This thesis is submitted to Charles Sturt University for the Doctor of Philosophy.

“Illuminating Honours: exploring the experience of Allied Health students using a phenomenological approach”.

Caroline Robinson  MSc FCPodS DPodM

October 2011
## Contents

### Chapter 1: Introduction

<table>
<thead>
<tr>
<th>Section</th>
<th>Page number</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1 My Early Experience of Working and Learning</td>
<td>2</td>
</tr>
<tr>
<td>1.2 Major Influences Which Have Informed My Perspective</td>
<td>3</td>
</tr>
<tr>
<td>1.3 Working with Undergraduate and Postgraduate Students</td>
<td>4</td>
</tr>
<tr>
<td>1.4 My Relationship with Honours</td>
<td>5</td>
</tr>
<tr>
<td>1.5 Honours in Australia</td>
<td>6</td>
</tr>
<tr>
<td>1.6 Justification for This Study</td>
<td>10</td>
</tr>
<tr>
<td>1.7 Structure of the Thesis and Overview</td>
<td>13</td>
</tr>
</tbody>
</table>

### Chapter 2: Literature review

<table>
<thead>
<tr>
<th>Section</th>
<th>Page number</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1 Knowledge and Knowing</td>
<td>15</td>
</tr>
<tr>
<td>2.1.1 Contemporary Views of Knowledge</td>
<td>15</td>
</tr>
<tr>
<td>2.1.2 Knowledge in Society</td>
<td>17</td>
</tr>
<tr>
<td>2.1.3 Learning and Knowledge Creation</td>
<td>19</td>
</tr>
<tr>
<td>2.2 Communities of Practice</td>
<td>22</td>
</tr>
<tr>
<td>2.3 Practice Knowledge in Allied Health</td>
<td>24</td>
</tr>
<tr>
<td>2.3.1 Allied Health Professionals</td>
<td>24</td>
</tr>
<tr>
<td>2.3.2 Educating Allied Health Professionals</td>
<td>25</td>
</tr>
<tr>
<td>2.3.3 Becoming an Allied Health Professional</td>
<td>26</td>
</tr>
<tr>
<td>2.3.4 Practice Knowledge</td>
<td>28</td>
</tr>
<tr>
<td>2.4 Research Into Allied Health Practice</td>
<td>30</td>
</tr>
</tbody>
</table>
2.4.1 The Practice-Research Nexus 32
2.4.2 Practitioner-Researchers 35

2.5 Undergraduate Education and Research 38
2.5.1 Being an Undergraduate Student 38
2.5.2 Self-belief, Will and Motivation 40
2.5.3 Attitudes Towards Research 43
2.5.4 Barriers to Undergraduate Research 47
2.5.5 Learning Through Research 50
2.5.6 Undergraduate Research Experience and Career Goal 57

2.6 Honours Study 60
2.6.1 Structure of Honours Programs in Australia 60
2.6.2 The Role of Honours Programs in Contemporary Australian Higher Education 61
2.6.3 Research into Honours 63

2.7 Identifying the Knowledge Gap 71

2.8 Research Questions 74

Chapter 3: Methodology 75
3.1 Locating the Study 75
3.2 Framework for Research Design 76
3.3 Ontological and Epistemological Position 76
3.3.1 Constructivism and Constructionism 77
3.4 Theoretical Perspective 79
<table>
<thead>
<tr>
<th>Section</th>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.4.1</td>
<td>An Interpretivist Approach</td>
<td>79</td>
</tr>
<tr>
<td>3.5</td>
<td>Methodology</td>
<td>81</td>
</tr>
<tr>
<td>3.5.1</td>
<td>Qualitative Research</td>
<td>81</td>
</tr>
<tr>
<td>3.5.2</td>
<td>Phenomenology</td>
<td>82</td>
</tr>
<tr>
<td>3.6</td>
<td>Research Design</td>
<td>85</td>
</tr>
<tr>
<td>3.6.1</td>
<td>Hermeneutic Phenomenology</td>
<td>85</td>
</tr>
<tr>
<td>3.6.2</td>
<td>Philosophical Hermeneutics</td>
<td>86</td>
</tr>
<tr>
<td>3.7</td>
<td>Research participants</td>
<td>88</td>
</tr>
<tr>
<td>3.7.1</td>
<td>Allied Health Honours Students</td>
<td>88</td>
</tr>
<tr>
<td>3.7.2</td>
<td>Finding Participants</td>
<td>90</td>
</tr>
<tr>
<td>3.7.3</td>
<td>Recruitment</td>
<td>92</td>
</tr>
<tr>
<td>3.8</td>
<td>Methods</td>
<td>94</td>
</tr>
<tr>
<td>3.8.1</td>
<td>Interviews and Interviewing</td>
<td>94</td>
</tr>
<tr>
<td>3.8.2</td>
<td>Semi-structured Interviews</td>
<td>95</td>
</tr>
<tr>
<td>3.8.3</td>
<td>Development of Interviews Over Time</td>
<td>97</td>
</tr>
<tr>
<td>3.8.4</td>
<td>Vignette</td>
<td>99</td>
</tr>
<tr>
<td>3.9</td>
<td>Ethical Issues</td>
<td>101</td>
</tr>
<tr>
<td>3.9.1</td>
<td>Respect for Participants</td>
<td>101</td>
</tr>
<tr>
<td>3.9.2</td>
<td>Working with Students and the Potential for Coercion</td>
<td>101</td>
</tr>
<tr>
<td>3.9.3</td>
<td>Beneficence</td>
<td>102</td>
</tr>
<tr>
<td>3.9.4</td>
<td>Risk and Risk Management</td>
<td>102</td>
</tr>
<tr>
<td>3.10</td>
<td>Trustworthiness and authenticity</td>
<td>103</td>
</tr>
<tr>
<td>3.10.1</td>
<td>Credibility</td>
<td>104</td>
</tr>
</tbody>
</table>
3.10.2 Dependability 107
3.10.3 Transferability 108

3.11 Data Collection and Data Analysis 110
3.11.1 Acknowledging Personal Viewpoints and Assumptions 110
3.11.2 Data Collection 112
3.11.3 Framework for Data Analysis 112
3.11.4 The Hermeneutic Circle 113
3.11.5 Data Analysis 115

Chapter 4: Finding the Pieces 122

4.1 Metaphor to Illuminate Honours 123
4.2 ‘Finding the Pieces’ 126
4.3 Challenging Self 127
   4.3.1 Honours Decision Making 127
   4.3.2 Motivation 130
   4.3.3 Challenges 133
   4.3.4 Perceptions of Honours Students 136
4.4 A Different Way of Being 138
   4.4.1 A Different Way of Working and Learning 138
   4.4.2 Feelings About Honours 143
4.5 Coping 147
   4.5.1 Managing Workload 147
   4.5.2 Coping Strategies 153
4.5.3 Support Networks 154
4.5.4 Impact on Life 156

Chapter 5: Structuring the Form and Building the Layers 159
5.1 Communities of Practice 159
  5.1.1 Honours Peer Support 159
  5.1.2 Research Supervisors 165
  5.1.3 Research Community of Practice 172
  5.1.4 Relationships with Academic Staff 175
5.2 Self-actualisation 177
  5.2.1 Self-belief 177
  5.2.2 Honours as an Enabling Experience 179
5.3 Becoming a Practitioner-Researcher 180
  5.3.1 Contributing to Professional Knowledge 180
  5.3.2 Research Skills 183
  5.3.3 Writing for Research 186
  5.3.4 Extending Personal Knowledge 189

Chapter 6: Crafting the Vase 193
6.1 The Vignette 193
6.2 New Perspectives 200
  6.2.1 Talking About Honours 200
  6.2.2 New Perspectives 204
6.3 Practice-Research Nexus 207
  6.3.1 Relationship of Honours to Clinical Practice 207
  6.3.2 Research vs. Clinical Practice 212
6.4 Career Decision Making 214
  6.4.1 Career Decision Making Related to Honours 214
  6.4.2 Foundation for Research 217
  6.4.3 Opportunities with Honours 220

Chapter 7: Synthesis and Recommendations 223
7.1 Being and Becoming an Honours Student 223
7.2 Being and Becoming an Allied Health Professional 225
7.3 Challenging Self 226
7.4 Coping 228
7.5 Self-actualisation 230
7.6 New Perspectives 231
7.7 Becoming a Practitioner-Researcher 232
7.8 Career Decision Making 234
7.9 Communities of Practice 235
7.10 Implications of This Study 239
7.11 Recommendations Arising From This Study 241
7.12 Limitations of This Study 250
7.13 Areas for Future Research 251
Appendices

Appendix A  Australian Qualifications Framework specification for the Bachelor Honours Degree 255
Appendix B  Study information sheet 256
Appendix C  Consent form 258
Appendix D  Interview guide for the early interviews 259
Appendix E  Interview guide for the mid interviews 260
Appendix F  Interview guide for the final interviews 261
Appendix G  Items and emergent themes from the early interviews 262
Appendix H  Items and emergent themes from the mid interviews 265
Appendix I  Items and emergent themes from the final interviews 269

References 271
## Figures and tables

### Figures

<table>
<thead>
<tr>
<th>Figure</th>
<th>Description</th>
<th>Page number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Figure 1</td>
<td>Quadrant model of applied and basic research</td>
<td>31</td>
</tr>
<tr>
<td>Figure 2</td>
<td>The undergraduate research-learning nexus</td>
<td>51</td>
</tr>
<tr>
<td>Figure 3</td>
<td>Duration of Honours programs</td>
<td>89</td>
</tr>
<tr>
<td>Figure 4</td>
<td>Thematic representation of the Honours experience</td>
<td>121 + 221</td>
</tr>
</tbody>
</table>

### Tables

<table>
<thead>
<tr>
<th>Table</th>
<th>Description</th>
<th>Page number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Table 1</td>
<td>Structure of Honours programs in Australia</td>
<td>61</td>
</tr>
<tr>
<td>Table 2</td>
<td>Summary of existing Honours research</td>
<td>65</td>
</tr>
<tr>
<td>Table 3</td>
<td>Demographic data for participants</td>
<td>93</td>
</tr>
<tr>
<td>Table 4</td>
<td>Interview timing through 2009-2011</td>
<td>99</td>
</tr>
<tr>
<td>Table 5</td>
<td>Emergent themes and items from interviews</td>
<td>118</td>
</tr>
<tr>
<td>Table 6</td>
<td>Relationships between themes and interview items</td>
<td>119</td>
</tr>
<tr>
<td>Table 7</td>
<td>National and institutional statements about the purpose of Honours</td>
<td>249</td>
</tr>
</tbody>
</table>
Certificate of authorship

“I hereby declare that this submission is my own work and that, to the best of my knowledge and belief, it contains no material previously published or written by another person nor material which to a substantial extent has been accepted for the award of any other degree or diploma at Charles Sturt University or any other educational institution, except where due acknowledgment is made in the thesis. Any contribution made to the research by colleagues with whom I have worked at Charles Sturt University or elsewhere during my candidature is fully acknowledged.

I agree that this thesis be accessible for the purpose of study and research in accordance with the normal conditions established by the Executive Director, Library Services or nominee, for the care, loan and reproduction of theses.”

Signed……………………………………………………………

Name………………………………………………………………

Date………………………………………………………………
Acknowledgements

This thesis is for David, Tomas and Ellie who have lived with it for as long as I have. Thank you for looking after me, making me laugh and reminding me that there are other things in life. I could not have done it without all your love and support.

Thank you to my research supervisors: to Professor Erica Smith and Professor Gail Whiteford for having the faith to get me started and advising me during the first two years; to Professor Mike Keppell for your kindness, pragmatism, holistic view and for enabling me to know that I could achieve my goal; to Dr. Stephen Loftus for your empathy, wisdom, attention to detail and for helping me to understand phenomenology. Thank you for your help over the years, I have learned so much from you all.

Thank you to the Honours students who participated in this study. You gave me time in your busy lives and without your contribution there would be no thesis. Thank you so much for allowing me into your worlds, for your honesty and your insight. I wish you all well on your own journeys.

Thank you to Robert Hurley for your excellent graphic design skills and to Kylie Wealands for your attention to detail in editing this thesis. Thank you to my work colleagues for your support and for feedback on my writing.

Finally thank you to all of my family for being interested in what I was doing; Mum, Jonathan, Ginny and Jeremy. Your love, support and encouragement means so much to me. I’m sorry you didn’t get to see me finish it Dad but I know you would be delighted.

You are never given a wish without also being given the power to make it true. You may have to work for it, however. (Richard Bach, 1978)
Mrs. Kylie Wealands provided paid editorial assistance with the final version of this thesis. Kylie is an English teacher and has no similar academic specialisation to the author. Editorial assistance comprised correction of punctuation and minor changes to formatting, to ensure that the presentation conformed to APA guidelines.
Ethics approval

This study was approved by the Charles Sturt University Human Research Ethics Committee. The ethics approval number is 2006/323.

The names of all the participants and any research supervisors they referred to have been replaced with pseudonyms.
Abstract

This thesis provides an insight into the experience of ten Australian Honours students and questions the purpose of Honours in Allied Health.

This study was conducted at a regional university in New South Wales and a metropolitan university in Victoria, with students from Occupational Therapy, Physiotherapy, Podiatry and Speech Pathology. The undergraduate research experience for these students was an 'embedded' Honours program, spanning one to two years. The research is grounded in social constructionism and used a phenomenological methodology to illuminate the ‘being’ and ‘becoming’ of these Honours students. Interviews conducted at the early, mid and late stages of Honours explored a range of issues such as motivation for Honours, learning through Honours, and the relevance of Honours to career planning. Nine major themes emerged from the data and these enabled a representation of the students’ experience of Honours: ‘challenging self’; ‘a different way of being’; ‘communities of practice’; ‘self-actualisation’; ‘becoming a practitioner-researcher’; ‘new perspectives’; ‘research-practice nexus’; and ‘career decision making’.

By studying the experience of Honours students in Allied Health, this research is suggesting that the purpose of Honours needs to be reconsidered. The current accepted role of Honours in Australian higher education is as a mechanism to advance disciplinary knowledge, provide research training and produce a substantial independent research thesis/project. However, it is inadequate to articulate the complexity of the Honours experience. The recommendations arising from this study ensure that the purpose of Honours, from the perspective of the institution and the Allied Health professions, more closely aligns with the motivations of the Honours students. This is vital to secure the continuing recruitment of Honours students in Allied Health, the development of future practitioner-researchers and the ongoing generation of new practice knowledge.
Chapter 1: Introduction

Why I didn't do it was because I was really concerned about the grade point average. With my GPA falling below 5, this automatically made me lack confidence in myself and my ability to complete Honours. I was also concerned about the work load of my subjects plus the additional work that would go with Honours. To be honest I was really worried that I would fail my other course subjects and probably fail Honours as well. (Kendall, 3rd year podiatry student, 2011)

Kendall is one of my third year podiatry students. She is one of only three students in her cohort of twenty, who had considered Honours at the end of their second year, but neither Kendall nor the other two students chose to enrol in Honours. This quote was Kendall’s response to me when I asked her why she had decided not to undertake Honours.

I deliberately chose this quote to introduce this thesis because it captures many of the issues in which I am interested, and resonates with my concerns about Honours. Kendall’s emphasis on grade point average makes me worried about the value of using this outcome as the preferred indicator for selecting Honours students. Her association between grade point average and self confidence in her ability to complete Honours, makes me question the purpose of Honours. Her concern about workload and fear of failure makes me reflect on the perception of Honours by undergraduate students in Allied Health. I worry that a student’s interest in exploring an area of practice, and their desire to make a contribution to practice knowledge, can be overshadowed by the perceived burden of an undergraduate research experience. Kendall is only one prospective Honours student who thought that she would enjoy research, but who decided that Honours was not worth the risk.

My study seeks to shed light on the complex phenomenon of Honours, through gaining a deeper understanding of the students’ experience, in order to inform the purpose of Honours in Allied Health. It is important to recognise my position in this study and the
experience I bring to this research. As a podiatrist, a lecturer and an Honours coordinator in the School of Community Health at Charles Sturt University, I have my own perspective on Honours and a good degree of insider knowledge. I made the decision to introduce myself as a practitioner and a researcher, prior to discussing the socio-political relevance of Honours in Allied Health and providing a justification for this study, so that the reader would know me first. My background and professional experience shape my approach to this study.

The self is always an integral part of any study. Writing the self into the research is only the beginning, not its end or purpose. (Holloway & Biley, 2011, p. 971)

1.1 My Early Experience of Working and Learning

In order to find the seed of interest which justifies the importance of this study to me, and the value of this research to others, I need to explore and reflect on my experiences. I graduated as a podiatrist in London in 1982, having studied a three year undergraduate diploma course. My memory of being an undergraduate podiatry student is that I did what I was told to do by my tutors, with minimal thought paid to the evidence base for practice knowledge and no articulation of reflective practice. Donald Schön’s seminal work on the ‘reflective practitioner’ was not published until 1983. After graduating I worked as a clinical podiatrist in the East End of London, caring primarily for older people with complex medical and social histories, who often lived in very impoverished conditions. My early experiences made me realise that my undergraduate study, whilst providing me with the skills to practise, had only prepared me with baseline knowledge. I was certainly underprepared for ‘real-world’ practice and my learning curve was very steep in those first few years. I considered that my learning in the workplace was authentic in that I learnt not only about practice, but also about myself as a health practitioner. Eager for more formal learning experiences I undertook professional update courses, and then in 1985 I commenced a Masters degree in pharmacology. At the outset I felt that I was undertaking this course purely for personal academic reasons. I liked studying and this course offered me something different to the standard podiatry education. However, I didn’t consider the broader professional implications of this academic work until towards the end of the Masters course. Through my small Masters
research project, which investigated the effect of local anaesthetic drugs on vascular physiology, I began to see the relationship between research and professional practice. I think that this important insight provided me with the incentive to do some teaching. I continued to work as a clinical podiatrist for the British National Health Service and began teaching Chemistry part time to students on a science access course. These were students who did not have the necessary qualifications to enter the Bachelor of Science (BSc) in Podiatry course, and were required to study an access course for one year as a prerequisite to entry to the BSc. I experienced teaching as challenging, enjoyable, and gratifying and I was successful in gaining a full time position as a lecturer in podiatry in 1992.

1.2 Major Influences Which Have Informed My Perspective

On reflection there have been some major influences over the last 19 years which have shaped my thinking about education, practice, and research, and have led me to undertake this study on Honours. One of the most potent experiences for me was my journey to becoming a podiatric surgeon. I commenced this specialised postgraduate study in 1992, undertaking theory courses in anatomy, diagnostic investigations, medicine and surgery, which culminated in an entrance examination. Passing this examination enabled me to commence my surgical apprenticeship with a podiatric surgeon. My experience in the field of podiatric surgery was quite shocking in the sense of injustice I felt. The examination system was archaic with just a 30% pass rate at the entrance examination. Students were not supported to pass the examination, but subjected to humiliating *viva voce* examinations. The emphasis was certainly not on professional development but on content knowledge. The gatekeepers were all men and in the early 1990s less than 10% of the members of the Faculty of Podiatric Surgery in the UK were women. It seemed to me that the apprenticeship model of surgical education was also repressive, and in stark contrast to the expansive changes emerging in higher education at that time, such as student centred learning and development of reflective practitioners. My job as a university lecturer enabled me to view my education as a podiatric surgeon from a contemporary perspective, and this emboldened me to want to make change. I did go on to develop a Masters course in
podiatric surgery, in order to ensure that students would benefit from a structured approach to learning, with lecturers who cared about their educational development. A Masters course also ensured that students would have the opportunity to research practice, and this was becoming an increasingly important element for me.

