a care ethics model, the supervisor/student straddle these three spheres of caring where trust and respect are key. For them, these spheres are,

- *The emotional* – where the student can share work *without fear*, and the supervisor can deliver critique; care-fully.
- *The practical* – where the supervisor and student make a ‘contract’ to meet and share the everyday tasks involved with trust and respect.
- *The socio-political* – where all involved in this supervisory/student relationship adhere to the responsibility of carrying out research ethically and morally.

Considering this, as a supervisor I have been described as giving ‘academic wings to fly’ (Cooper, 2013). I have been called a ‘mama lioness’, by Amy Simmons (2020), who went on to say in her acknowledgements ‘may our bond never break [...] Without you, there would be no thesis. With you I have the strength to confront my demons. Where you are, that is ‘home’. And Benita McLachlan (2012) has said about me:

I will be in debt forever. She believed in my research, the relevance and importance of providing meaningful, ethical education for individuals with disabilities in colleges, when others were not so sure. She put her trust and judgement in my personal, professional and academic abilities and made me believe in myself. Thank you for providing me with so many challenges and opportunities to learn, for your consistent encouragement, support and positivity; they are very, very much appreciated.

Anecdotally, I have had research students describe me as ‘my uni Mum’ and ‘my sister from another mister’. The words and sentiments used in these acknowledgements and anecdotes are incredibly poignant and emotive, and I again acknowledge my powerful position in this higher education hierarchy and their individual journeys.

These and all my students therefore, form part of my caring story as,

- *Emotionally*, I hear their stories of a life lived and they become part of my wider relationship network. My research students have/had disabling conditions, mental health challenges, English as an additional language, children to care for, parents who suffer, friends who die.
- *Practically*, I review their work and negotiate supervision, cancel/reschedule meetings and participate in ad-hoc on-line conversations when circumstances require it. Never more so critical during a global pandemic: COVID19.

- *Socio-politically*, I rail against bureaucratic systems, manage the paperwork, and then gain that seemingly all-important completion.

What draws all these experiences together for me – from those who demand more of me than I can give, to those who fade into the background - is that I care about my students and that it is an interdependent relationship. But what does this care mean, feel, or look like? Below I consider my care ethics model as a response to and ‘conversation with’ an ethics of care.

The research supervisor(s) as a caring other: an ethics of care

I have found care-less (and care-full) spaces, for example, in schools, the home, local authorities, relationships (intimate or otherwise), communities, higher education and the criminal justice system (e.g. Rogers 2016, 2017, 2019y, 2020). So, when asked to write this piece it made sense to consider the interdependent relationship between the research supervisor and their student through the lens of a care ethics model. Although in the latter part of reflecting upon this chapter, I did not expect to be on COVID19 induced lockdown. That said, the caring work that goes on during a PhD journey, in terms of virtual caring, is both significant and insignificant. It is significant because we are no longer, during this period in 2020 able to meet in person and enjoy that human interdependent in situ interaction. Yet insignificant because such a large part of our interaction is online, via one or other internet social media platforms or a virtual learning environment due to all kinds of everyday caring and work commitments.

Noddings’ (2003) work is important here both considering past PhD relationships and reflecting upon COVID19 in the conceptualisation of care and caring, as she talks about an alternative moral theory and offers a detailed definition of care as a central, crucial and *human practice* (see Rogers and Weller 2013, and Rogers 2016, Ruddick 1989). Care as a practice is therefore learnt and importantly improvable. Noddings (2003: 5) also argues that experiences of being cared for are definitively human, or ‘universally accessible’. This point illustrates a significant theme in feminist care ethics and therefore my care ethics model, which is to highlight the commonality of human vulnerability, not just at the beginning and end of life, but as a constant and fundamental condition. Just this alone is significant, as two or more people, begin a supervisor/student relationship that spans several years, where the supervisor(s) is in a more powerful, yet potentially caring position with their research student.

At a time when a global drive to increase post graduate research (PGR) student numbers is apparent (Parker-Jenkins 2018, Friedrich-Neil and Mac Kinnon 2019), doctoral research is truncated (Halse 2011), work-load demand is problematic (Lee 2008, Turner 2015), expectations on the supervisor are high, in a sometimes toxic environment (Rogers 2017), *and* during a global pandemic such as COVID19 when many research students and supervisors alike are also caring domestically (e.g. home-schooling, shielding disabled or elderly family), are at financial risk or are in a poisonous relationships, it is vital to discuss care in the context of doctoral supervision, because we all need care. The student and the supervisor(s) need care and are interdependent.

As it is, Noddings (2003) presents a central relationship between the ‘one-caring’ and the ‘cared-for’; arguing that while a relationship involves both parties, often, the one-caring is practically doing more work. It is neither symmetrical nor equal, yet those who are ‘cared for’ are always seen as contributing. This is noteworthy as the doctoral student is doing more work, essentially. They are working much of the time on their PhD or professional doctorate, or at least it is a focus that delineates their life. The supervisor is a guide, a producer in that journey. The supervisor has many other roles, and perhaps several other research students too. Yet, between those caring (the supervisor) and those cared for (the student) there are important implications for developing a feminist moral theory which does not relegate or romanticise women’s experiences of care, and which does not reduce caring to a selfless or self-sacrificial act.