1.3 Working with Undergraduate and Postgraduate Students

Through my work with podiatry Masters students I had realised the change which happened in them. It was apparent to me that they started the course as practitioners seeking a challenge, but over time as they gradually increased in self-confidence, they became more critical health professionals. The students only came together to study for week-long modules and the importance of this supportive community of practice was evident to me, as the course coordinator. They worked together during the week and then returned to practice, working on set assessment tasks before coming together again, eager for the next module. The opportunity to explore practice through research enabled these students to think as practitioner-researchers and to make a contribution to practice knowledge. Some of the students were successful in having papers accepted for publication, and this dissemination of their work further enhanced their Masters study. The potency of this learning experience in transforming these podiatry practitioners has stayed with me, and is another important influence for my study.

My undergraduate teaching was no doubt informed by my work with these Masters students, and necessarily influenced my perspective on undergraduate research. In the UK, Honours is embedded within all three year undergraduate Allied Health courses, and all eligible students graduate with a Bachelor (Honours) degree. I was acclimatised to a system where all the students participated in Honours research, and managed to integrate this with their other academic and social commitments. I enjoyed supervising Honours students, and had seen the value of this undergraduate research experience in enthusing students for postgraduate study. It came as some surprise when I moved to Australia in 2005 to work as a lecturer in podiatry at Charles Sturt University, to find that undergraduate Allied Health students spend four years at university, and also that Honours is optional. It was clearly evident to me that many academically capable
students were choosing not to study Honours, and this attracted my interest. I became aware of the Honours stereotypes portrayed by the podiatry students, and this negativity intrigued me. I heard that Honours was very stressful; that students didn’t have the time to do Honours and all their other subjects; that Honours would not make any difference to their employability; and that Honours was not relevant to their career path as they did not intend to become academics. Students also commonly doubted their academic ability to cope with Honours. In my experience Honours was, and still is, perceived as being appropriate only for the high-achieving students. Despite this aura of doom some of the podiatry students did enrol in and complete Honours. However, the numbers of podiatry Honours students were less than those from occupational therapy, physiotherapy and speech pathology. This is still the case now, as it was six years ago.

1.4 My Relationship With Honours

My relationship with these Honours students is as a supervisor for some of the students, and as the Honours coordinator for the School of Community Health. This close relationship with the Honours students gives me a privileged insight into their experience, and a desire to better understand Honours from the students’ perspective. Honours as an undergraduate research experience is fascinating for me. I want to understand whether the perception of Honours as a stressful and high risk experience, reflects accurately the lived experience of Honours students. I want to know how the experience of Honours changes an undergraduate student, both in terms of their professional practice and their personal development. Ultimately, I want to know to what extent Honours, as an undergraduate research experience, enables the development of practitioner-researchers in Allied Health. Through a deeper understanding of the students’ experience, and in my position as Honours coordinator, I have the capacity to facilitate change. I would like the experience of Honours to be something that many more students find appealing. I believe strongly that an undergraduate research experience can be transformative, and would like to see many more Allied Health students undertaking Honours. I am unable to experience being an Honours student myself, but I can immerse myself in the students’ world.
If we are to fully understand knowing within various forms of professional practice, we must understand the being of those who know. (Dall’Alba, 2009a, p. 25)

I have come to understand the experiences over my professional career, which have led me to undertake this study. At the most fundamental level I believe that it is my perspective on the transformational potential of learning experiences which is the greatest influence. The stark contrast between what I perceived as an empowering learning experience for podiatry Masters students, and my personal experience of podiatric surgery education, is the impetus for this study. There is a personally intriguing parallel for me as a PhD student and the Allied Health Honours students. As I am learning to ‘be’ and am becoming a researcher, so the undergraduate students are learning to ‘be’, and are becoming practitioner-researchers. Although I am very different to these students in terms of practice expertise, professional knowledge and research experience, I am a novice PhD student. Honours is a similarly unknown experience for these undergraduate students, but together we have accepted a challenge and are all starting out on an unfamiliar journey.

It is important to articulate my perspective in the light of my professional and personal experience, because this is the lens through which I will explore the students’ experience of Honours. However, it is also necessary to consider the relevance of this study more broadly, beyond that of me as the researcher. The next part of this introduction considers Honours in Australia, in order to provide a firm foundation for this study. This discussion provides only a brief consideration of Honours in the context of the current political climate in higher education, and in the light of contemporary developments within the Allied Health professions. A much more extensive critique of Honours is included in the literature review in Chapter 2.

1.5 Honours in Australia
Currently there is debate around the future of Honours in higher education in light of the European Bologna Process; the international value of an Australian Honours qualification; the emergence of graduate entry masters programs; a national decline in
the number of Honours students; and the process of higher research degree scholarship selection.

The changing global context is challenging higher education internationally and Australia is not immune to these challenges. Given the pivotal role of Honours in the Australian higher education curriculum, it is not surprising that the challenge is quite acute at this level. (Kiley et al., 2009, p. 10)

Honours programs are known to be complex and variable across the Australian higher education institutions, but three core curriculum features have been identified: advanced disciplinary knowledge; research training; and a substantial independent research thesis/project (Kiley, Nursoo, et al., 2009, p. 6). Although these common features do articulate a concise purpose of Honours, measurable in terms of outcomes, they cannot convey the complexity of the experience of Honours. Additionally, these features are generic to all Honours programs regardless of program style and student pathway, and the value of Honours to students from different disciplines remains unclear. The benchmarking of Honours programs with comparable degrees at other institutions, is the major driver for a review of Honours within the Faculty of Science at CSU (Charles Sturt University, 2011b, p. 1).

Honours programs are offered across a broad range of undergraduate courses at the two institutions of interest in my study: Charles Sturt University (CSU) and La Trobe University (LTU). Yet despite Honours being characterised as an undergraduate research experience, Honours programs are not included under ‘research’ on either of the university websites. Research programs comprise Masters degrees, PhDs and professional doctorates, while Honours as an element of undergraduate programs is detailed only under specific undergraduate course profiles. This discrimination between research at undergraduate and at postgraduate level is very interesting, particularly considering that Honours is a major mechanism for transition to a research higher degree. This purpose of Honours is highlighted to prospective Honours students on the CSU website, where the following information is listed:
• Gain a competitive advantage in the competitive job market - it shows employers that you have higher level critical writing and research skills.
• Enables entry into research degrees undertaken at Master or Doctoral levels.
• You must have attained a Grade Point Average (GPA) of 5\(^1\) or higher to be eligible to study at Honours level. (Charles Sturt University, 2011a)

In the context of Allied Health where the job market is buoyant for new graduates, this first point “Gain a competitive advantage in the competitive job market - it shows employers that you have higher level critical writing and research skills”, may be considered by undergraduate students to be superfluous. With a focus on further study, the second point “Enables entry into research degrees undertaken at Master or Doctoral levels”, serves to reinforce to prospective Honours students that the purpose of Honours is to prepare them for an academic career. The third point “You must have attained a Grade Point Average (GPA) of 5 or higher to be eligible to study at Honours level”, accentuates the academic nature of Honours, by making reference to academic capability as the only criterion for entry to an Honours program. So considering the commonly held assumptions about Honours by undergraduate Allied Health students, it may be considered that the institutional message conveyed for Honours could actually deter prospective students. The purpose of Honours, and its relevance to the individual student, is clarified somewhat by more detail provided at faculty level. The following list of Honours program objectives is displayed on the CSU Faculty of Science website:

• provide knowledge, skills and attitudes relevant to the conduct of research, especially for entry to higher degree courses;
• develop an advanced level of knowledge in the area of specialisation;
• further develop verbal and written skills relevant to advanced studies and research. (Charles Sturt University, 2011c)

\(^1\)GPA is a simple numerical index which summarises academic performance in a course. A GPA of 5 indicates that a student has averaged Credit grades for their subjects.
Nevertheless, despite this more personalised presentation, two of these three points still indicate that Honours is a preparation for transition to a higher degree. The perpetuation of this very narrow perspective of the purpose of Honours is detrimental to the recruitment of undergraduate students to Honours who do not conceive such a future for themselves. The second point in this list, “develop an advanced level of knowledge in the area of specialisation”, does however provide students with an alternate perspective. It suggests that the purpose of Honours is to enable the development of professional knowledge. Professional practice is implicit to all of the Allied Health disciplines, so this single Honours objective may be the focus for prospective Honours students with a desire to not only extend their practice knowledge, but also to make a contribution to the professional knowledge base. This dichotomy between educating students for the professions, as opposed to preparing them for a research career, has been recently noted within the Faculty of Science at CSU (Charles Sturt University, 2011b, p. 2). The recently published Australian Qualifications Framework (see Appendix A) is helpful when considering this competing agenda in Honours, between professional education and research.

The purpose of the Bachelor Honours Degree qualification type is to qualify individuals who apply a body of knowledge in a specific context to undertake professional work and as pathway for research and further learning. (Australian Qualifications Framework Council, 2011, p. 39)

The change of emphasis for Honours is encouraging, with a focus on qualification for professional work and continuing professional education, in addition to preparation for further research. This is highly relevant for prospective Allied Health Honours students, who are very unlikely to transition to a research higher degree directly following graduation. The mean age of Australian doctoral students in Health is 34.47 years (Pearson, Cumming, Evans, Macauley, & Ryland, 2008a).
1.6 Justification for This Study

As the field of healthcare grows with the expansion of knowledge and associated technologies, the expectations placed on health practitioners by national registration authorities, professional bodies and the public, continue to increase. The belief that health professionals are not just consumers of knowledge to inform their evidence based practice, but must also contribute to the production of practice knowledge, is becoming increasingly prevalent. The education of practitioner-researchers is therefore a very relevant area to focus on, because these are the people who will progress professional research and extend practice knowledge. At a national level, research is recognised as being vital to innovation and economic growth, and the focus is on “research and scholarship in academia, industry and professional practice” (Pearson & Brew, 2002, p. 135), in relation to employment outcomes. It is therefore vital to nurture any strategy which furthers the interest of newly qualified health professionals to pursue research.

Employers will increasingly demand that graduates have the skills to conduct appropriate research, the capacity to formulate solutions to problems based on awareness of research evidence, and the ability to assess that evidence: in other words knowledge creation and use. (Jenkins & Zetter, 2003, p. 11)

However, the focus of attention on research students in higher education institutions is directed most frequently at Masters and doctoral students. There are compelling reasons to extend this focus to include undergraduate research students: “After all, the minds and critical abilities of future generations of practitioners, scholars and teachers are formed at least by the end of the undergraduate educational experience (Watkins, 2007, p. 122).

One of the three recommendations arising from the Boyer Commission Report targets undergraduate research, proposing that: “a supervised research or creative undertaking be incorporated into the undergraduate experience” (Katkin, 2003, p. 24). However, an ongoing challenge for higher education institutions is how to engage more students in this undergraduate experience.
In a "knowledge society" all students - certainly all graduates - have to be researchers. Not only are they engaged in the production of knowledge; they must also be educated to cope with the risks and uncertainties generated by the advance of science. In other words, education and research co-mingle in ways that make their artificial separation destructive of the highest standards in both. (Scott, 2002, p. 13)

It is important that students are participants in research to facilitate their development as producers of knowledge (Healey & Jenkins, 2009, p. 8). This experience of research should also ensure that students become members of a research community, to more closely align the experience of undergraduate students with those of their lecturers (Healey & Jenkins, 2009, p. 205; Tan, 2007, p. 205).

Although the conceptions of research will differ between disciplines, evidence based research is intrinsic to professional practice across the different Allied Health professions (Jenkins & Zetter, 2003, p. 11). An undergraduate research experience in which research and clinical education are complementary, provides an optimal mechanism for enabling the development of practitioner-researchers (Reynolds, 2008, p. 1+4). An ‘embedded’ Honours program is able to provide such an opportunity. Honours is a means by which undergraduate Allied Health students can explore practice through research, and can contribute to practice knowledge. However, Honours students are exceptional amongst undergraduate Allied Health students, in that they do Honours when most do not. The issue of concern is that many Allied Health students who have the potential to complete an Honours degree, decide not to follow this path. In terms of developing future practitioner-researchers, this is a missed opportunity to stimulate the students’ interest in research.

This study sought to explore the experience of Honours for undergraduate students in Allied Health. The impact of undertaking Honours is a complex phenomenon that was poorly understood, and the role of Honours in undergraduate research programs required closer attention (Zeegers & Barron, 2009, p. 574). Recommendations for future research made by Healey and Jenkins (2009) include: research into the impact of undergraduate research, and the effectiveness of undergraduate research programs in disciplines and professional areas other than science, technology, engineering and
My study is congruent with these two recommendations as it explored the impact of Honours as an undergraduate research experience, and focused on four of the Allied Health disciplines. In particular, my emphasis on exploring the experience of Honours students and the factors which contribute to the success of this specific undergraduate research experience, is rare in the published literature (Shaw & Holbrook, 2006, p. 19). My understanding of ‘success’ as considered by these two authors is a measure of the number of students who progress from Honours to PhD. However, my interpretation of ‘success’ is much broader, reflecting my interest in transformation of ‘being’ and the development of students as practitioner-researchers. As my study explored the experience of students undertaking Honours as an ‘embedded’ program, it also has resonance with one of the challenges listed in the current National Health and Medical Research Council (NHMRC) strategic plan: “integrating the conduct of research with high quality education of health professionals and with the care of patients” (National Health and Medical Research Council, 2010, p. 15).

Understanding Honours decision making by undergraduate Allied Health students, and the impact that this has on career trajectory, will inform academic and professional staff responsible for the education of these students. An increase in Honours uptake in Allied Health would have a significant impact on the potential for professional knowledge generation in the future, expanding the evidence base from which to justify clinical practice. To meet the government’s agenda of increased research productivity and to competently inform practice, Allied Health professionals must not only implement evidence-based practice, but must also contribute to professional knowledge generation. An undergraduate research experience is fundamental to the development of practitioner-researchers, and is an important strategy in the continuing development of a research culture in Allied Health. Honours programs embedded in undergraduate courses are a major mechanism for developing research capacity in the Allied Health professions. During this study the focus has been on Allied Health Honours students. I explored the lived experience of Honours for this group of students and thus illuminated the phenomenon of Honours from their perspective. I was interested in their motivation
for studying Honours and inquired into the influence of career decision making on their academic pathway. I elucidated the impact that Honours study had on the students’ academic, personal and social lives. I was interested to understand how the students experienced being an Honours student, their understanding of their personal and professional learning, and how they perceived themselves as novice practitioner-researchers. This study benefitted the students involved by enabling reflection on their learning through Honours, and their growth as practitioner-researchers. It will hopefully benefit future Honours students as they will be able to understand more clearly, not only the immediate impact of Honours, but also their long-term potential as practitioner-researchers. As this study elucidated Honours from the students’ perspective, the study outcomes will better inform the purpose of Honours in Allied Health and the future development of the Honours program at Charles Sturt University. This study therefore has ultimate benefit not only to the individual Honours students, but also to the institution, the Allied Health professions, and the community as a whole.

1.7 Structure of the Thesis and Overview

Chapter 1 of the thesis provides an introduction to me as the researcher and the influences which have led to my study. The role of Honours in Australia is considered, placing this research in a specific political, educational and professional context. A justification for this study is provided in the light of previous recommendations made in relation to Honours, and the role of undergraduate research in higher education programs.

Chapter 2 presents a review of the literature to provide a comprehensive background and context for this study. Relevant fields include: knowledge and knowing; communities of practice; practice knowledge in Allied Health; the practice-research nexus; practitioner-researchers; undergraduate education and research; and Honours in Australia.

Chapter 3 presents the ontological and epistemological foundations for this study and justifies the social constructionist approach. Hermeneutic phenomenology is explored as an appropriate methodology, and interviewing as a data collection method is
discussed. Ethical issues relevant to this study are outlined, with particular consideration of the risk of coercion. The concepts of trustworthiness and authenticity, credibility, dependability and transferability are considered, and the process of data analysis is discussed in detail.

**Chapters 4, 5 and 6** present the outcomes of a series of semi-structured interviews conducted with the Allied Health Honours student participants. These interviews were conducted during the early, mid and late stages of Honours. The titles of these three chapters were inspired by the metaphor of 'making a papier-mâché vase', and the chapters broadly match the three stages of Honours. The student voice is privileged to portray an authentic experience of Honours from the students’ perspective. Student quotes are used to illustrate emergent themes and discussion of these themes is supported with the use of relevant literature. The presentation of a vignette at the beginning of chapter 6 will help the reader to understand some elements of the Honours experience.

**Chapter 7** presents a synthesis of the nine major themes which emerged from this study. A model is developed through this chapter to illustrate the inter-relationships between these themes. Implications of this study are considered and eight specific recommendations are detailed. Limitations of the study are discussed, suggestions are made for further research and a reflective summary ends the thesis.

Chapter 1 has introduced me as the researcher to enable the reader to understand my background as a podiatrist and educator, and the experiences which have shaped my knowledge. Through reflection on some key influences during my professional career, I have been able to provide an insight into my motivation for undertaking this study. My justification for this study is embedded in the current debate around the role of Honours in Australia, and the value of undergraduate research in higher education. In **Chapter 2**, I explore a broad range of literature, which provides relevant background information to support my study. This review of the literature provides the reader with a framework for this study and a clearer understanding of the contemporary role of Honours in Australian higher education.
Chapter 2: Literature review

In a knowledge society, research is context specific and multidisciplinary, rather than pure and discipline based; it has social relevance rather than being hypothesis led; it uses fuzzy rather than empirically based data; it is problem solving rather than deductive. (Jenkins & Zetter, 2003)

This study is located in the broad field of knowledge generation, focusing on knowledge generation in Allied Health and the role of Honours as an undergraduate research experience, in the development of practitioner-researchers. Database searches were conducted using: SCOPUS; ERIC - Education Resources Information Center; EBSCO host (Education); EBSCOhost (Health); CINAHL Plus; and the SAGE publications database. Specific references sourced from relevant publications were located individually. A specific search of the Quality in Postgraduate Research (QPR) conference papers and abstracts was also conducted, to locate additional literature pertaining to Honours.


2.1 Knowledge and Knowing

2.1.1 Contemporary Views of Knowledge

Knowledge is not a possession but a relation between persons and world, which is most clearly evident through engagement in collective activities or social practices (Dall'Alba, 2009c, p. 23).

Recent understandings of knowledge as a process, or knowledge as practice, are challenging the modernist representations of knowledge as a technological product of
research (Knorr Cetina, 2007, p. 364). This traditional knowledge is known as ‘mode 1’ knowledge (Gibbons et al., 1994, p. 1). The act of knowing signifies that knowledge has become a dynamic process of active knowing (Barnett, 2000, p. 251); knowledge is constructed (Fuller, Unwin, Felstead, Jewson, & Kakavelakis, 2007, p. 746). Regarding knowledge in this way is counter to the conventional modernist view of the possession of knowledge as a product, simplistically transmitted from one person to another (Blackler, 1995, p. 1023). This transformation in the mode of knowledge production led to the emergence of ‘mode 2’ knowledge. Mode 2 knowledge is transdisciplinary, heterogenous, heterarchical, transient, socially accountable, reflexive, and the inference is that “knowledge production becomes diffused through society” (Gibbons, et al., 1994, p. 4). Mode 2 knowledge is “knowledge in use” (Barnett, 2000, p. 414), but Barnett (2000) progressed this thinking to conceive a world of supercomplexity in which knowledge proliferates and is transformed into multiple forms of knowledge (Barnett, 2000, p. 416). In acknowledging that knowing will produce “epistemological gaps”, mode 3 knowledge recognises that “knowing produces further uncertainty” (Barnett, 2004, p. 251).

Knowing is “mediated, situated, provisional, pragmatic and contested” (Blackler, 1995, p. 1040). Knowing manifests through the complex interplay of personal, experiential and propositional knowledge, and this knowledge may be explicit or tacit. Explicit knowledge is “transmittable in formal systematic language, expressed in symbols, words and/or numbers” (Bartunek, Trullen, Bonet, & Sauquet, 2003, p. S2:62), and may therefore be referred to as ‘codified’. Tacit knowledge is “personal, context-specific, rooted in action and experience and difficult to formalise and communicate” (Bartunek, et al., 2003, p. S2:62). Tacit knowledge is sometimes referred to as ‘non-codified’, signifying that it is taken for granted and hard to articulate (Fuller, et al., 2007, p. 747). Four aspects of tacit knowing were initially proposed: the functional, the phenomenal, the semantic and the ontological (Polanyi, 1966/1983, p. 13). Tacit knowing establishes a meaningful relation between these different aspects, to enable comprehension of, and response to, any particular experience. Bartunek et al (2003) propose that tacit and explicit knowledge are distinct, in that one form cannot be subsumed by or converted into the
other (p. S2:63). The converse has also been contended. Through dialogue and collaboration (externalisation) tacit knowledge can be made explicit, and explicit knowledge can become tacit through the process of internalisation (Chou & Tsai, 2004, pp. 206-207); (Rynes, Bartunek, & Daft, 2001, p. 347). Although it is accepted that tacit knowledge may be hard to uncover, individuals are often able to articulate details intrinsic to their performance (Fuller, et al., 2007, p. 747). In the context of a specific activity, tacit knowledge is made apparent in the way an individual relates to their physical and social environment, and manifests supremely as excellence in performance. Although knowledge, both tacit and explicit, is highly individualised, all knowledge is socially constructed as individuals participate in and form relationships within communities. Contemporary views on the sources of knowledge in society are changing.

2.1.2 Knowledge in Society

Knowledge is a productive force in society and can be viewed as a component of economic, social and political life (Knorr Cetina, 2007, p. 370). The ‘sociality of knowledge’ as proposed by Muller (2000) conceptualises knowledge as social, because all forms of knowledge are constructed through social interaction in different contexts (p. 10). The social constructionist perspective is a representation of a form of the sociality of knowledge. Personal and collective knowledge should be conceived as mutually constitutive, rather than disconnecting cultural and individual knowledge (Eraut, 2004, p. 132).

In the ‘knowledge economy’ of this supercomplex and uncertain world, knowledge is an important commodity. Knowledge drives the activities of organisations and has a profound influence on the economic and social life of individuals and communities (Sunassee & Sewry, 2002, p. 235). Traditional views have recognised the university as the first and foremost knowledge producer in society. Contemporary thinking challenges this perspective, embracing the fact that knowledge production is disseminated throughout society (Barnett, 2000, p. 410); (Bartunek, et al., 2003, p. S2:62). “Universities are no longer the only contributors to the production of knowledge” (Bleiklie
& Powell, 2005, p. 1). This does not however diminish the important role that higher education plays in “the development of new knowledge practices and processes” (Davis, Evans, & Hickey, 2006, p. 231). Nonetheless, the notion of specific academic communities as the source of scientific knowledge production is competing with the concept of transdisciplinary and heterogenous knowledge production in the context of practice (Enders, 2005, pp. 126-127). It is still the case however, that scientific journals are mostly comprised of explicit knowledge from academic knowledge bases, rather than mutually generated academic and practitioner knowledge. “Academic knowledge creation, communication and learning largely focus on explicit knowledge” (Bartunek, et al., 2003, p. S2:63). Scientific disciplinary knowledge is often seen as having high worth because it is created by high-status groups, is acquired in specialist environments, and because it can be used to achieve positions of influence in society. It is the social construction of this knowledge which imbues it with its value, as it is not necessarily or inherently superior to other forms of knowledge (Fuller, et al., 2007, p. 747).

Transformational change in international communities is becoming increasingly dependent on issues of knowledge and information, indicated by the widespread use of the terms ‘information society’ and ‘knowledge society’ in the literature (Knorr Cetina, 2007, p. 361). Knowledge has become one of the most important factors to determine human development and there is a focus on the requirements of governments, education institutions and citizens, to develop knowledge societies across the world. Typically, a knowledge society is defined in economic terms with knowledge being a wealth-creating, productive force. A knowledge society is not defined by an increase in knowledge and technology, but depicts a society perfused by principles and processes that sustain knowledge (Knorr Cetina, 2007, p. 361). Social, political and economic life can be envisaged as fundamental to a particular knowledge culture. In turn, knowledge cultures are powerful in their political, economic and social impact (Knorr Cetina, 2007, p. 370). A knowledge society will generate, and in turn be founded on, increasing numbers of knowledge settings, the cultures of which are ‘epistemic cultures’ (Knorr Cetina, 2007, p. 362). Knorr Cetina (2007) understands an epistemic culture as “a nexus of lifeworlds”, in which the lifeworlds are “rich and potentially complex internal
environments” (p. 372). There is mutability in these cultures with self-imposed structures and concerns, as they continually iterate new questions and determine new frameworks of learning (Knorr Cetina, 2007, p. 364). Epistemic cultures and knowledge cultures are as fundamental to a knowledge society as national cultures are to an industrial society (Knorr Cetina, 2007, p. 373). The general knowledge culture in a knowledge society will privilege the society’s desired epistemic outcomes. If, for example, a school, faculty or institution advocates the epistemic outcome of Honours as transition to PhD, it may not value the transformative potential of the Honours experience. Honours is therefore portrayed as nothing more than a procedural process, that is a means of preparing students for transition to a higher degree. An epistemic culture encapsulates the intrinsic processes of knowledge creation within a defined knowledge setting. It represents sets of contextual practices and processes which constitute professional expertise and delineate professional knowledge (Knorr Cetina, 2007, p. 363). The epistemic cultures of the different Allied Health professions have evolved along different paths, and the prevailing culture will necessarily influence the Honours students in their choice of research topic and methodology. On a more fundamental level, local epistemic cultures within the school and/or faculty are likely to have a marked influence on the decision making of all prospective Honours students. An epistemic culture has the capacity to facilitate or to stifle knowledge creation. Researching the processes of knowledge creation from both individual and organisational perspectives, Chou and Tsai (2004) demonstrated that synergy between engagement of the individual, knowledge cognition and organisational mechanisms, facilitated knowledge creation (p. 212). The specific example in this case was employees learning how to use a new IT system at work.

2.1.3 Learning and Knowledge Creation

Learning and knowledge transfer must be conceptualised in a different way within a knowledge-based society where the emphasis is on creativity, community, collaboration and lifelong learning (Davis, et al., 2006, p. 235). Knowledge generation is a collaborative activity in a meaningful context, as individuals bring knowledge to any situation, informed by prior experience (Fuller, et al., 2007, p. 747). Individuals are
motivated to create new knowledge when they have the autonomy to engage with knowledge, to appreciate its value and usefulness (Chou & Tsai, 2004, p. 206).

In order to create knowledge individuals have to be willing to devote time and energy to identify useful information, share their knowledge, adopt new knowledge and know how to approach unfamiliar or new problems effectively. (Chou & Tsai, 2004, p. 213)

Labour, human capital, and time are the productive forces with regard to knowledge creation (Knorr Cetina, 2007, p. 372). Adequate time must be ensured to permit innovation and knowledge generation. Learning is a transformation of knowing and “can be characterised as a change in the alignment between experience and competence” (Wenger, 1998, p. 139). Research into the experience of mature students entering higher education distilled the students’ understanding of learning down to “learning as discovery or renewal” and “learning as a professional/vocational process” (Haggis, 2004, p. 346). A sense of permanence is assumed for learning to occur, with an elapse of time between an acquisition and an application phase (Marton, Dall’Alba, & Beaty, 1993, p. 297). Learning enables individuals to conceptualise not only “what is learned” but also “how it is learned” (Marton, et al., 1993, p. 296), in order to develop new perspectives on the world. New insights can be transformed into knowledge, as individuals interact between themselves and with their environment (Chou & Tsai, 2004, p. 214; Wenger, 1998, p. 214). However, the concept of a ‘learning environment’ is contentious. Fuller et al (2007) suggest that the interplay of a complexity of pedagogical, organisational and cultural factors contributes to the creation of learning environments (p. 744). Whilst this is not untrue, Barnett (2007) rejects the interdependence of ‘learning environment’ and inspiration (p. 118). He suggests that the pedagogical gap between the efforts of the educator and the student cannot be narrowed merely with the provision of an inspirational environment. I agree with this because inspiration for learning must be intrinsic to the person. Fuller et al (2007) explored learning environments within the workplace and envisaged an ‘Expansive-Restrictive’ continuum of approaches to learning (p. 745). Learning is facilitated in situations where: individuals participate in multiple communities of practice both inside and outside of the workplace; the vision of learning is for career progression; the goals of individual development are
aligned with organisational capacity; managers facilitate the workforce and development of individuals; and there is a multidimensional view of expertise (Fuller, et al., 2007, p. 745). Close parallels can be drawn here between students’ learning in Honours, if the higher education institution is considered as the workplace. Participation in new and existing communities of practice will provide the Honours students with different environments for learning about practice. An element of choice in terms of research topic will help to ensure that the individual student’s interests and career goals are aligned with the school’s capacity for research supervision. Research supervisors should act to facilitate the personal and professional development of the Honours student, and to nurture their development as novice practitioner-researchers.

“Learning is ubiquitous in ongoing activity, though often unrecognized as such” (Lave, 1993, p. 5). Learning is “a socially constructed understanding” (Blackler, 1995, p. 1036) characterised by changes in knowledge and action; social constructivist theory emphasises the critical importance of culture and social context to learning. ‘Learning as participation’ regards knowledge as a social process, intrinsic to and created through participation in practice (Fuller, et al., 2007, p. 746). Early work by Wenger (1998) sought to address the limited perspective of learning as an individual pursuit and he advocated a social theory of learning, the primary focus of which is social participation (p. 4). The four components of this social theory of learning comprise:

- Meaning : learning as experience
- Practice: learning as doing
- Community: learning as belonging

All four components are of fundamental relevance to the learning experience of Honours students and will be used as reference points within this literature review. The concept of community seems to warrant attention initially, as the students’ experience of Honours in terms of meaning, practice and identity, is necessarily founded on their relationships within one or more communities of practice.
2.2 Communities of Practice

Based on Wenger’s (1998) original conception, a community of practice is characterised by three dimensions: mutual engagement, joint enterprise and shared repertoire (p. 73). On one level it could be justly claimed that each Honours student is a member of the Honours community of practice from the outset, as the mutual engagement in undertaking Honours defines this community. However, Wenger (1998) is clear that the term ‘community of practice’ should not be used as a synonym for a group or network (p. 74). For an Honours community of practice to exist it must be because the Honours students “sustain dense relations of mutual engagement organized around what they are there to do [their Honours research]” (Wenger, 1998, p. 74). Engagement will not necessarily enable participants to more accurately understand the world or each other’s experiences, but it creates a shared reality in which the students can each construct an identity (Wenger, 1998, p. 177). The other two dimensions of joint enterprise and shared repertoire are similarly problematic. Joint enterprise sustains a community of practice, but this is more complex than the Honours students merely undertaking the same program of study. Joint enterprise is defined by the participants of a community of practice as a negotiated response to their situation, and creates relations of “mutual accountability” (Wenger, 1998, p. 78). The third characteristic of a ‘shared repertoire’ requires that members of a community of practice produce or adopt a range of elements such as stories and actions, through which they express their “forms of membership and their identities as members” (Wenger, 1998, p. 83). This dimension is perhaps more easily envisaged in terms of Honours students, as their shared repertoire arises from their experience of Honours. Therefore, the existence of an Honours community of practice is clearly dependent on a broad range of factors including: institutional policy; reification of undergraduate research practice within the institution; structure of the Honours program; Honours supervisory practice; and the attitudes and behaviour of the individual Honours students. Considering these Allied Health students, an Honours community of practice may be conceived in several ways. It could comprise: all Honours students across the four Allied Health professions in both year levels; all Honours students within one cohort; all Honours students within a single professional group; or
perhaps two or three Honours students working with a common research supervisor, or supervisory team.

The Honours community of practice, if indeed it does exist, is not the only community of practice to which the Honours students may belong. As third or fourth year undergraduates in Allied Health, the students will also be part of their professional community of practice within the school. Their experience of meaning of practice has been developing over the preceding years, informed through their relationships within this community with peers, academic staff and clinical educators. This professional community of practice will exert a strong influence on the attitudes and behaviour of these students in terms of Honours decision making, and also on the choices they make in terms of their Honours research topic. As novice researchers, these Honours students may also become members of a research community of practice. Multi-membership of communities of practice is common, and participation in each of these communities contributes to the development of the individual student’s identity (Wenger, 1998, p. 158). Engagement with a community of practice does not necessarily imply full participation, as engagement may also be considered as peripheral, marginal, or even full non-participation. Non-engagement in practice is equally as important as engagement in developing identity. “Our identities are constituted not only by what we are but also by what we are not” (Wenger, 1998, p. 164). However, a sense of ‘aliveness’ is paramount to ensure that a community is inviting to newcomers (Wenger, McDermott, & Snyder, 2002, p. 50). A community is dynamic, redesigning itself and evolving in response to the influence of new members with fresh interests and the relationships they form (Wenger, et al., 2002, p. 53). Relationships between individuals, their assigned tasks and shared repertoire, create an environment for knowledge and learning (Lave, 1993, p. 9). Participation in these different communities of practice will enable the Allied Health Honours students to engage in meaningful practice, developing a firm foundation from which they may continue to contribute to professional knowledge.
2.3 Practice Knowledge in Allied Health

2.3.1 Allied Health Professionals

Over recent years, governments have increasingly recognised the essential role of Allied Health in Australia’s primary care and acute health services. (Allied Health Professions Australia, 2008, p. 2)

The Allied Health professions comprise: audiologists; dieticians; occupational therapists; orthoptists; orthotists and prosthetists; pharmacists; physiotherapists; podiatrists; psychologists; radiographers; radiation therapists; social workers; and speech pathologists (Health Professions Council of Australia, 2005, p. 17). Australia has at least 90,000 Allied Health professionals who work collaboratively with doctors and nurses to share the responsibility for the delivery of health care and related services. Allied Health professionals work independently and in multidisciplinary teams, playing a critical role in hospitals, primary care, preventative health care, community and aged care services (Allied Health Professions Australia, 2008, p. 2). The scope of practice of each of the Allied Health professions is clearly defined, but there is commonality across the professions in terms of practice, encompassing disease detection, prevention, health promotion, rehabilitation and health management (Lecca, Valentine, & Lyons, 2003, p. xv).

The term Allied Health refers to all health workers as caregivers who are allied with the patient. Many health personnel and professional organisations neglect or fail to consider this critically engaging, socially meaningful and philosophically compelling point. (Douglas, 2003, p. 5)
The Australian Allied Health workforce is compromised in terms of numbers of Allied Health practitioners and also the availability and retention of new graduates (Allied Health Professions Australia, 2008, p. 2). The role of Allied Health professionals is expanding and will continue to be challenged by factors such as the ageing population, the burden of chronic disease, new technologies, the information explosion and the imperative for evidence based practice. Lecca et al (2003) suggest that the challenge to maintain pace with changes in society and health care also rests with those responsible for educating Allied Health professionals (p. xv). The key challenges and constraints identified for the Allied Health professional workforce in Australia are: skills recognition, data collection, education, regulation and workforce structures (Health Professions Council of Australia, 2005, p. 3). The priorities for Allied Health care reform are currently directed towards: multidisciplinary care; preventative health care; increasing access to community-based Allied Health services thus reducing hospitalisation; ‘Medicare’; and workforce issues (Allied Health Professions Australia, 2008, pp. 4-5). Higher education is mentioned as an area for change, but this is only with respect to the funding of clinical education.

2.3.2 Educating Allied Health Professionals

For the purposes of this study I will focus on only four of the thirteen Allied Health professions: occupational therapy, physiotherapy, podiatry and speech pathology. Currently, undergraduate courses for these Allied Health professions are provided by a range of universities within Australia, including metropolitan and regional institutions. Typically a student will graduate with a Bachelor degree after four years of full-time study. Honours is an optional course of study embedded within the third and fourth years, or exclusively in the fourth year, of the degree program. Some variations to this standard do exist, such as a three year Bachelor of Podiatry program at Newcastle University. As a result of the growing interest in Graduate Entry Masters (GEMS) programmes in Allied Health, many institutions have developed pre-registration Masters

---

2 ‘Medicare’ is a national program administered by the Australian Government Department of Human Services. It is responsible for the health of Australians through the delivery of programs such as the Pharmaceutical Benefits Scheme, the Australian Childhood Immunisation Register and the Australian Organ Donor Register.
courses to replace the Bachelor degree, with the potential to extend to a doctoral qualification. Honours may also be embedded within a GEMS program so that a student could graduate with a Masters (Honours) degree. Undergraduate Allied Health students participate in one or more research subjects normally in their second year of study, but this study would not typically provide the students with an opportunity for primary data collection. Academic study during the final year may also enable students to explore research in more detail, such as through the development of a research proposal. However, Honours is the major mechanism by which undergraduate students can undertake primary research.

Allied Health courses comprise a broad range of subjects of specific relevance to each of the professions, but the drive for interprofessional education has led to the increasing emphasis on shared learning for foundational subjects such as health psychology and physiology. Allied Health curricula are replete with subjects, but in parallel to this academic study, undergraduate allied students are also required to undertake workplace learning. Practice experience may be facilitated through university clinics, or through collaboration with external clinical educators working in a broad range of settings such as hospitals, community health centres, schools, residential care facilities and in the client's home. Fieldwork education may be a requirement across the Allied Health course, but typically is most demanding in terms of time during the student's final year of study.

2.3.3 Becoming an Allied Health Professional

Undergraduate Allied Health curricula offered by the various higher education institutions, are developed to prepare students for professional practice. The schools of Allied Health, although not always named as such, intend to enable students to become competent Allied Health professionals and to become members of their respective professions. Course content is dictated not only by institutional knowledge and expertise of the academic staff, but more fundamentally by the guidelines and expectations of the respective professional associations and the national registration body; Australian Health Practitioner Regulation Agency (AHPRA). Typically the emphasis is on
propositional knowledge and competency based assessment. Fish and Coles (2005) are critical of the focus on propositional knowledge in undergraduate medical curricula and the lack of attention paid to ‘practice’ (p. 13). Dall’Alba (2009) also aligns with this perspective:

Those professions that require registration in order to practise tend to direct focus still more strongly to knowledge and skills that must be acquired during professional education. (Dall’Alba, 2009b, p. 34)

A competency based approach to curriculum design makes the erroneous assumption that the acquisition of skills equates to competence, and although medicine is the focus for Fish and Coles (2005), this reductionist perspective is no less relevant to undergraduate Allied Health curricula (p. 21). Therefore, conventional curricula have been criticised for being limited in scope and inadequate for the preparation of health professionals for the complexities of practice and for continuing professional education (Dall’Alba, 2009c, p. 37).