Noddings (2003), significantly makes this distinction between ‘caring for’, which she sees as involving caring activities and responsibilities experienced directly, and ‘caring about’ which involves a more indirect concern and potential for caring activity with those at greater distance. I might say I care about my PhD students, and some more than others. I also feel that perhaps some need me to care more than others. I am not sure I care *for* my students, certainly not in the way I care for my adult disabled daughter. I do not have the space to go into a discussion about responsibility and obligation here (see Rogers 2016) but caring *for* and *about* is remarkable when considering power, expectations and the supervisor/student relationship.

Supervisors and inter-subjectivity

Helen Lucey and I wrote about power and the unconscious in doctoral student-supervisor relationships. Through a psychosocial lens we drew upon three PhD student narratives and

identified how student-supervisor relations are shaped intersubjectively. Significantly, early memories about caring relations with parents and sisters surfaced as feelings were transferred and projected onto supervisor relationships (Lucey and Rogers 2007). Albeit in a limited capacity, I draw attention to excerpts from Sarah and Elaine to identify how their 'lives' were in the hands of their supervisors, bearing in mind these stories are from the perspective of the student. As a supervisor, I wanted to reflect upon the other side, in response to elements of these narratives below. For example, Sarah told us about idolising her supervisor as 'she seemed to be able to do something with my words and ideas. I don't know, turn them into another language, an academic language that I was dazzled by. I was dazzled by her to be honest [...] I knew that I couldn't do anything without her (Lucey and Rogers 2007: 27). Yet their relationship broke down as Sarah was 'furious' that her supervisor left the university. Elaine spoke of awe and sourness. She described her PhD supervisor as 'seductive, engaging and remained enthusiastic' (Lucey and Rogers 2007: 31). Yet as time passed Elaine said her supervisor began to remind her of her mother with negative consequences. She went on to tell us 'I'm afraid this way of working brought out the rebellious and maybe even childlike aspect of my self. If she was going to treat me like a child then I guess I would behave like one' (ibid: 32).

Both Sarah and Elaine began their journey by idealising their supervisor and having high expectations. This is something I have experienced as a supervisor and it can be deeply uncomfortable. Moreover, it is rarely a dynamic that can be sustained in perpetuity: it is a common experience for idealised objects to fall off the pedestal on which they have been installed. The idealised object inevitably fails to live up to the expectations and can quickly turn into its opposite (Lucey and Rogers 2007). I have yet to experience this negative aspect - as far as I know. Evidently, just from these two stories above, power and care (or care-lessness) play a large part in research student/supervisor relations. But who does really care? What does power look and feel like? How does this impact upon the supervisor? As I have said, it can feel uncomfortable. Evidently in the case of Elaine and Sarah we cannot know for sure how either of them really felt. Personally, I do not recognise Elaine and Sarah's stories when it comes to *my* research students and our relationships, but this is through my lens as a supervisor. Perhaps contemplating this is key in understanding the power/care dynamics from a supervisor's position? I am at work as a research supervisor. It is my job. The research student is starting a journey that will invariably take over their life, leak into their relationships, and

ultimately it is a journey that can make or break them. The supervisor is party to that journey, as seen above, yet they are also on their own academic journey. I am on my own academic journey.

Spaces of caring, friendship and power: an ethics of care and justice?

I have seen through to completion several doctoral students and as I have suggested, I consider all the relationships to be meaningful, personally as well as professionally. Some have drifted away, after finishing their doctoral journey, some have become friends, or at least remained close acquaintances. No relationship has been toxic, controlling, argumentative or even *laisse faire*, as far as *I* understand. It is both wonderful and satisfying to watch and be part of a 'new scholar become an independent researcher, conduct a project, write up the results, present them at a conference and see the first publications' (Delamont et al. 2004: 1). Moreover, to guide a new scholar into 'your specialism is intrinsically rewarding and the best way to ensure that your own work echoes down to the next generation and beyond' (*ibid*). But, as I have said, for the research student this relationship *may* be the single most important one for three years or more. The supervisor(s) at least will be in a position of authority within a department (in relation to the research student) and be trusted to guide and supervise the student through their research journey. This aspect of power can only be described as a micro political analysis of interpersonal and persuasive power. In a way the student/supervisory relationship could be described as the patriarch of micro bureaucratic systems of control within the academy (Lucey and Rogers 2007).