Some contemporary thinking on education proposes that attention should be re-focused, with a shift from epistemological to ontological considerations. The education of an Allied Health professional for competent practice requires more than the development of knowledge and skills. The importance of nurturing values consistent with sensitivity to an individual’s cultural, spiritual and emotional health, is also paramount in Allied Health education (Samuels, 2003, p. 223). Becoming an occupational therapist, a physiotherapist, a podiatrist or a speech pathologist calls for a transformation of the self (Dall'Alba, 2009b, p. 37). In Barnett's (2007) exploration of being and becoming, he is very clear that in terms of higher education "ontology does indeed trump epistemology" (p. 165). Education forms and shapes the student’s ‘being’ as they become Allied Health professionals, and part of ‘becoming’ professionals is through alignment. As an undergraduate student aligns with the identity of their professional group, so this identity and practice of the profession becomes part of the student’s identity (Wenger, 1998, pp. 195-196). The conventions of the discipline shape the development of the student and engender discipline-specific scholarly identity.
(Paxton, 2011, p. 54). Professional practice is conceived as a dynamic flow, as engagement in practice constitutes both the practice itself and the practice traditions (Dall'Alba, 2004, p. 680). Becoming a professional requires embodiment of the routines, histories and traditions of the profession, through engagement with other members of the professional community (Dall'Alba, 2009b, p. 37). As members of a profession, the students identify with the practice of their peers and educators (Wenger, 1998, pp. 195-196), and being with others enriches the process of becoming an Allied Health professional (Dall'Alba, 2009b, p. 42).

Development of undergraduate students as Allied Health professionals does not follow a predetermined trajectory from novice to professional (Dall'Alba, 2009c, p. 137). An individual student will apply their knowledge and skills in various ways, consistent with their professional beliefs and concordant with their ‘being’. As undergraduate students are inducted into professional practice, it is necessary that they have the ability to appreciate the nature of practice knowledge (Higgs, Fish, & Rothwell, 2004, p. 89).

2.3.4 Practice Knowledge

The practice of each one of the Allied Health professions has arisen over time, through the practices of a constellation of many communities (Wenger, 1998, p. 127). Practice knowledge changes with developments in practice, and is always relevant to socio-historical, cultural and personal contexts. The demand for usable knowledge changes with the evolving scope of practice, so practice knowledge is “inherently unstable” (Schön, 1983, p. 15). Societal factors such as technological advances and changes in population demographics, ensure that practice knowledge faces “rapid growth and rapid obsolescence”, (Higgs, et al., 2004, p. 89) and is “eternally incomplete and insufficient” (Fish & Coles, 2005, p. 132). Consequently, Allied Health practitioners face mounting demands on their professional expertise and new expectations of their competence. The nature of knowledge as needed in Allied Health practice, the creation of practice knowledge, its use and further development, comprises practice epistemology (Fish & Coles, 2005, p. 127). The impact of setting or situation is central to practice epistemology as the context influences the quality, nature and extent of knowledge
which is used and generated. An understanding of practice epistemology is necessary for Allied Health practitioners to appreciate what drives their actions, how they learn from this understanding and develop professional practice, and how they can demonstrate this understanding in practice (Higgs, et al., 2004, p. 5). New knowledge is created in the practice setting as practitioners manipulate multiple forms of knowledge: propositional; evidence-based; procedural; propositional adaptation; procedural improvisation; professional; sensory; ethical; experiential; practice-generated; metacognitive; intuitive; insight/imagination; and self knowledge (Fish & Coles, 2005, p. 137). By theorising about their practice, tacit knowledge is made explicit and new knowledge is created by the Allied Health professional (Higgs, et al., 2004, p. 91); (Bartunek, et al., 2003, p. 63). “Ongoing development of knowledge is part of the search for truth in a changing world” (Higgs, et al., 2004, p. 103). Schön’s model of the reflective practitioner postulates that practitioner knowledge is absolutely context-dependent and often comes from explicit reflection on surprises arising out of practice (Schön, 1987, p. 28).

Tensions arise between the use of professional knowledge to make complex professional judgements, and the increasing importance of clinical effectiveness (CE) and evidence-based practice (EBP) in health care. Upton & Upton (2006) highlighted the main barriers to EBP for Allied Health professionals as a lack of: time, research skills, training and funding (Upton & Upton, 2006, p. 127). The majority of 14 Allied Health and health science professional groups surveyed, reported a low level of knowledge of EBP and CE. Practitioners showed a preference for evidence sources from same-profession colleagues and co-professionals (Upton & Upton, 2006, pp. 131-132). Reliance on personal professional judgement, as opposed to research-based evidence, has been highlighted with respect to nurses (Rolfe, 1998, p. 677). As the cornerstones of modern-day health care, it is an expectation for all health practitioners that CE and EBP will provide a framework for clinical problem solving. With the EBP model, contemporary, relevant and robust evidence should inform clinical decision making (Upton & Upton, 2006, p. 127). However, EBP in its extreme is positivist, ignoring the impact of individual variation. It is a construct which perpetuates the
privileging of explicit knowledge over tacit knowledge, and the hierarchy of evidence devalues knowledge which is not empiricist. Interpretation of individual patient experiences is overshadowed in the drive for generalisation of ideas. In the EBP hierarchy, randomised controlled trials are considered the 'gold standard'. In this context, much of the client-focused work and associated knowledge generation in the Allied Health professions is undervalued (Higgs, et al., 2004, p. 7). With a mounting emphasis on EBP in health care, the Allied Health professions and individual practitioners come under increasing scrutiny. This inquiry and requirement for justification of practice has the effect of constraining emerging techniques, and influencing the development of professional knowledge (Eakin & Heather as cited by Higgs, et al., 2004, p. 4). Knowledge in the Allied Health professions is generated from a wide variety of sources which are mutually inclusive. An appreciation that these sources are far broader than the current definition of EBP would suggest, is critical to the development of professional practice (Higgs, et al., 2004, p. 6). Reliance solely on scientific evidence as a basis for practice, exposes that practice to exploitation within the EBP ideology of the health care system (Tarlier, 2005, p. 126). There are social, political and economic pressures for Allied Health professionals to contribute to, sustain and develop their knowledge culture. These knowledge cultures in Allied Health can have potent political, economic and social influence. A limited understanding of the nature and dimensions of knowledge underpinning practice, will confine the development of a profession's knowledge base (Higgs, et al., 2004, p. 6). Inquiry into practice from within practice enables practitioners to refine new knowledge, and to identify gaps in practice knowledge. Research about practice entails an exploration of practice knowledge, and the generation of new knowledge contributes to the knowledge base of the Allied Health profession (Higgs, et al., 2004, p. 104).

2.4 Research Into Allied Health Practice

Inquiry in a profession begins in the field and a key purpose of such inquiry is to be translated into research that is usable. (Tierney & Holley, 2008, p. 296)

Kitchen (1997) provides an interesting historical perspective of Allied Health research. In the early 1990s the drive for health research and development was gaining
momentum. Research in the basic sciences was encouraged, in order to advance theory and practice in the Allied Health professions. Over the decade new research foci emerged in Allied Health including: issues of quality of life, attitudes and opinions of clients and practitioners, the health of the community and the evaluation of practice (pp. 50-51). It has been suggested that Allied Health research is primarily applied research, because of the nature of practice across the Allied Health professions (Lyons, 2003, p. 325). In 1997, Stokes presented a framework for knowledge production which challenged the pre-existing dichotomy between basic and applied research.

**Figure 1: Quadrant model of Applied and Basic research**

Research is inspired by:

<table>
<thead>
<tr>
<th>Considerations of use and relevance of immediate applications?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>No</strong></td>
</tr>
<tr>
<td><strong>Yes</strong></td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>Pure basic research</td>
</tr>
<tr>
<td>Use-inspired basic research (Pasteur’s quadrant)</td>
</tr>
<tr>
<td>No</td>
</tr>
<tr>
<td>Research that systematically explores particular phenomena, without explanation or application in mind.</td>
</tr>
<tr>
<td>Pure applied research</td>
</tr>
</tbody>
</table>

Adapted from (Stokes, 1997, pp. 73-74).

Allied Health research may be pure basic research, pure applied research, or more typically would be positioned in ‘Pasteur’s quadrant’. Research which sits in ‘Pasteur’s quadrant’ generates knowledge that advances scientific understanding to meet a societal need (Stokes, 1997, p. 83). Such research values knowledge which can be understood and applied in context. Translational research shares the characteristics of ‘Pasteur’s quadrant’ as it blurs the boundaries between scientific theory and clinical practice. Tierney & Holley (2008) acknowledge that translational research has gained valuable currency in the medical field, and this research paradigm aligns with the
emphasis for contemporary Allied Health research (p. 294). ‘Practitioner research’ features in the education literature, and this has relevance to Allied Health practitioners. Similar to translational research, the aim of practitioner research is to create new knowledge for practical use. It is about:

Seeking new understandings that will enable us to create the most intelligent and informed approach we can to improving our provision for those in our care. (Dadds, 2004, p. 3)

There is strong resonance here with the aims of Allied Health research. The potent transformative potential of practitioner research on the individual researcher is precipitated by reflection on practice. The same principles of research are found in other guises. In the field of nursing it is termed 'practitioner-based research'. Rolfe (1998) proposed that knowledge should be generated by the individual nurse practitioner, as knowledge is “only relevant to the unique situation of which the nurse is a part” (p. 677). ‘Insider practitioner research’ presented in the context of medicine, suggests that practitioners will come to understand their practice more deeply through researching practice (Fish & Coles, 2005, p. 162). Despite this inextricable and interdependent relationship between practice and research, the practice-research nexus may present as a dichotomy for practitioners.

2.4.1 The Practice-Research Nexus

In discussing practice here, my intention is to focus on clinical practice, as opposed to a more overarching view of professional practice. The uptake of evidence into practice is generally beyond the scope of an individual research project and can often only be assumed (Garnham, Cheek, & Alde, 2009, p. 220). The concept of the 'research-practice gap' is prevalent in nursing literature published in the late 1990s and early 2000s. A statement made at that time highlights the dramatic division between practice and research:
The corpus of evidence which suggests that care has remained fundamentally unaltered is so extensive that it would be reasonable to assume … the failure of the arranged marriage between research and practice. (Hicks & Hennessy, 1997, pp. 595-596)

A scepticism about whether research outcomes would change practice for the better, the potential conflict between the priorities of practice and research and a practitioner’s level of confidence and expertise, contribute to impeding the integration of research and practice (Seymour, Kinn, & Sutherland, 2003, pp. 292-293). In the field of occupational therapy, the demands and constraints of practice ensured that reflection and innovation were relegated in importance for time-poor practitioners. These Allied Health professionals also found research outcomes to be irrelevant to their practice (Kielhofner, 2005, p. 8). In podiatry, the barriers to integrating research with clinical practice differed for practitioners working in the public and the private sectors. Financial constraints were major barriers for both groups of practitioners. A lack of funding support was relevant to public sector podiatrists, as compared to concern about loss of income for those in private practice (Payne, 1999, p. 87).

Kielhofner (2005) noted the differences in the working worlds of academics and practitioners, which strongly influenced the perceived value of knowledge. Academics are judged on the scientific rigour, public dissemination and scrutiny of their knowledge, whereas practitioners judge knowledge according to its relevance to, and impact on, practice (p. 9). Practitioners learn through reflection on practice incorporating both tacit and explicit knowledge, whereas academic knowledge creation and communication typically focuses on explicit knowledge (Bartunek, et al., 2003, p. S2:63). Adopting a consumerist view of research can also highlight these different perspectives, if producers view research as a product for enlightenment and practitioners consider research as a retail commodity (McDonald & Viehbeck, 2007, p. 140). These differences can create a sense of confusion for practitioners, as the concepts of research, practice and practice development are blurred (Clarke, 1999, p. 976). This fragmentation of the practice-research nexus is not confined to health care (Rynes, et al., 2001, p. 340) and it remains an issue for contemporary debate. Introducing policy making as the third element, and writing about higher education, Locke (2009) suggests
that “the three domains of research, policy and practice seem as disconnected as ever” (p. 119). Striking similarities are apparent in the issues surrounding research and practice in health care. Academic research in higher education can be marginalised for being inaccessible, and higher education practitioners tend to dismiss educational research, basing professional decision-making on personal experience (Locke, 2009, p. 120).

Garnham et al (2009) explored the research/practice nexus in aged care practice. Their findings identified two distinct models of research uptake into practice: a linear/passive model and a complex/active model. Assuming a linear research process implies that uptake into practice happens once the research has concluded. Problems inherent in this research model include assumptions that practitioners: will access the results of published studies, will have the knowledge and skills to integrate the findings into practice, and will be able to overcome barriers to implement pre-existing results into their practice setting. A linear/passive research model will sustain the research-practice gap (pp. 221-224). In contrast, a complex/active model of research which infers partnership, collaboration and synergy between researchers and practitioners, will optimise the uptake of research into practice through knowledge translation (Garnham et al., 2009, pp. 222-224). Collaborative research developed from and undertaken in the practice setting, captures the variables that are difficult to simulate in some types of academic research. There is evidence to suggest that research productivity and research quality is enhanced through synergistic modes of research (Rynes et al., 2001, pp. 342-343). Collaboration between practitioners and researchers although desirable, may present difficulties for both communities. Practitioners may consider that academic theorising is quite different to reflection on action, characteristic of practitioner scholarship. Academics may harbour concerns that practitioners do not possess the research knowledge and craft skills (Bartunek et al., 2003, p. S2:65).

The adoption of new knowledge by practitioners or ‘knowledge transfer’ is a slow process, even when the evidence is proven to be superior to existing practice. Opportunities for socialisation between practitioners and academics are fundamental to the development of positive relationships, mutual empathy and common ground, to
enable knowledge transfer to take place (Rynes, et al., 2001, pp. 346-349). Boundaries exist not only between researchers and practitioners, but also between different groups of practitioners. Professional boundaries are such a barrier to the flow of knowledge within health care that knowledge has been termed ‘sticky’. Multidisciplinary groups are very important in “mediating the flow of knowledge into practice” (Ferlie, Fitzgerald, & Wood, 2000, p. 101). In an attempt to facilitate synergy between research and practice, Kielhofner proposed a ‘scholarship of practice’ which embraces the following elements:

- Commitment to conducting research that directly responds to and contributes to practice;
- Partnerships with individuals and organisations outside of the academic department to create new educational, practice and research opportunities;
- Creating synergies to advance practice and scholarship simultaneously. (Kielhofner, 2005, pp. 9-10)

This ‘scholarship of practice’ has resonance with the four interrelated dimensions of scholarship defined by Glassick, Huber & Maeroff (1997): the scholarship of discovery, the scholarship of integration, the scholarship of application and the scholarship of teaching (p. 9). Enders (2005) grounds the debate of academic-disciplinary knowledge production in a contemporary regime, in which “borders are becoming fuzzy not only between disciplines but between universities and other knowledge producers in society” (p. 127). Research should be enacted in a context of application, informed by collaborative and empathetic exchange between all stakeholders (Enders, 2005, p. 128).

2.4.2 Practitioner-Researchers

On the basis of mutual respect and a shared interest, collaboration between practitioners and researchers may occur. However, research in and on practice may be the interest of a sole practitioner. Practitioners commonly undertake systematic investigation of their own practice, and professional knowledge is developed through learning in unpredictable and changing practice settings (Jarvis, 2000, p. 34). Self-education is a continuing process, facilitated by research into practice (Schön, 1983, p. 299). Accepting that all Allied Health practitioners are aware of research and may
integrate research into their practice, (for example through reflection on practice, reading research papers, and using published research to inform clinical decision making), the focus here is on research active and productive practitioners. These practitioners conduct research on their own professional practice. According to the discipline and country, the terminology used to define such practitioners varies:

<table>
<thead>
<tr>
<th>Nomenclature</th>
<th>Discipline (country)</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Practitioner-researcher</td>
<td>Occupational therapy (Australia)</td>
<td>(Cusick, 2000); (Young, 2004)</td>
</tr>
<tr>
<td></td>
<td>Nursing (UK)</td>
<td>(Arber, 2006)</td>
</tr>
<tr>
<td>Clinician-researcher</td>
<td>Occupational therapy (Australia)</td>
<td>(Cusick, 2001)</td>
</tr>
<tr>
<td>Scientist-practitioner</td>
<td>Psychology (Australia)</td>
<td>(Provost et al., 2010)</td>
</tr>
<tr>
<td>Practice-scholar</td>
<td>Occupational therapy (USA)</td>
<td>(Crist, 2010)</td>
</tr>
<tr>
<td>Nursing academics</td>
<td>Nursing (UK)</td>
<td>(Andrew, Ferguson, Wilkie, Corcoran, &amp; Simpson, 2009)</td>
</tr>
<tr>
<td>Clinician-scientist</td>
<td>Medicine (Australia)</td>
<td>(Eaton &amp; Thong, 1985)</td>
</tr>
<tr>
<td>Physician-scientist</td>
<td>Medicine (USA)</td>
<td>(Ley &amp; Rosenberg, 2007)</td>
</tr>
<tr>
<td>Clinical researcher</td>
<td>Medicine (USA)</td>
<td>(Snyderman, 2004)</td>
</tr>
</tbody>
</table>

I have chosen to use the single term ‘practitioner-researcher’ in my writing to avoid confusion, and because it conveys to me a sense of research grounded in practice. American medical literature from the early 2000s portrays a strong concern about the shortfall of practitioner-researchers. Clinical research as a career option in medicine was neither well-respected, nor economically attractive. Additional barriers to the development of practitioner-researchers included a lack of formal research training and inadequate time for research (Snyderman, 2004, pp. 882-883). A steady decline in the number of practitioner-researchers amongst American medical practitioners during the 1980s and 1990s, precipitated changes in federal funding in order to attract more graduates to a research career (Ley & Rosenberg, 2007, pp. 1346-1347). This significant government investment indicates that the unique perspective of a practitioner-researcher, emanating from reflection on and in practice, is a valuable asset.
Despite this support, concern about the number of practitioner-researchers in the US medical profession continues to persist (Donath, Filion, & Eisenberg, 2009, p. 1242).

Practitioner-researchers are well positioned to inform professional knowledge and to raise the profile of the profession (Byrne, 2004, p. 75; Cusick, 2000, p. 22; Young, 2004, p. 370). It has also been suggested that the development of practitioner-researcher roles might be one mechanism to promote a more evidence-based approach to practice (Ferlie, et al., 2000, p. 101). The translation of research evidence for use in everyday practice, engaging as a leader facilitating change, and modelling behaviours for others to emulate, are just three of nine items from a list of practitioner-researcher knowledge, skills and attitudes (Crist, 2010, p. 44). These individuals also wield political influence, being able to communicate with health care providers and to advocate for the medical relevance of basic research, with legislators and health agencies (Varki & Rosenberg, 2002, p. 437).

Cusick (2000) explored the experience of practitioner-researchers and presented a very detailed profile of this minority group within occupational therapy. Being a ‘real’ practitioner-researcher was characterised by: profiling ‘real’ research, being predisposed to research, wanting to gain more from practice, and generating a professional profile for themselves (p. 14). These individuals undertake high calibre research of national or international significance, and identify social contacts and educational experiences as being important to predisposing them to continued research. An early interest in research developed prior to or during medical school, and the valued experience of mentoring, is also considered to be an important precursor for the development of US medical practitioner-researchers (Donath, et al., 2009, p. 1242).

Occupational therapy practitioner-researchers seek challenge, stimulation, status, credibility and membership of the research community. Their self-profile is high, considering themselves to be producers of valid research and also experienced clinicians (Cusick, 2000, pp. 14-17). The benefits of practitioner-researcher work are numerous, but in terms of professional knowledge these individuals are vital in
extending practice knowledge, and building the occupational therapy profession (Cusick, 2000, p. 22). In contrast to this high level of confidence amongst occupational therapy practitioner-researchers, nurse academics moving from clinical practice into higher education initially perceived a loss of clinical credibility. This was associated with a change of focus from clinical practice to the development of an academic profile (Andrew, et al., 2009, p. 608). It has been suggested that the single most challenging aspect of a practitioner-researcher role is the ability to maintain an acceptable work/life balance. US medical practitioner-researchers also acknowledge a negative impact on family life, and difficulty in pursuing research whilst working as a physician (Donath, et al., 2009, p. 1243). Trusted sources of support are also essential to enable the practitioner-researcher to cope with an increased workload, identify a research mentor, gain collegial endorsement and access funding (Young, 2004, p. 370). These challenges become increasingly complex for a practitioner-researcher working in a remote area. Geographic and professional isolation compound deterrents to research such as a lack of research-related infrastructure, no dedicated Allied Health research funding, and an absence of local research training or support from a research community (Cusick & Lannin, 2008, p. 1985 & 1994). Cusick (2001) proposes that clinicians become researcher-practitioners as they identify and construct a new role for themselves. “The role change is purposeful and active, motivated by the practitioner’s perception of research and the research role as highly valued” (p. 14). Stimulating and rewarding high school and undergraduate experiences of project work, were identified as predisposing a student to a future role as a practitioner-researcher (Cusick, 2000, p. 16).

2.5 Undergraduate Education and Research

2.5.1 Being an Undergraduate Student

The experience of being an undergraduate student is shaped both by the student’s inner self and the external world of higher education. Barnett (1996) reflects on the dichotomy of the external and internal worlds of a student. The external world is characterised by higher education structures, policy, institutional culture and outcomes; whereas the inner world is centred on the self, beliefs, meaning and personal
achievements (p. 76). However this ordered image of dual worlds does not convey the “multilayered construction” (Barnett, 1996, p. 83) of a student getting to grips with new experiences, within a specific program, in an institution influenced by socio-political policy making. Some important scholarship in higher education is shifting the focus from only knowledge and skills acquisition, to including the embodiment of knowing. From this viewpoint, knowing is “created, enacted and embodied” (Dall’Alba, 2005, p. 363) and defines who we are. Through studying the discipline, the student assimilates their experiences and comes to see the world as an Allied Health professional. The course of study is the stimulus for a transformation of ‘being’, as the student becomes a new self (Barnett, 2009, p. 435). “The being of the student is achieved through a process of becoming the student” (Barnett, 1996, p. 83) and “being and knowing are inextricable” (Dall’Alba & Barnacle, 2007, p. 682). There is a reciprocity between knowing and being, and learning is conceptualised as understanding ways of being, appropriate to the different Allied Health professions (Barnett, 2009, p. 437; Dall'Alba & Barnacle, 2007, p. 684). The processes of professional socialisation may not be overt for undergraduate students, but Lempp (2005) suggests that these implicit rules, commonly held customs and taken for granted aspects, are just as relevant to the students’ experience as the explicit curriculum (p. 649).

The external demands placed on students in higher education are considerable, and students develop strategies to negotiate the system and to cope, sometimes opting for the “easy life” (Barnett, 1996, p. 74). Prominent stressors identified by undergraduate nursing students include: trying to balance employment commitments and study, course workload, academic writing, personal time management and work-life balance (Nicholl & Timmins, 2004, p. 96). A student retains control of their trajectory but may feel that they have diminished influence over their ‘becoming’, as they are expected to meet the agendas of their subjects, discipline and institution (Barnett, 1996, p. 73). The sometimes overwhelming task of reading literature, understanding concepts and acquiring new skills, predisposes students to a state of anxiety. “The being of a student is necessarily a being for anxiety” (Barnett, 2007, pp. 35, author’s original emphasis). Undergraduate students are faced by many uncertainties, and a fundamental purpose
of higher education is to enable students to live with “their own inner turbulence” (Barnett, 2007, p. 127). Attention must be paid to the knowledge, skills and ‘being’ of an undergraduate Allied Health student, in order to nurture their sense of security in a supercomplex world (Barnett, 2004, p. 254). A student’s trajectory may continue upwards, may plateau, or may fall away depending on personal and external circumstances. Success or failure hinges on the central tenets of self-belief, will and motivation.

2.5.2 Self-belief, Will and Motivation

To will, wish or strive for anything whatsoever one must in advance already care. One must care in order to acquire knowledge. (Inwood, 2000, p. 58)

Caring to study is fundamental as it provides the energy for a student to enter higher education. But for a student to undertake an undergraduate Allied Health course lasting four years, she must believe that she has the capacity to complete the course. “Self-faith is belief in oneself” (Barnett, 2007, p. 57) and is essential if a student is to survive the prolonged uncertainty and anxiety inherent in higher education. A student’s level of self-confidence will affect her persistence in, and quality of, her learning (Barnett, 2007, p. 58). Self-belief is the foundation for the development of a student’s disposition to learn, to engage, to explore and to maintain a determination to keep going (Barnett, 2007, p. 102+111). These dispositions call for qualities such as courage, resilience, self-discipline and respect for others, with the range of qualities varying across the different disciplines (Barnett, 2009, p. 436). The term ‘academic self-efficacy’ has also been used to convey a student’s sense of self-belief in relation to her academic study. Linnenbrink & Pintrich (2002) suggest that “students need cognitive skill and motivational will to achieve well” (p. 313). Students who expect to be successful in their academic life are much more likely to achieve that success, and self-efficacy has been found to be predictive of university grades (McKenzie & Schweitzer, 2001, p. 23).

If a student has a care to study and the self-belief that they can stay the course, what is the place of will and motivation? The will focuses on the student’s being, because without a will to learn a student cannot make serious progress (Barnett, 2007, p. 15).
Will imparts energy and it is through will that a student can see a time horizon, and be orientated towards the future (Barnett, 2007, p. 19). Without will a student is unable to acquire new knowledge and skills, but the will cannot be taken for granted. Barnett (2007) discusses the fragility of will and urges tutors to take responsibility for nurturing and enhancing a student’s will (p. 25). Whereas a person’s will has a general character, is largely independent of reason and is interior to the individual; motivation is specific, rational and driven by external factors (Barnett, 2007, pp. 16-17). “A motive is an end, a purpose, a goal” (Barnett, 2007, p. 17), so motivation is amenable to change, depending on the prevailing circumstances. The motivation for an undergraduate Allied Health student to undertake Honours might be the acceptance of a personal challenge, to enhance employment prospects, or to take the opportunity to explore an area of clinical interest. A student who is intrinsically motivated will derive enjoyment and satisfaction from the task itself, expending time and energy acquiring knowledge and solving problems, and will also be more willing to take risks. A student with extrinsic motivation will be driven by factors external to the task, such as the chance of a more prestigious job on graduation (Lovitts, 2008, pp. 313-314).

Contemporary social cognitive motivational theory is founded on four key constructs: academic self-efficacy, task value, achievement goal orientation and attributional beliefs. Motivation is a dynamic phenomenon and students form motivational beliefs that are context and task specific. Some of these beliefs are more generalisable than others across different learning situations (Bong, 2004, p. 287; Linnenbrink & Pintrich, 2002, p. 314). Positive self-efficacy beliefs engender higher levels of work, persistence and achievement on difficult tasks. Students with these beliefs are more likely to seek academic challenges (Linnenbrink & Pintrich, 2002, p. 315). Students with high self-efficacy beliefs are likely to utilise appropriate study skills to achieve at higher levels. This is fairly consistent across student groups of different ages, academic level, gender and ethnicity (Linnenbrink & Pintrich, 2002, p. 315; Zajacova, Lynch, & Espenshade, 2005, p. 679). Over time, students’ academic self-efficacy beliefs will become differentiated, with regard to their ability across subject areas, and in more specific topics and situations. Self-constructs are dynamic and student’s self-beliefs and beliefs
about their learning are highly situational (Bong, 2004, p. 296). Students with high academic self-efficacy may still doubt their ability to undertake Honours research. Task value is another key construct in social cognitive motivational theory and often correlates positively with self-efficacy (Bassi, Steca, Fave, & Caprara, 2007, p. 302; Bong, 2004, p. 288). When students perceive value in tasks they are more willing to confront challenges, trying harder to learn from the new task. Achievement goal orientations reflect the fundamental reasons for engaging in achievement-related behaviour. Goals are presumed to guide a student’s behaviour, cognition and affect, and individuals can be identified as having a ‘mastery goal’ or a ‘performance goal’ orientation (Lee, McInerney, Lem, & Ortiga, 2010, p. 264). Students with a mastery goal orientation will develop new skills, improve their competence, and achieve a sense of mastery founded on self-referenced standards. This orientation is likely to reduce the potential for anxiety, as students are able to maintain their self-efficacy when confronted with academic challenges. The association between task value and mastery achievement goals is apparent across different domains (Bong, 2004, p. 289). A performance goal orientation may be either ‘performance approach’ or ‘performance avoidance’. A performance approach orientation is characterised by a desire to outperform others, gain better subject grades, and to receive public recognition for the superior performance. Students demonstrating a performance-avoidance orientation will work to avoid looking incompetent to others. Both a mastery and performance-approach goal orientation have been positively related to actual performance (Linnenbrink & Pintrich, 2002, p. 321). Together with self-efficacy, task value and achievement-goal orientation, attributional beliefs are a central tenet of contemporary motivational theory. Attribution theory proposes that self-efficacy and future expectations are explained by the individual’s perception of why success or failure occurred. Linnenbrink and Pintrich (2002) associated an optimistic attributional style with higher expectations for success, enhanced academic self-efficacy and positive affect such as pride (p. 317). Conversely, a significant negative relationship was demonstrated between pessimistic attributional style and first year grade point average (McKenzie & Schweitzer, 2001, p. 23).
Contemporary social cognitive motivational theory provides a useful lens through which to view these Allied Health Honours students. The cognitivist approach which focuses on the internal processes that occur during learning, is blended with a socio-cultural perspective to broaden the view, acknowledging the relevance of social and environmental factors on learning. However, this theory does have limitations when contrasted with a phenomenological approach, in which personal meaning and interpretation of experience are privileged. Use of a phenomenological methodology in this study enabled me to explore the students’ self-beliefs and to illuminate their learning through Honours.

Motivation and will are therefore very different concepts, and although motivation may be easier for students to articulate, the will to study is paramount (Barnett, 2007, p. 18). Many undergraduate Allied Health students have the academic ability to undertake Honours but choose not to do so. This decision could be founded on a lack of care about undertaking Honours research, a low level of self-confidence in terms of research capability, a lack of will to engage in study outside of the standard curriculum, or an absence of motivation because Honours does not confer obvious benefits to the new graduate. As students progress towards completion of their undergraduate course, it is likely that their motivation for learning is influenced by the relevance of the course to their future career, rather than any altruistic motivation for learning (Ballmann & Mueller, 2008, p. 95). The decision for any student to undertake Honours is based on a complexity of factors, and it is very relevant to consider the attitude of students towards research.

2.5.3 Attitudes Towards Research

Research may be conceptualised as a process of knowledge production (trading view and domino view), or may be conceived as a learning experience to further understanding and to fulfil the existential needs of the researcher (journey view and layer view) (Brew, 2003, p. 6+14). The ‘trading’ and ‘domino’ conceptions of research focus on the production of an outcome, whereas the ‘journey’ and ‘layer’ conceptions have an internal orientation towards understanding (Brew, 2001, p. 281). Supervisors’
conceptions of research have also been classified as ‘technical’, ‘creative/innovative’, ‘integrating complexity’ and ‘new ways of seeing’ (Kiley & Mullins, 2005, p. 259). This variation in the conception of research is an important issue for consideration, as it influences attitudes towards research, and also the relationship between research supervisors and their students. A research supervisor must take care not to assume that their student has the same conception of research as themselves (Pearson & Brew, 2002, p. 145). Research comparing staff and undergraduate student conceptions of Honours research in a UK biomedical science program, revealed discordant views about the purpose of the research project. Extremes represented on both sides, were illustrated by diverse staff perspectives such as “enabling students to contribute to a particular laboratory’s research programme” and “encouraging independent thought and individual expression and creativity”. The students’ views were similarly polarised: “providing the opportunity to undertake an individual and independent piece of original research” and “provide free labour for supervisors” (Stefani & Tariq, 1997, pp. 282-283). Even within a seemingly homogenous group of postgraduate students, conceptions of research vary widely. Students may conceive research as gathering information; discovering the truth; as an insightful process; as re-search; as finding solutions to problems; or, they may harbour misconceptions about research such as “if research is properly conducted then contradictory findings will never occur” (Meyer, Shanahan, & Laugksch, 2005, pp. 235-236). A difference between the supervisor’s and student’s conception of research has been identified as a risk factor for non-completion of doctoral research (Kiley & Mullins, 2005, p. 247).

To enable research supervisors to work effectively with students, there needs to be a mutual understanding of what undergraduate research is about and what it entails. The ‘student centred research university’ proposed by Boyer (1998) envisaged a synergy and reciprocity between faculty and students as learners and researchers (Boyer Commission on Educating Undergraduates in the Research University, 1998, p. 11). Brew (2003) proposed a model of the relationship between teaching and research in which students “engage as legitimate peripheral participants in academic communities of practice” (p. 12). Research into the participation of science, technology and medical
students in an ‘Undergraduate Research Opportunities Programme (UROP), also
highlights the students’ sense of belonging to a research community: “feeling accepted
as a co-worker with staff and postgraduate students” and “having the chance to talk to
postgrads, post-docs and research assistants” (Goodlad, 1998, p. 352). The key
elements of an ‘Entering Research’ course for undergraduate researchers in the STEM
(science, technology, engineering and mathematics) disciplines, were designed
specifically to “help students develop positive relationships with their research mentors,
define themselves as a member of the research community and understand and
communicate their research” (Balster, Pfund, Rediske, & Branchaw, 2010, p. 109).

Students’ attitudes towards research vary according to many factors such as appeal of
the research course, academic self-efficacy, age, and student status (i.e. undergraduate
or postgraduate). A study of social work students revealed that students at all levels had
some interest in learning about research and that older students; those with greater
feelings of empowerment towards their professional practice; and graduate students;
were generally positive towards research (Secret, Ford, & Rompf, 2003, p. 412).
Female students and students reporting lower academic ability and academic self-
efficacy, were more likely to avoid research literature and be fearful of the research
course. Negative attitudes towards research have also been reported for undergraduate
nursing students, for whom the learning of “practice-based skills” (Kenty, 2001, p. 182)
was more appealing than learning to research. However, undergraduate nursing
students given the opportunity to collaborate in data collection, reported that the
research experience had changed their attitudes towards nursing research. Positive
outcomes of the research experience were not limited to an enhanced understanding of
the complexities of the research process, but also encompassed new perspectives of
the client participants and a more critical appreciation of clinical practice (Thompson,
experience may be viewed as a welcome break from the standard curriculum,
illuminated clearly by medical students seeking “relief from the tedium of the medical
course” (Eaton & Thong, 1985, p. 448). Nursing students reported increased research
knowledge and showed positive changes in their attitude towards research, following
involvement in a research based ‘Collaborative Learning Project’ (Kenty, 2001, p. 184). As a bottom-up approach facilitates effective and sustainable change, it is logical to engage undergraduate students in research to foster the development of future practitioner-researchers. Undergraduate research should make a contribution to practice knowledge, with dissemination of research outcomes in peer-reviewed journals and integration of research outcomes into practice (Wenzel, 2004, p. 151).

Fundamental to learning how to conduct research is an inquiring mind, an appreciation of the power of knowledge, a respect for logical thinking and the need to ask critical questions. Five themes were identified as being highly consistent among undergraduate medical students who chose to continue on to PhD or MD/PhD study. These themes are:

- Curiosity to discover the unknown - consistently predicts those students who persist towards research.
- Enjoyment of problem solving - less important than curiosity as the prime motivator for research.
- Independence - to make their own decisions, make some mistakes and find their own way.
- Helping others indirectly through research - discovery and helping others is often closely linked.
- Approaches to the future - the desire for a future with many possible outcomes.

(McGee & Keller, 2007, pp. 321-329)

The attitude which a student has towards engaging in research will therefore be informed by their prior knowledge of research, their conception of research, and their beliefs about the purpose of research and how it is carried out (Meyer, et al., 2005, p. 226). Motivation for being at university will also influence a student’s attitude towards research. Students who view university as a social experience, or as a means to gaining a useful qualification, may be indifferent to staff research. In contrast, students with a more altruistic perspective are more likely to have a positive attitude towards academic research (Jenkins, 2004, p. 27). An understanding of the students’ perspective of
research enables insight into the barriers to research and a clearer comprehension of why many Allied Health students choose not to undertake Honours.

2.5.4 Barriers to Undergraduate Research

Although undergraduate students may appreciate the links between teaching, learning and research, they may lack an understanding of the research process, and the position of research in the department and university may remain invisible to them (Robertson & Blackler, 2006, p. 217). The attitudes of academic staff towards research, teaching and learning, and their expectations of students as participants within a community of practice, can serve to attract students to, or distance them from, research (Robertson & Blackler, 2006, p. 218). The experience of the research-teaching-learning nexus varies considerably across disciplinary fields, and departmental culture is key to the way in which staff and students experience this nexus (Healey & Jenkins, 2009, pp. 48-49). Discipline knowledge which is easily accessible to students will facilitate undergraduate research, but in disciplines where knowledge creation and dissemination is hierarchical (from the top down): “Acts as a barrier not only to students’ participation in ‘real’ research, but also to their understanding of research as a phenomenon” (Robertson & Blackler, 2006, p. 225).

If staff research is far ahead of the undergraduate curriculum, it can be very difficult for students to relate research to their learning (Jenkins, 2004, p. 17). Developing the students’ awareness of learning from staff involvement in research, is one of the ways in which the students’ understanding of the role of research in their discipline can be developed (Jenkins & Zetter, 2003, p. 10).

Undergraduate students may consider that they are not able to cope with the academic demands of research if they perceive that they have a low level of analytic intelligence, as evidenced by their performance in coursework and their grade point average (GPA). However, the skills and thinking styles identified as being most important for becoming an independent and creative researcher, are higher levels of creative and practical intelligence (Lovitts, 2005, p. 144). Analytic intelligence alone is not a reliable indicator of students who can transition easily to independent study (Lovitts, 2008, p. 301). The
perception of Honours amongst undergraduate Allied Health students is that it is very academically demanding, and therefore students who have great potential in terms of creative and practical intelligence, may shy away from Honours due to “negative assessments of ‘ability’ from self and others” (Lovitts, 2005, p.145). Research self-efficacy has been explored but the correlation of results from different self-efficacy instruments is unreliable. It has been suggested that a student’s low research self-efficacy may influence their self-efficacy rating on any research-related task, purely because the task relates to research (Forester, Kahn, & Hesson-McInnis, 2004, p. 13).