Returning to a feminist ethics of care and the building blocks of my care ethics model, we can see a conceptualising of care that forms the basis for the recognition and *valuing* of caring work and caring relations and provides an important platform for the notions of interdependence and a relational self (Robinson, 2011a, b; Sevenhuijsen, 1998; Tronto, 1993a, b). Whatever the above says about care, whether it is care-less (felt or real), in the case of Sarah and Elaine (Lucey and Rogers, 2007) or care-full, as in the case of my student reflections it is important to value and consider care. Significantly, Tronto and Fisher (1990) offer a slightly different, broader definition of caring than that of Noddings (2003), who I discuss earlier, and suggest 'a species activity that includes everything that we do to maintain, continue and repair our 'world', so that we can live in it as well as possible' (Tronto and Fisher, 1990: 40). They set

out what they describe as four aspects of care: caring about, taking care of, care giving and care receiving. Furthermore, alongside these aspects are corresponding ethical values: attentiveness, responsibility, competence and responsiveness, each of which also act as evaluative criteria, producing both the possibility for considering good enough caring, and for defining moral or ethical failings, such as ‘inattentiveness’ or ‘privileged irresponsibility’.

All of these are important and relevant when disentangling higher education and the research student/supervisor relationship. Particularly as both the student and the supervisor are monitored and perhaps judged for their work practice (Lee 2008, Parker-Jenkins 2018, Turner 2015). Especially as an ethics of care is different to an ethics of justice, as described here,

[an] ethic of justice focuses on questions of fairness, equality, individual rights, abstract principles, and the consistent application of them. An ethic of care focuses on attentiveness, trust, responsiveness to need, narrative nuance and cultivating caring relations (Held 2006: 3-4)

If justice and care are considered oppositional, then an ethics of care must either be convincingly presented as a preferable alternative, or risk being relegated to a secondary positioning. Arguably when it comes to doctoral supervision, care is of paramount importance. For writers such as Tronto, there is a risk associated with what she sees as ‘feminine’ accounts of an ethics of care: ‘As long as women’s morality is viewed as different and more particular than mainstream moral thought, it inevitably will be treated as a secondary form of moral thinking’ (Tronto 1993a: 246). If an ethics of care is seen as a replacement for an ethic of justice, then this could be detrimental to the pursuit of equality; a conception and language of ‘rights’ has long been a resource for those challenging prejudice and discrimination. An alternative strategy is to see justice and care as, in some ways, and to some extent, compatible or integrated, and that both may be necessary for a systematic theory of morality and ethics.

I would certainly promote both justice and care when it comes to research student supervision, and my care ethics model of disability incorporates both caring and justice (Rogers 2016). However, there are several significant issues involved in attempting to reconcile or combine caring and justice, such as the conception and evaluation of needs. Part of exploring the extent to which care and justice perspectives may share common concerns or contain elements of one another, has been to consider the kinds of moral questions they ask, or the moral problems they

raise. One such question, as identified by Tronto (1993b), is how best to understand human 'needs' and how competing needs may be evaluated and met. Tronto offers a critical consideration of the conception of need, arguing that a care perspective may offer a more appropriate means of understanding, and judging, complex human needs. For example, she argues that a traditional model of justice concerning rights-bearing individuals tends to reduce or alienate those deemed 'needy', presenting a skewed and inaccurate picture of the characteristics of both the people themselves and their needs.

Because an ethics of care foregrounds human vulnerability and the need for care, where care is seen as relating to material, emotional and psychological well-being, Tronto (1993a) argues that it not only incorporates justice questions, but is equally, if not better, placed to respond to them. This is certainly pertinent when considering doctoral supervision. Perhaps an anodyne example of supervision relating to student well-being and care is reflecting upon space and place, although not so anodyne considering COVID19 and restrictions on movement. I therefore ask does supervision always happen in the office and does this automatically assume professionalism, justice and emotional distance?

Arguably that might be the only place it ought to happen, however, I have supervised in cafés, online in various forms, in my home, service stations, and my office. Indeed, the supervisions that were carried out in my home, were probably the most professional, yet in my office PhD students have cried, hugged and relayed stories of personal and intimate trauma (evidently missing during a global pandemic: COVID19). The caring work of a supervisor is not monitored in a way that can be measured and the idea of care being public is not just about the public in the socio-political sphere, (wider public and bureaucracy), although this is important, but about care, caring and relationality being the guiding principles of care ethics and morality emotively and perhaps physically. And as Noddings describes: 'To be with another in time of trouble is better than to be permanently alone and trouble free [...] One loses both the "human" and the "being" when one is severed from all relation' (Noddings, 2003: 174). This might be more pointed than ever during a global pandemic, where physical distancing is regulated if not banned.

Final remarks

This chapter is necessarily my story and reflection. The research student, *my* research students, might have a different tale to tell (indeed reflect upon what is it like when their supervisor, me, does indeed go home, turn off the computer and call time). This chapter also focusses on previous research about PhD supervision, interpersonal relations and power (Lucey and Rogers 2007, Rogers 2017) and care ethics (Rogers 2016, 2017, 2019). For me these areas intersect in discussing the doctoral student, the supervisor self and the doctoral research training context.

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