An undergraduate research experience culminating in the production of a dissertation, is often the first opportunity for a student to undertake a substantial piece of independent study. Unsurprisingly then, many students will have a poor understanding of what a dissertation is, let alone how to write one (Todd, Bannister, & Clegg, 2004, p. 346; Todd, Smith, & Bannister, 2006, p. 167). Confidence in their ability to write may also be lacking amongst prospective Honours students, and research has illustrated that typical undergraduate study is of little value in preparing students for research writing (Paxton, 2011, p. 59). Not having a clear understanding of what Honours entails can be a major barrier to students. The coursework assignments and dissertation are explicit pieces of work, but the development of attributes and transferable skills through Honours is not apparent to prospective students. The uncertainty and potential discomfort associated with autonomous learning, may present a considerable barrier to potential undergraduate research students. Just as the transition from undergraduate to graduate student is difficult because students must adjust to a different educational experience, so too is the transition from undergraduate student to Honours student (Gardner, 2008, p. 328). Honours may therefore be perceived as an unacceptable risk by the undergraduate Allied Health students.

Other barriers to undergraduate students engaging in research have been highlighted as “time issues … while ambivalence for research per se and its importance for practice was implied” (Dawson, Faure, & Julius, 2001, p. 4). However, fear of research amongst undergraduate social work students was not seen to negatively impact on the appeal of the research course (Secret, et al., 2003, p. 412). A negative attitude towards research...
was highlighted by Kenty (2001) in relation to undergraduate nursing students (p. 182). The learning of practice-based skills was more highly valued by these nursing students than research skills, and the link between research and practice was not acknowledged. These negative attitudes towards research continued into their professional practice. Fifty two percent of nursing graduates surveyed displayed a poor understanding of the research process and failed to integrate research outcomes into their own practice (Kenty, 2001, p. 182). Personal experience gained from working with Allied Health students indicates that students often maintain the view that research is separate to clinical practice. Research is perceived to be less useful to them as an Allied Health practitioner, than the acquisition of clinical skills.

Time issues are certainly evident for undergraduate students, and a perceived lack of time is likely to be a major barrier for a prospective Honours student. Full-time undergraduate students working more than 15 hours/week in paid employment, are more likely to withdraw from their course of study than students who work less than 15 hours/week (McKenzie & Schweitzer, 2001, p. 23). Time constraints for Allied Health students may also be exacerbated by the requirement for students to manage an academic workload in tandem with workplace learning. A similar situation has been reported for US undergraduate medical students whose “clinical research projects were crowded out by the imperative to take additional clinical electives” (Rosenblatt, Desnick, Corrigan, & Keerbs, 2006, p. 878).

Another barrier to undergraduate research, and more specifically Honours, may be the lack of perceived relevance to the student’s career pathway. A student may consider that they are not interested in research as a career path, or that they do not require Honours to gain employment. A focus on Honours as the goal or reward indicates extrinsic motivation. Extrinsic motivation undermines intrinsic motivation and creativity. If an undergraduate research experience is ‘sold’ to students using the extrinsic motivation of a goal or reward, the creativity of research and research for its own reward is not appreciated by students, as it undermines any intrinsic motivation they may have (Lovitts, 2005, p. 149). An undergraduate research opportunity is a challenging learning experience which enables students to direct their learning, but this can precipitate
anxiety for those students who have a preference for the imposed structure and order of standard undergraduate subjects (Smith, Clegg, Lawrence, & Todd, 2004, p. 197 & 201). The development of a research student virtual portfolio (RSVP) is one mechanism which has been used to enable higher degree students to see clearly what undertaking a PhD involves, beyond the obvious production of a thesis (Manathunga, Lant, & Mellick, 2007, p. 29). The use of a RSVP is explained in more detail in the following section.

2.5.5 Learning Through Research

Similar conceptions of research and learning arise because of the intimate relationship between learning and research. An interwoven perspective of learning and research can be considered as a spectrum on which “learning (researching) as increasing one’s knowledge (information gathering), extends to learning (researching) as changing as a person (personal transformation)” (Wood, 2006, p. 54). The focus of undergraduate research as a learning experience has received wide attention in the literature. Comparison of survey data from 1983 and 2003 in the field of psychology revealed that undergraduate research activity has increased during this time. The role of undergraduate research had also become refocused, shifting from the preparation of students for further research through apprenticeship, to the development of students capable of “critical thinking, independence and creativity” (Kierniesky, 2005, p. 89). A focus on undergraduate research activity and creativity as highlighted in ‘The Boyer Report’ (1998), is one of three recommendations which has attracted most attention in US higher education institutions (Katkin, 2003, p. 24). Healey & Jenkins (2009) conceived the undergraduate research-learning nexus as: research tutored, research based, research led and research oriented.
The research-learning nexus has also been explored by Fish and Coles (2005). Their model of ‘education as research’ is one which enables students to work collaboratively with tutors, to explore understanding. Students “become emancipated from knowledge ‘handed down’ to them” (p. 70) as they critique knowledge for their own developing context.

Hunter, Laursen and Seymour’s (2006) extensive study of the impact of a 10-week, full time summer research experience for US science students, serves to illuminate the diversity of learning through undergraduate research. Gains reported by both students and staff were condensed into eight themes:
These gains were expressed by both students and faculty staff, but the significance of these gains differed according to the contrasting perspectives of experienced staff and novice student researchers. As an illustration of the importance of perspective, “personal-professional gains” were epitomised for students as increased confidence in doing research, but were more apparent to staff as the students’ development of collegial relationships with their research supervisors and faculty staff (p. 54). Learning within a community of practice arises commonly as a theme, in the undergraduate research literature. The four themes which emerged from an evaluation of student learning through an ‘Undergraduate Research Scholarship Scheme’ (URSS) comprised:

<table>
<thead>
<tr>
<th>Research gains</th>
<th>Author</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thinking and working like a scientist</td>
<td>(Hunter, et al., 2006, p. 46)</td>
</tr>
<tr>
<td>Becoming a scientist</td>
<td></td>
</tr>
<tr>
<td>Personal-professional learning</td>
<td></td>
</tr>
<tr>
<td>Clarification, confirmation and refinement of career/education paths</td>
<td></td>
</tr>
<tr>
<td>Enhanced career/graduate school preparation</td>
<td></td>
</tr>
<tr>
<td>Research skills</td>
<td></td>
</tr>
<tr>
<td>Generalised gains</td>
<td></td>
</tr>
<tr>
<td>Working independently</td>
<td></td>
</tr>
</tbody>
</table>

Research into the perceptions of alumni who had either participated in an undergraduate research program (URP), or had not participated, revealed a statistically significant difference in favour of the URP students in relation to their ability to: develop intellectual curiosity; acquire information independently; understand scientific findings;
analyse literature critically; speak effectively; act as a leader; and possess clear career goals (Bauer & Bennett, 2003, p. 221). Results from the same study also indicated that the longer the duration of the undergraduate research experience, the greater the perceived benefit. Students undertaking a coursework Masters degree in nursing scored their analytic, problem solving and planning skills most highly (Drennan & Clarke, 2009, p. 490).

Analysis of the benefits of an undergraduate research assistantship as perceived by faculty staff revealed two distinct themes. The development of technical skills and abilities comprised elements such as data analysis, academic writing and the use of statistical programmes. Less tangible benefits were also identified such as enhanced time management skills, communication skills, teamwork and leadership (Landrum & Nelsen, 2002, p. 18). This theme of learning gains as being related to either the research process or to personal development, is also evident in the results from the Survey of Undergraduate Research Experiences SURE study (Lopatto, 2004, p. 276).

With a strong focus on personal development, undergraduate medical students reported that the experience of undertaking a medical school research project (MSRP) enhanced their ability to critically evaluate literature (95%), to work independently (93%) and to evaluate their own strengths and weaknesses (89%) (Frishman, 2001, pp. 140-141).

However, if learning through research is reduced to sets of generic skills such as time or project management, this excludes consideration of the development of “a skilful performer … someone who not only knows what to do, but knows how to apply that in practice” (Pearson & Brew, 2002, p. 137). The engagement, commitment and risk intrinsic to learning through research, is essential to the development of the ‘being’ of a research student (Martin, Drage, Sillitoe, & Clingin, 2006, p. 97). The fundamental aspects of learning, for a cohort of Doctorate in Education students, were encapsulated as ‘changing as a person’. The elements of this learning experience clearly reflect the integration of research and professional practice:

<table>
<thead>
<tr>
<th>Research gains</th>
<th>Author</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Recognising alternative epistemological stances</td>
<td>(Wood, 2006, p. 64)</td>
</tr>
</tbody>
</table>
• Seeking to understand the basis of others’ perspectives
• Realising differences in the fundamental nature of learning
• Engaging in personal reflection and appreciating its role in interpretation and understanding
• Realising differences in the nature of professional practice

The integration of research and practice is imperative to ensure the continuing development of practice knowledge and the professional evidence base (Dawson, et al., 2001, p. 6). Learning through research can be conceptualised in many ways and the importance of the research-learning-practice nexus is highlighted for the Allied Health Honours students in this study:

<table>
<thead>
<tr>
<th>Research gains</th>
<th>Author</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Extending professional knowledge</td>
<td>(Robinson, 2010, p. 278)</td>
</tr>
<tr>
<td>• Developing clinical practice</td>
<td></td>
</tr>
<tr>
<td>• Exploring occupational practice</td>
<td></td>
</tr>
<tr>
<td>• Learning about writing</td>
<td></td>
</tr>
<tr>
<td>• Learning about research</td>
<td></td>
</tr>
<tr>
<td>• Learning to work with a research supervisor</td>
<td></td>
</tr>
<tr>
<td>• Learning about the research community of practice</td>
<td></td>
</tr>
<tr>
<td>• Learning about self</td>
<td></td>
</tr>
</tbody>
</table>

Enabling students to gain a deeper understanding of the nature of professional knowledge through research, will raise their awareness of practice epistemology and better equip them to debate professional practice and influence reform.

An undergraduate research experience is recognised as an important grounding for Masters and doctoral research, and is fundamental to the development of student knowledge and the preparation of future leaders in the professions (Watkins, 2007, pp. 126-127). Undergraduate research capability is concordant with the needs of doctoral students, and graduate attributes of doctoral students have been identified through the use of a RSVP. This tool captures attributes comprising key interdisciplinary research skills which are difficult to teach and only learnt by doing and being:

Effective communication and teamwork, the ability to understand and apply multiple disciplinary and international perspectives, to be flexible and have a high tolerance for
ambiguity, to develop social, ethical and environmental responsibility. (Manathunga, et al., 2007, p. 32)

Learning independently and learning collaboratively are both themes which arise in the literature on undergraduate research. Students have reported that undertaking research requires an ability to work independently, and this in turn induces a sense of self-reliance and increased self-confidence. These benefits are not confined to the research project, as self-directed learning and problem solving additionally benefit other areas of the students' studies (Seymour, Hunter, Laursen, & Deantoni, 2004, p. 528). An increased confidence in integrating learning through research and learning through classroom experiences is also evident (Balster, et al., 2010, p. 112). Collaboration amongst undergraduate research students has also been shown to facilitate learning in several ways. Collaboration allows students to deal with differences of opinion, and the development of an ability to live with uncertainty and controversy is fundamental not only to research, but also to the student becoming a novice Allied Health practitioner. Collaboration also enables exposure to a "diversity of experiences" (Balster, et al., 2010, p. 109) and alternative perspectives, and this fosters the development of internal critical thinking (Waite & Davis, 2006, pp. 408-411). Dialogue in a non-threatening environment enables students to develop the appropriate language to discuss research and engenders confidence (Martin, et al., 2006, p. 97). Sharing experiences through discussion can also enhance a student’s feelings of self-efficacy as a researcher, and the opportunity for “thinking aloud appears to support students’ self-assessment and feelings of expectancy” (Waite & Davis, 2006, p. 413). Through a process of critical reflection with research supervisors and peers, a student can clarify and confirm their knowledge, enabling knowledge transfer to different problems and contexts (Pearson & Brew, 2002, p. 141). A “culture of collaboration” (Gardner, 2008, p. 328) has a great influence on the development of independence in research students, and reduces the sense of isolation which is often associated with a research experience (Fitzsimmons, Anderson, McKenzie, Chen, & Turbill, 2003, p. 6). The formation of student support groups are considered to be an important mechanism to engender a research culture (White, 2004, p. 235). Limited social contact with other postgraduate students, in addition to little opportunity for engagement in the broader research community, were
criticisms raised by nursing students undertaking a coursework Masters program (Drennan & Clarke, 2009, p. 490).

Knowledge acquisition through research may be conceived as ‘formal knowledge’ and ‘informal knowledge’. Undergraduate research students will gain formal knowledge made explicit through their understanding of principles and concepts, and their attitudes towards and opinions about practice. Perhaps more importantly these students also gain informal or tacit knowledge, which is about ‘knowing how’. Tacit socialisation is a very important element of being an undergraduate research student, because students who transition easily to graduate research “are good at acquiring informal knowledge about doing research and about being an academic or professional in the discipline” (Lovitts, 2008, p. 307). Increased knowledge in a specific field of practice, and professional recognition through conference presentations and networking opportunities, contribute to the learning experience of the undergraduate research student (Tan, 2007, p. 212).

An undergraduate research experience provides students with the opportunity to see whether they enjoy research, and enables them to appreciate the degree of effort required for research and knowledge generation (Solomon, Tom, Pichert, Wasserman, & Powers, 2003, p. 153). Students reporting a positive experience of undergraduate research identify factors such as: developing a greater understanding of research methods, gaining self-confidence, interacting with professional colleagues, and benefits in gaining entry to specialist training or employment opportunities (Eaton & Thong, 1985, p. 449). A positive experience of undergraduate research will not only extend the student’s knowledge and skills, but will also change their professional ‘being’ (Wenzel 2004). However, the learning experience may be negative, particularly if students experience research as a series of monotonous or repetitive tasks, or if their relationship with research supervisors is poor (Eaton & Thong, 1985, p. 449).

In a knowledge society, familiarity with traditional research skills alone is insufficient. An undergraduate research experience such as Honours can embed a disposition for research (Willison et al., 2010, p. 310). This is vital not only for students transitioning to
research higher degrees, but also for practitioners who are increasingly expected to integrate research with clinical practice. Graduates should be skilled in “organising the deployment of knowledge in practical situations and using a knowledge base to derive solutions to new problems” (Jenkins & Zetter, 2003, p. 13). Whether a student decides to progress to postgraduate study or not, the gains in research skills, personal development and satisfaction through an undergraduate research experience, is relevant to all students (Willison & O'Regan, 2007, p. 406). “The ability to identify, analyse and resolve problems will prove invaluable in professional life and in citizenship” (Boyer Commission on Educating Undergraduates in the Research University, 1998, p. 17). Employers will increasingly demand graduates who can both create and use knowledge.

2.5.6 Undergraduate Research Experience and Career Goals

It may seem unrealistic to think about planning a research career as an undergraduate student, but it is there in the undergraduate programme that the research seed is planted and where it takes root. (Adderly-Kelly, 2003, p. 43)

It has been suggested that “all students - certainly all graduates – have to be researchers” (Scott, 2002, p. 13), to enable not only knowledge production, but also a capacity to cope with risk and uncertainty. However, the closer integration of teaching and research is not universally construed as an intention to educate all students to become academics (Brew, 2003, p. 3). Interest in a future research career may be a motivation for undergraduate students to undertake research, but preparation for work or graduate education may also be considered to be an ancillary, rather than a primary gain, of an undergraduate research experience (Hunter, et al., 2006, p. 61). ‘Clarification of a career path’ was rated seventeenth in a list of twenty specific learning gains, arising from an undergraduate research experience (Lopatto, 2004, p. 273). The concern that many undergraduates who have the capacity to undertake a research degree but decide on a different career path, remains as pertinent today as it was over 20 years ago (Committee to Review Higher Education Research Policy, 1989, p. 127).
Research can stimulate or renew interest in the discipline through engagement and discovery of knowledge, and can also enable self-discovery (Seymour, et al., 2004, p. 526). Undergraduate research may instil a love of research such that the student wishes to continue along this path, or may serve to highlight the hard work, frustration and potential tedium, which can deter students from contemplating further research. A survey of 1135 US science undergraduates revealed that 91% of the students had a sustained or increased interest in postgraduate education following a summer research program, in contrast to 4.7% of students whose interest was diminished by their research experience (Lopatto, 2004, p. 272). The hypothesis that undergraduate research helps promote career pathways has been proposed, particularly for under-represented groups such as minority students (Lopatto, 2004, p. 270). Undergraduate research has also been explored as a means of improving recruitment and retention of under-represented groups to Chemistry (Wenzel, 2004, p. 150).

Sixty seven percent of science alumni who had participated in a 1-2 year part-time undergraduate research program (URP) progressed to doctoral research, as compared to 12% of alumni who had not participated in the URP (Bauer & Bennett, 2003, p. 224). The URP alumni were also almost twice as likely to complete their doctoral studies, compared to their peers who had no undergraduate research experience (Bauer & Bennett, 2003, p. 226). However, engagement in research as an undergraduate student does not always predispose students to progress to higher education and an academic career. Although 85% of US undergraduate medical students reported that a medical student research project (MRSP) had some impact on their career, only 15% of the total number of students suggested that their research experience had encouraged them to pursue an academic career (Frishman, 2001, p. 142). Similarly, for another group of US undergraduate medical students who intended to incorporate research into their careers, “only a small fraction choose to become research scientists” (Rosenblatt, et al., 2006, p. 880). In a comparison of orthopaedic residents undertaking either a clinical residency or a research residency, there was no significant difference between the number of practitioners in each group who elected to enter academic practice, or to
engage in a postgraduate fellowship (Segal, Black, Schwentker, & Pellegrini, 2006, p. 90).

Compulsory completion of an undergraduate research elective also has the potential to enhance or impair the pursuit of a research career. Within a group of Canadian undergraduate medical students who perceived a research elective as valuable; “63% were more interested in medical research, 6% were less interested and 31% had not changed their decision to pursue a research career” (Houlden, Raja, Collier, Clark, & Waugh, 2004, p. 660), as a consequence of their research experience. Solomon et al (2003) suggests that a positive research experience as a medical student may provide the crucial stimulus for entry to a career in academic medicine and research. The impact of the undergraduate research experience also has durability, as it is evidenced by the professional activities and attitudes of these doctors during their careers (p. 153). Undergraduate research may also facilitate entry to a specialist field of practice. Dental student researchers were reported as being “three times more likely than their non-research peers, to complete a speciality training” (Rosenstiel & Johnston, 2002, p. 1372). Gender may also influence decision making amongst undergraduate students, in terms of pursuing a research career. The most important influential factor for male medical students has been cited as “the perceived quality of life of their past research mentors”, in comparison to female medical students for whom the major influence was “prior research experience” (Houlden, et al., 2004, p. 660). Barriers to a research career experienced by women have been identified as: cultural, attitudinal, work related and financial (White, 2004, p. 232).

Undergraduate research experiences are diverse in their design, duration and context. However, what they have in common is the desire to engage undergraduate students in a transformational learning experience. A research experience should nurture the development of capable, curious, reflective and resilient practitioners, able to both use and contribute to, the rapidly changing knowledge of a supercomplex world. Honours is just one of the possible undergraduate research experiences, but even this single term comprises several different programs of study. The following section focuses on
Honours programs available to Australian undergraduate students, as distinct from Honours study in the UK or the USA.

2.6 Honours Study

In response to concern about several issues including the European Bologna Process, a national decline in the number of Honours students, the international value of an Australian Honours qualification and the process of higher research degree scholarship selection, a national review of Honours was commissioned by the Australian Learning and Teaching Council (Kiley, Boud, Cantwell, & Manathunga, 2008). The report arising from this review provides the most comprehensive scoping of the current status of Honours in Australia. It reveals that:

Honours degrees occupy a pivotal position in the Australian higher education spectrum; that is, they play an important role between undergraduate degrees and various graduate destinations. Honours is visible, concrete and highly valued at departmental and discipline level; inadequately understood and difficult to regulate and classify at cross-disciplinary and institutional level and largely invisible outside the Australian higher education sector. (Kiley, Nursoo, et al., 2009, p. 1)

This national review endorses the importance of Honours degrees and addresses the apparent conflict relating to Honours, at different levels of the Higher Education sector. The lack of standardisation of Honours degrees in Australia in terms of program structure and purpose, has led to a poor understanding of the value of Honours outside of specific disciplines and departments. However, a dynamic Honours program has been considered to be indicative of a dynamic university research culture (Zeegers & Barron, 2009, p. 567).

2.6.1 Structure of Honours Programs in Australia

Funded as an undergraduate program but used as a key indicator of research potential, Honours program are uniquely positioned within Australian universities (Zeegers & Barron, 2009, p. 568). Honours programs usually take the form of one of two designs,
but there is additional complexity within these two program styles, and also alternatives to these two major forms.

Table 1: Structure of Honours programs in Australia

<table>
<thead>
<tr>
<th>Style of Honours programs</th>
<th>Pathway</th>
<th>Intention of the program</th>
</tr>
</thead>
<tbody>
<tr>
<td>‘End-on year’: 3+1 (3 years UG degree + 1 year Honours full time).</td>
<td>Research pathway</td>
<td>Most students will use Honours to progress to a research degree.</td>
</tr>
<tr>
<td>‘Embedded’: 4th year based on merit OR 3rd and 4th year (part time).</td>
<td>Professional pathway</td>
<td>Assisting graduates to meet professional requirements and/or enhance employment prospects.</td>
</tr>
</tbody>
</table>

**Additional Honours design, pathway and intention**

| ‘Embedded’: throughout the undergraduate degree (part time). | Research-oriented degree for outstanding students | Students undertake a research-focused Honours level program throughout their undergraduate degree. |
| Academic enrichment | To allow the student the opportunity to study a subject in more depth and obtain advanced disciplinary knowledge. |

Adapted from (Kiley, et al., 2008, p. 2); (Kiley, Nursoo, et al., 2009, p. 5+7).

2.6.2 The Role of Honours Programs in Contemporary Australian Higher Education

In the 1989 government review of higher education policy, Honours research is mentioned specifically in addition to PhD and Masters research, as being integral to research training (Committee to Review Higher Education Research Policy, 1989, p. 116). This report also stressed an urgent need for a dramatic increase in research
training, to help meet the world-wide need for graduates with advanced knowledge and skills (Committee to Review Higher Education Research Policy, 1989, p. 124). However, the Australian Vice Chancellors Committee guidelines (2005) pertain only to the academic quality and standards of Masters, PhD and professional doctorate degrees. The only reference to Honours relates to the university’s responsibility to provide an appropriate learning environment (Australian Vice Chancellor's Committee, 2005, p. 7+14).

The primary goal of Honours programs is research training, but more broadly this should comprise “a mix of advanced theory, professional training (where appropriate), research training and a research project leading to a thesis” (Australian Vice Chancellor's Committee, 1995, p. 1). Honours programs may be considered as a means of preparing undergraduate students for professional practice, as training of future research higher degree students, and also as enabling a student to make an authentic contribution to practice knowledge (Zeegers & Barron, 2009, p. 568+571). Honours is a recognised pathway into a research higher degree but “it is so taken-for-granted that there is little need to articulate its place in the system” (Zeegers & Barron, 2009, p. 570). It is only recently that Honours has received more attention in the literature and it is often absent from academic development programs (Orrell, 2006, p. 238). A focus on Honours is warranted, because this period of undergraduate study may prove vital in acting as a catalyst for students considering transition to postgraduate study and further research (Fitzsimmons, et al., 2003, p. 3). There is however, considerable disparity between universities and between departments within universities, in terms of grading Honours. The award of a first class Honours degree is perhaps more arbitrary than evidence based, and this has serious implications for the individual student in terms of eligibility for a PhD scholarship (Kiley, Nursoo, et al., 2009, p. 569; Zeegers & Barron, 2009).

Honours program structures have evolved as a response to disciplinary and professional needs, to students' motivations, and to enable students to undertake a specific learning experience to acquire a range of knowledge and skills. These advanced skills have been conceived as: vocational skills, critical thinking skills and
analytical skills (Zeegers & Barron, 2008, p. 5); communication skills, presentation skills and leadership skills (Schweinsberg & McManus, 2006, p. 62). Undertaking Honours may also imply that a student is engaged in a qualitatively different and more sophisticated experience than that of standard undergraduate study (Kiley, Nursoo, et al., 2009, p. 6). The career path for an Honours graduate may well focus on the integration of skills into professional practice, rather than the pursuit of a higher degree. The integration of a Bachelor of Nursing Honours within the Graduate Nurse Program at Flinders University, appears to be an excellent example of how academically capable students can be retained, and can maintain their credibility as nurse practitioners whilst pursuing research (Hawes & Schmitz, 2000, p. 11). With this model, new graduates are not compelled to choose between clinical practice and research when considering employment. A model such as this which enables Allied Health graduates to combine practice with research, in a structured environment, would be a welcome pathway for the development of practitioner-researchers.

Within Allied Health the emphasis of Honours differs between disciplines and also between different institutions, depending on the prevailing professional and research culture. For example, the research pathway may be emphasised with an expectation that Honours students will progress to doctoral study, or Honours programs may be more professionally oriented, to enhance the employment prospects of the students. In spite of the differences between program styles, pathways and intentions of Honours, three core curriculum features of Honours programs have been identified: advanced disciplinary knowledge, research training and a substantial independent research thesis/project (Kiley, Nursoo, et al., 2009, p. 6).

2.6.3 Research Into Honours

In very recent years there has been a renewed interest in Honours and the experience of staff and students involved in Honours. However, prior to 2008, Honours in Australia had received scant attention in the literature. The following discussion is limited to Honours research in Australia.
Although research publications are few, research focused specifically on Honours does encompass students from a broad range of disciplines: economics, nursing, biomolecular sciences, geography, computer science, physics, history, biological sciences, economics, psychology, environmental science, engineering, built environments, education, science, arts and the humanities. The stimulus for previous research into Honours has been equally diverse:

- concern over the low proportion of academically capable students choosing to progress to Honours (Freegard, 2008, p. 1; Fulcher & Piper, 2005, p. 295; Gillis, 2007, p. 81; Powles & Patrick, 1991, p. 54).
- the experience of Honours students as clinicians/researchers in practice (McInerney & Robinson, 2001, p. 214);
- Honours as preparation for a research career (Fulcher & Piper, 2005, p. 293; Mullins, 2006; Shaw, 2010);
- the transition from coursework to research-based study (Schweinsberg & McManus, 2006, p. 52);
- the future of Honours in Australia (Kiley, Nursoo, et al., 2009, p. 1);
- the experience of students undertaking Honours (Allan, 2011; Shaw, 2010).

The following table presents a summary of the features of existing Honours research, to illustrate the variation in the structure of the Honours programs, the study participants and the research methodology.
<table>
<thead>
<tr>
<th>Honours structure</th>
<th>Discipline</th>
<th>Participants</th>
<th>Methodology/research method</th>
<th>Author</th>
</tr>
</thead>
<tbody>
<tr>
<td>Embedded in the 4\textsuperscript{th} year</td>
<td>Economics</td>
<td>21 Honours students (75% male + 25% female). Typically under 25 years. 60 ‘pre-Honours’ students (3\textsuperscript{rd} years).</td>
<td>Case study design; survey used for data collection.</td>
<td>(Powles &amp; Patrick, 1991)</td>
</tr>
<tr>
<td>End-on year</td>
<td>Nursing</td>
<td>6 female nurse graduates.</td>
<td>Content analysis of student essays.</td>
<td>(McInerney &amp; Robinson, 2001)</td>
</tr>
<tr>
<td>Not stated</td>
<td>Not stated</td>
<td>355 Honours students.</td>
<td>Survey</td>
<td>(Mullins, 2006)</td>
</tr>
<tr>
<td>End-on year</td>
<td>Computer science</td>
<td>None.</td>
<td>Authors’ review of course restructure.</td>
<td>(Fulcher &amp; Piper, 2005)</td>
</tr>
<tr>
<td>End-on year</td>
<td>Geography</td>
<td>3 Honours coordinators initially; subsequent involvement of Honours staff at another 11 universities.</td>
<td>Literature search and briefings.</td>
<td>(Schweinsberg &amp; McManus, 2006)</td>
</tr>
<tr>
<td>End-on year and embedded courses</td>
<td>Humanities courses</td>
<td>42 students (11 male + 31 female) who had</td>
<td>Mixed methods incorporating Grounded Theory; quantitative data analysis and semi-</td>
<td>(Freegard, 2008)</td>
</tr>
<tr>
<td>Not stated but assume end-on year</td>
<td>Biological sciences and humanities</td>
<td>10 Honours coordinators and recent graduates from five universities across three states.</td>
<td>Documentary analysis; semi-structured interviews.</td>
<td>(Kiley, Moyes, et al., 2009)</td>
</tr>
<tr>
<td>4th year: not stated whether embedded or end-on year</td>
<td>Physics, history, economics, psychology, engineering, environmental studies</td>
<td>45 conveners of the respective Honours program and 87 Honours students.</td>
<td>Semi-structured interviews with Honours program conveners; analysis of previous Honours review documents; Honours student survey (on-line and anonymous).</td>
<td>(Kiley, Nursoo, et al., 2009)</td>
</tr>
<tr>
<td>4th year: 18% end-on year, 25% embedded, 57% education research project</td>
<td>Education, engineering, science, arts, built environments</td>
<td>295 Honours students across different courses in one university.</td>
<td>Multi-scale questionnaire; scales addressed: motivation, research environment, research self-efficacy and the Honours research journey.</td>
<td>(Shaw, 2010)</td>
</tr>
<tr>
<td>End-on year</td>
<td>Environmental sciences</td>
<td>10 Honours students.</td>
<td>Ethnography; semi-structured retrospective interviews conducted over a three year period.</td>
<td>(Allan, 2011)</td>
</tr>
</tbody>
</table>
Students choose to study Honours for a variety of reasons, but one of the prominent motivational factors is enhanced employment and career prospects (Fulcher & Piper, 2005, p. 295; Powles & Patrick, 1991, p. 55). Plans to undertake postgraduate study are important in influencing a student’s decision about Honours (Kiley, Moyes, et al., 2009, p. 20; Powles & Patrick, 1991, p. 55). Survey results from a group of 355 Honours students indicated that 36% intended to proceed to postgraduate research, 44% were unsure and 20% did not intend to progress (Mullins, 2006, p. 239). The inter-relationship between learning motivation, research self-efficacy, research environment and research orientation, has been conceptualised as a model to identify research readiness in Honours students (Shaw & Holbrook, 2006, p. 25). An interesting perspective is offered by environmental science students enrolled in an ‘end-on year’ Honours program. Motivation for these students includes a desire to learn and to develop skills, but there is also a focus on avoiding unemployment, rather than undertaking Honours as preparation for PhD (Allan, 2011, p. 424). Motivation is dynamic and context dependent, and students may equally be deterred from Honours for many reasons. Students may not consider Honours if they are concerned that they may not qualify for the program, do not believe they can cope with the workload, perceive a lack of encouragement from the academic staff, or consider that the size of the faculty would prohibit close interaction between staff and students (Powles & Patrick, 1991, p. 57). Students will think much more seriously about their Honours decision-making if academic staff actively engage in direct, verbal persuasion with individual students (Freegard, 2008, p. 14; White, 2004, p. 233).

There is evidence to suggest that many academically capable students choose not to study Honours, and this has been linked with buoyancy in the job market for new graduates (Freegard, 2008, p. 4). Economic prosperity and low unemployment may act to deter students from research and academic careers (Kiley, et al., 2008, p. 4). The same issue was evident 20 years ago, when undergraduate students were perceived to be anxious to gain employment soon after graduation (Powles & Patrick, 1991, p. 56).

The largest factor in the decision not to pursue Honours was a strong economic impetus to join the workforce, particularly expressed by those who had already been in higher
education for several years. (Freegard, 2008, p. 8)

A lack of workplace experience has been highlighted as a matter of real concern for prospective Honours students, and this tension between practice and research impacts negatively on the uptake of Honours (Freegard, 2008, p. 9). The perceived market value of an Honours degree in the workplace may also deter students from undertaking any additional undergraduate study. Students may be reluctant to re-enrol for an ‘end-on year’ Honours program, when they are perhaps more attractive to a potential employer with a higher degree such as a graduate diploma or Masters (Freegard, 2008, p. 10).

Honours is a period in which students are required to make a shift from coursework to research-oriented study (Schweinsberg & McManus, 2006, p. 52). Talking to students who are undertaking, or who have undertaken Honours, revealed that it is perceived as a very positive experience. Honours is challenging, very demanding in terms of time and notable for the intensity of study, but students believe the experience to be extremely valuable and very worthwhile in terms of a learning experience (Kiley, Moyes, et al., 2009, p. 22); (Allan, 2011, p. 425). Students have reported that Honours “provided a stimulating course of study, enhanced career prospects and brought the discipline together into a cohesive whole” (Powles & Patrick, 1991, p. 54). Students also acknowledge the role of Honours in developing “verbal, written, communication, analytical, evaluation and problem-solving skills” (Kiley, Moyes, et al., 2009, p. 21). These research skills and the discipline knowledge accumulated through Honours is considered by students to take them beyond graduate level. Honours students develop a deeper understanding of disciplinary research through participation in the research culture, and thus gain a sense of belonging to the discipline (Kiley, Nursoo, et al., 2009, p. 8). Research which explored the experience of Honours for fourth year Honours students undertaking either an ‘end-on year’ Honours, an ‘embedded’ Honours, or an education research project, identified a different pattern to their research journeys. The difference in the structure of each of these three Honours programs influences the student trajectory, regardless of discipline. However, all of the Honours students end their journey with a positive disposition (Shaw, 2010). Completion of an undergraduate research project enables Honours students to feel prepared to undertake further
research, but the level of confidence is variable. Research preparedness is more evident amongst male students, and also for those students enrolled in an ‘end-on year’ program rather than ‘embedded’ Honours (Shaw, 2010).

Important elements of the students’ Honours experience have been highlighted, consequent to an Honours program restructure and the introduction of a seminar presentation. The research seminar enabled Honours coordinators to gain a clearer insight into the capabilities of the individual Honours students, and the students benefited from diverse feedback on their research (Fulcher & Piper, 2005, p. 299). In terms of enhancing the profile of Honours and Honours students within the undergraduate community, this seminar proved to be immensely valuable (Fulcher & Piper, 2005, p. 299). The shared experience of the seminar also facilitates a sense of collegiality among the Honours students. Although not stated explicitly, this could be construed as the consolidation of an Honours community of practice. A sense of belonging and membership of a research community of practice is highly relevant to Honours students. Students are aware of a research hierarchy as they “actively construct positions” (Allan, 2011, p. 431) between academics at the ‘top’ and undergraduate students near the bottom. The degree of engagement with a research community of practice varies according to the structure of the Honours program (Shaw, 2010). Students enrolled on an ‘end-on’ year program commonly belong to a research group, have a high level of engagement with the research community, and are more likely to have an intention to progress to postgraduate research. Students undertaking ‘embedded’ Honours experience less contact with the research community, and are much more likely to graduate into the workforce rather than progress to a higher research degree. Students enrolled in an Education Research Project similarly have low engagement with the research community, and low levels of intention to progress to further research. However, a high degree of research self-efficacy, and frequent contact with their research supervisor, predisposes some of these education students to contemplate postgraduate study (Shaw, 2010). Effort should be invested in integrating Honours students into the research community of practice, and this may be facilitated by linking students and staff with common research interests (Schweinsberg &
Typically Honours students are undergraduates studying Honours as an ‘embedded’ program, or undertaking Honours as a full-time, ‘end-on year’ program. However, a very interesting example of Honours is that of nursing students who enrol in Honours whilst engaged in a Graduate Nurse Year program. These nurses are therefore engaged in the dual role of nurse practitioner and research student. The resultant nexus between clinical practice and research creates tension and apprehension for these Honours students (McInerney & Robinson, 2001, p. 216). Not only are they required to understand the complexities of research, but they must cope with this in tandem with the multiple challenges of being a novice practitioner. Whilst not mirroring exactly the position of undergraduate Allied Health Honours students, there are close parallels between the students in this study and the nurse graduate researchers. The relationships which students form with research supervisors, and with other academic staff and professional colleagues, are vital to their Honours experience. The student-supervisor relationship is unique, and ultimately dependent on many factors such as staff and student interests, research conceptions and communication (Schweinsberg & McManus, 2006, p. 58). In the context of Honours, the role of the research supervisor is particularly challenging, because of the inexperience of the Honours students and the relatively short duration of Honours (Schweinsberg & McManus, 2006, p. 58). A student’s relationship with an Honours supervisor is likely to be fundamental to the student’s wellbeing, and feedback from a supervisor can impact the student profoundly (Allan, 2011, p. 426; Kiley, Moyes, et al., 2009, p. 22). Other notable factors identified as effecting the wellbeing of Honours students include relationships with friends and family, financial issues (Kiley, Moyes, et al., 2009, p. 22), other Honours students and postgraduate students (Allan, 2011, p. 429).

The perspective of Honours coordinators is a feature of some of the existing research in Honours. In contrast to the personal experience of students, academic staff conceive Honours as contributing to, or being shaped by, the discipline (Kiley, Moyes, et al., 2009, p. 18). Honours is considered to be an opportunity to introduce undergraduate students to research, to enable personal development and to enhance employability.
The perception of Honours as a prelude to postgraduate study is not held universally, and success in Honours is not uniformly considered to be an accurate predictor of student performance in a higher research degree (Kiley, Moyes, et al., 2009, pp. 19-20).

Facilitating a smooth and painless transition of students into Honours is fundamental to attracting students into Honours, retaining those students and ensuring that the students’ experience of Honours is optimal. Proposed strategies to ease the transition to research-oriented study include Honours preparatory programs in the second and third years of undergraduate study. The early development of research and writing skills would serve as an excellent grounding for Honours. Prospective Honours students could also develop foundations for an Honours project, such as identifying a suitable supervisor and undertaking early project development work (Schweinsberg & McManus, 2006, pp. 60-61). Discussion of Honours early in a student’s course of study, to illustrate the advantages of Honours and to link Honours with career progression, may make Honours “seem intrinsically interesting to more students” (Powles & Patrick, 1991, p. 58). Whilst very difficult to articulate, and invisible to prospective Honours students, the experience of Honours is transformative (Allan, 2011, p. 431). Transformation becomes apparent only through the individual student’s experience, and it is both an epistemological and ontological transformation. Students are not motivated to undertake Honours because they want to change, but they do undergo change as a consequence of the Honours experience. Some of these changes are obvious to the student such as increased knowledge and improved research and writing skills. But ontological change is tacit and may remain unacknowledged, unless a student is enabled to reflect on their ‘being’ and who they are becoming.

2.7 Identifying the Knowledge Gap

Despite the renewed interest in Honours in recent years and a consequent increase in publications relating to Honours study, many areas remain unexplored and questions unanswered. The role of Honours in contemporary Australian higher education has been outlined, and the three core features of ‘advanced disciplinary knowledge’, ‘research training’ and ‘the production of a substantial independent research
thesis/project’, have been clarified. However, these core features cannot capture the complexity of Honours, nor articulate the purpose of Honours for the different disciplines. In the current climate of change in higher education, with the influence of the European Bologna Process and the increasing prevalence of graduate entry Masters programs and professional doctorates, the future of Honours is uncertain. However, it currently remains as a major mechanism for the transition of students from undergraduate study to doctoral research, and the allocation of PhD scholarships are determined by Honours grade. Therefore, there is an imperative to enhance our shared understanding of the purpose of Honours.

Existing research in this field has focused on students from a broad range of disciplines, but there is no available research relating to Allied Health Honours students. This in itself is an important justification for this study, but there are other pertinent issues which strengthen the need for this research. Typically a very small proportion of undergraduate Allied Health students choose to undertake Honours and additionally a very small number of these Honours students progress to a research higher degree. Census data collected in 2001 identified the proportion of Allied Health practitioners with an undergraduate qualification, who also held a postgraduate qualification. The figures for the four Allied Health professions are: occupational therapists (6%), physiotherapists (17%), podiatrists (9.7%), speech pathologists (8.3%) (Australian Health Workforce Advisory Committee, 2004, p. 53). Considering the mean for all four groups, approximately 10% of Allied Health practitioners achieve a postgraduate qualification. If only 1:10 Allied Health practitioners combine research with practice, this severely limits the potential to expand the pool of practitioner-researchers in Allied Health. This in turn impacts negatively on the continuing generation of practice knowledge.

Only three of the studies on Honours focus exclusively on the experience of the students:

- the experience of Honours students as clinicians/researchers in practice (McInerney & Robinson, 2001);
- the experience of students undertaking Honours (Allan, 2011; Shaw, 2010).
McInerney and Robinson (2001) analysed student essays to elucidate the experience of nursing Honours students. Shaw (2010) employed a multi-scale questionnaire to explore the experience of students in education, engineering, science, arts and built environments. Allan (2011) used an ethnographic methodology to retrospectively evaluate the experience of ‘end-on year’ Honours students in environmental science.

By focusing on Allied Health students this study will research a group of Honours students who are absent not only from Honours-specific research, but who are also not represented in the much broader field of undergraduate research. The staging of interviews at the early, mid and late stages of Honours will enable insight into the students’ experience over time, and will capture their changing perspective. This study design permits both prospective and retrospective reflection on the experience of Honours, and this is important because experience is dynamic, dependent on context and shaped by previous events. The use of a hermeneutic phenomenological methodology will enable illumination of the students’ experience, a deep understanding of the issues which the students identify as being of importance, and the perceived value of Honours from the students’ perspective. It is also important to acknowledge that this group of Allied Health students undertake Honours in tandem with clinical practice. This study will therefore offer a unique insight into the role of Honours in the development of practitioner-researchers in Allied Health. The complex issue of the practice-research nexus has received some attention in the literature, but there is a dearth of information in this field in relation to Allied Health practice. A clearer understanding of Honours decision making by undergraduate Allied Health students, and the relationship with career trajectory, will inform recruitment of Honours students and will provide insight for the academic and professional staff responsible for educating these students.

This research seeks to illuminate the experience of Honours for undergraduate Allied Health students. Of fundamental interest are the factors influencing students’ decisions about Honours, the impact of Honours on the student, the relationship of Honours to professional practice and the influence of Honours on career trajectory.
2.8 Research Questions

‘What is the experience of Honours for undergraduate Allied Health students?’

- What are the motivational influences informing Honours decision making?
- How do Honours students cope with the challenges presented by Honours?
- What is it like to be an Honours student in Allied Health?
- What is the influence of Honours on the students’ academic, social and personal life?
- What is the influence of Honours on personal and professional learning?
- How does Honours align with career aspirations?
- How does Honours enable the development of practitioner-researchers?

Chapter 2 has provided a critical review of the literature in order to provide the reader with a comprehensive background to this study. Starting from a very broad perspective of knowledge and knowing, I gradually focused in on Allied Health knowledge and practice. Discussion of the education of Allied Health professionals in contemporary higher education and the role of undergraduate research, guided my review towards the final sections on Honours. An exploration of the role of Honours in Australia and presentation of Honours related research, enabled me to identify a gap in contemporary knowledge and to articulate my research questions. In Chapter 3, I consider the ontological and epistemological foundations of this study, in order to justify my adoption of a social constructionist approach, and the use of a hermeneutic phenomenological methodology. With careful consideration of relevant ethical issues, I explain the processes of participant recruitment and data collection. The final sections of this chapter explain my approach to data analysis, with a focus on the importance of ensuring trustworthiness, authenticity, credibility and dependability of the data.
Chapter 3: Methodology

3.1 Locating the Study

This study explores the experience of Allied Health Honours students at two universities in Australia. Charles Sturt University (CSU) is a regional university with campuses situated across New South Wales and Ontario. The CSU Allied Health students participating in this study are based at the Albury/Wodonga campus and are studying Bachelor courses in Occupational Therapy, Physiotherapy, Podiatry and Speech Pathology. La Trobe University (LTU) is a metropolitan university with a focus of campuses in Melbourne. The LTU Allied Health students participating in this study are based at the Bundoora campus in North-East Melbourne, and are studying Bachelor courses in Physiotherapy and Podiatry.

These two institutions were selected for several reasons. Both offer a similar profile of Allied Health courses, with students undertaking four-year undergraduate degree programs. The geographic situation of the institutions offers the opportunity to explore the experience of Honours students studying in a regional and a metropolitan location. Convenient access to the students at both institutions was also a major influential factor. Of most relevance is the similarity in the structure of the Honours programs in Allied Health, at both CSU and LTU. Honours is offered as an ‘embedded’ programme, “where specific ‘Honours’ requirements are embedded into and awarded within the same time frame as the Pass degree” (Kiley, Nursoo, et al., 2009, p. 5). This factor is important, as the experience of Honours students undertaking ‘embedded’ Honours could be very different to that of students undertaking Honours as an ‘end-on year’ program, “in which ‘Honours’ is a separate and additional year of study following a Bachelors Degree” (Kiley, Nursoo, et al., 2009, p. 5). All of the CSU Allied Health students and the LTU physiotherapy students study Honours over a period of two years, during their third and fourth year of undergraduate study. Only the LTU podiatry students study Honours over one year, during their fourth year of undergraduate study.
3.2 Framework for Research Design

I will use Crotty's schema to structure this chapter and to frame my epistemological position, theoretical perspective, research methodology and choice of method.

![Diagram of framework]

Adapted from Crotty (1998, p. 5)

I will introduce the research participants prior to discussing the interview process as this allows the reader to identify the Honours students with whom I am working. Following on from this, I explore relevant ethical issues pertaining to this study. The issues of trustworthiness and authenticity are considered in depth, prior to a clarification of my position in this research and a discussion of the process of data analysis.

3.3 Ontological and Epistemological Position

I am interested in Honours in Allied Health, but more specifically I want to understand the experience of being an Honours student in Allied Health. Honours is a complex phenomenon and I am seeking the *emic* perspective; the students’ point of view. My
focus is the students’ interpretation of the situations they experience, over the one to two years of Honours study. Through a clearer understanding of the students’ experience, the purpose of the study is to illuminate the phenomenon of Honours. This clarification will facilitate continuing dialogue about the purpose of Honours in higher education and the relevance of Honours to the development of practitioner-researchers in Allied Health. The purpose of this study is shaped by my epistemological perspective and methodological commitments, and it is important to consider these elements in more detail.

3.3.1 Constructivism and Constructionism

Constructivism and constructionism are epistemological perspectives. Schwandt (1994) suggests that the particular meaning of these terms is shaped by the intent of the user (p. 118). However, it is necessary to explore how these two approaches to understanding lived experience may be relevant to this study.

A constructivist view of knowledge proposes that truth is constructed by individuals and between people in a culture. Schwandt (1994) states that constructivists “are deeply committed to the view that what we take to be objective knowledge and truth is the result of perspective” (p. 125). I can view the experience of Honours students through a constructivist lens, because each of the students will interpret the experience of Honours according to the meaning it has for them. Personal meaning is imbued with prior knowledge and past experience and cannot be generalised. However, all persons who experience a particular phenomenon will share common features of that lived experience (Lopez & Willis, 2004, p. 728). As every individual’s specific experience is unique and their perception of the world valid, a constructivist epistemology implies that each student’s interpretation of the phenomenon of Honours is worthwhile. However, it is important for me to retain a critical view of these personal experiences. Crotty (1998) suggests that ‘constructivism’ should be reserved for the epistemological considerations focusing exclusively on “the meaning-making activity of the individual mind” (p. 58). It is relevant for me to extend my constructivist view to recognise the fundamental influence of culture on our experiences and interpretation of events. “Culture shapes the way we
see things (even the way we feel things) and gives us quite a different view of the world” (Crotty, 1998, p. 58).

Accepting that the intrinsic power of culture frames the experience of each individual, is implicit to a social constructionist epistemology. Social constructionism “more adequately reflects the notion that the world that people create in the process of social exchange is a reality” (Crotty, 1998, p. 58). Communication with each other is fundamental to the construction of, and implicitly to our understanding of, the world in which we live (Gergen, 2009, p. 4). A social constructionist lens is perhaps more appropriate for this study, as the experience of Honours students should not be viewed in isolation. The students’ understanding of Honours is constructed through their experience of events “through prolonged, complex processes of social interaction involving history, language and action” (Schwandt, 1994, p. 118). Importantly, social constructionism “refers to constructing knowledge about reality, not constructing reality itself” (Shadish, 1995, p. 67). Experience from a social constructionist perspective is dynamic, coloured by past events and moulded by relationships within different communities of practice. The emphasis is not on the interpretation of the phenomenon by individuals, but on the collective generation of meaning within a culture or community of practice.

What we take to be the world importantly depends on how we approach it and how we approach it depends on the social relationships of which we are a part. (Gergen, 2009, p. 2)

This approach pertains to the experience of the Honours students and to my understanding of their experience. A multitude of factors will impact not only on the students’ experience of Honours, but also the sense they make of their experience. Their social relationships extend within and outside of the university, and exploration of supervisory relationships, Honours community and support provided by family and friends, facilitates a shared understanding of their experience between the students and myself. My experience of Honours as an Honours supervisor and as an Honours co-ordinator places me in a privileged position, as it provides me with a deeper insight than
would be possible for someone outside of this community of practice. I am acutely aware that my knowledge of Honours is limited by my perspective and my experiences, and as a PhD student I have my own ‘student experience’ bias of which I must always be consciously aware. All of our human understandings are contextually embedded, founded on interpersonal relationships and consequently limited (Patton, 2002, p. 96).

I accept that although each individual interprets their own experience, these experiences are also dependent on culture, social exchange and influencing forces external to the individual. Each Honours student can tell their own story but they are part of a group within a profession, within an institution, which itself is influenced by the broader educational and political environment. Professional practice and institutional culture will be intrinsic to the student’s experience of Honours. I need to be mindful that I am interested not only in the individual, but also in the collective experience of Honours students in Allied Health; a community of practice. These diverse existences determine different ways of knowing and experiencing reality. It is inadequate to merely represent the individual stories as ‘how it is’. Personal experience is “meaningfully constructed within a given community or set of communities” (Crotty, 1998, p. 64). Listening to individual stories is hearing “the voice of our culture – its many voices” (ibid). It is therefore a social constructionist epistemology which informs this study, and this theory of knowledge informs my theoretical perspective (Crotty, 1998, p. 2).

3.4 Theoretical Perspective

Theoretical perspective is a philosophical stance, or “a way of looking at the world and making sense of it” (Crotty, 1998, p. 8). As I am interested in understanding the meaning of Honours for Allied Health students, my perspective is interpretivist.

3.4.1 An Interpretivist Approach

Interpretivism is derived from the Latin ‘interpretari’ meaning ‘to explain or understand’. Understanding is “most central to interpretive research” as the perspectives and categories of the research participants have primacy (Huberman & Miles, 2002, p. 48). An interpretivist approach seeks to analyse objectively, the subjective human
experience (Schwandt, 1994, p. 119). This approach shuns the etic viewpoint which permits the imposition of the researcher’s perspective, to categorise participants’ experience. This apparent tension between objectivity and subjectivity is embraced in interpretative phenomenological analysis. Empathy and questioning is combined in order to understand, “both in the sense of ‘trying to see what it is like for someone’ and in the sense of ‘analysing, illuminating and making sense of something’” (Smith, Flowers, & Larkin, 2009, p. 36). The personal values held by each individual, their actions and the meaning they make of their circumstances, is the basis of interpretive inquiry. Inherent in the theoretical perspective of interpretivism, is the acceptance that any understanding of social action can only be gained when the inquirer grasps the meanings that constitute the action (Denzin & Lincoln, 2003, p. 296). Interpretation requires the interpreter to have an understanding of the environment, in which the social phenomenon under inquiry is situated. This presupposed understanding of the environment is fundamental to interpretivism because “all interpretation, from the everyday to the philosophical, involves such a ‘fore-structure’” (Inwood, 2000, p. 46).

An interpretivist approach provides a context for this study as this perspective “looks for culturally derived and historically situated interpretations of the social life-world” (Crotty, 1998, p. 67). These Honours students experience Honours from within the culture of the different Allied Health professions, their perceptions imbued by the traditions of each discipline. The sense they make of their experience is influenced strongly by professional culture, guided by research supervisors and channelled by the dominant research paradigms within the research community of practice. Experience is a dynamic phenomenon, and exploration of the students’ experience over time accords with a key feature of interpretivist philosophy; the fundamental requirement to study phenomena in their natural environment. This naturalistic inquiry is more appropriate than a study in which variables are accounted for and controlled prior to investigation, and where individual experience is compared to predetermined criteria. This study design permits exploration and elucidation of the students’ experience over the period of time that they are immersed in Honours, thus ensuring that interpretation of these experiences is not limited by temporal and transient contextual factors.
3.5 Methodology

3.5.1 Qualitative Research

Grounded in social constructionism and informed by an interpretivist perspective, this study needs a methodology which enables a deep understanding of the experience of individual Honours students, with clear recognition of the influence of contextual factors. Qualitative research allows us to focus on the subjective experience of individuals within the setting of the social world. The essence of qualitative research is ‘meaning and interpretation’, relating both to the behaviour of individuals and to their personal perspective of this behaviour (Liamputtong, 2010, p. 14). The aim of qualitative research is to interpret phenomena, as experienced and understood by individuals. Qualitative assumptions embrace “multiple constructions and interpretations of reality that are in flux and that change over time” (Merriam, 2002, p. 4). Qualitative inquiry enables individuals to express their feelings and experiences, thus facilitating an understanding of the complexities of that experience, and the complex reasons for their behaviour. The interpretive nature of qualitative research places an emphasis on:

The socially constructed nature of reality, the intimate relationship between the researcher and what is studied and the situational constraints that shape enquiry.
(Denzin & Lincoln, 2003, p. 13)

This relationship between the researcher and participants and the depth of understanding this enables, is intrinsic to qualitative research. The role of the researcher in qualitative research is to set aside opinions and previously held beliefs, and to understand the ‘being’ of another person. This understanding happens when “we allow ourselves to be challenged … by what is different in their lives” (Taylor, 2002, p. 132). Personal experience is a valuable resource for qualitative researchers as “they always think reflectively, historically and biographically” (Denzin & Lincoln, 1994, p. 199). Qualitative research requires a creative “interplay of all aspects of self; our being, knowing, doing and becoming” (Higgs & Titchen, 2007, p. 11). As a podiatrist, an Honours supervisor and an Honours coordinator, I come to this study from inside a specific interpretive community (Denzin & Lincoln, 2008, p. 29). My experience as an
Allied Health professional and an academic, informs my perspective of the personal and the collective experience of Honours for these Allied Health students. This intimate awareness of the contextual factors for these students ensures that my interest in, and understanding of their experience, is grounded in practice.

In contrast to the use of qualitative modes of discovery, quantitative methods warrant consideration. A quantitative approach emphasises “the measurement and analysis of causal relationships between variables, not processes” (Denzin & Lincoln, 2003, p. 13). Quantitative methods measure and quantify phenomena and permit standardised data collection from a large sample group. It would be entirely feasible to address the research questions using a survey instrument to collect quantitative data. This approach could yield data from large numbers of Honours students within Australia, and would be appropriate if I intended to measure and correlate the occurrence of variables, or aspired to establish causal relationships. However, such a quantitative approach would prove inadequate to explore the rich and varied experiences of Honours students. The phenomenon of Honours itself invites illumination, and the issues encapsulated in the research questions are currently poorly understood. An inductive qualitative approach, as opposed to a deductive quantitative method, is therefore most relevant for this study. Nevertheless, the rich data emerging from this study could be used to inform the development of a future survey. Such a tool could be used to elaborate on this study by seeking information from a much larger number of Honours students in Australia, both within Allied Health and from other unrelated disciplines.

3.5.2 Phenomenology

From a phenomenological point of view, to do research is always to question the way we experience the world, to want to know the world in which we live as human beings. (Van Manen, 1990, p. 5)

Phenomenology as a philosophical approach invites an exploration of phenomena that human beings encounter, and fundamental to this philosophy is the acceptance of an inextricable link between human experience and the world (Grace, Higgs, & Ajjawi, 2009, p. 115). Phenomenological research is characterised by beginning in the lifeworld
(Van Manen, 1990, p. 7). “Human being means being-in-the-world” (Crotty, 1998, p. 45) and the meaning of an experience is intrinsic to the being of any individual. Intentionality as the ‘axis of phenomenology’ foregrounds interaction between subject and object, because unless an individual assigns rational meaning to an object or phenomenon, experience cannot be adequately described (Natanson, 1973, p. 103). The three major phenomenological approaches are transcendental phenomenology, existential phenomenology and hermeneutic phenomenology (Grace, et al., 2009, p. 116). Transcendental phenomenology emanating from Edmund Husserl's work, centres on the role of human consciousness in mediating human experience. Existential phenomenology emphasises the dynamic relationship between human beings and their world, as shaped by culture, history and social relations. The major advocates of this philosophical stance are Jean-Paul Sartre, Maurice Merleau-Ponty and Paul Ricoeur. Within the context of historico-social culture, hermeneutic phenomenology focuses on the interaction of individuals with other individuals and objects in the world. This philosophical perspective proposed by Martin Heidegger, Alfred Schutz and Max van Manen, also encompasses the interpretive structure of experience and how these interpretations are expressed in language (Grace, et al., 2009, p. 116).

Phenomenology asks us not to take our received notions for granted but … to call into question our whole culture, our manner of seeing the world and being in the world in the way we have learned it growing up. (Wolff, 1984, p. 192)

Phenomenology is not only a philosophical approach but also a research methodology, seeking to “understand, describe and interpret human behavior and the meaning individuals make of their experiences” (Liamputtong, 2010, p. 125). A phenomenological approach requires close attention to capturing and describing the individual’s experience of the phenomenon; “how they perceive it, describe it, feel about it, judge it, remember it, make sense of it and talk about it with others” (Patton, 2002, p. 104). Phenomenological reflection is always on past experiences, which have already been lived through (Van Manen, 1990, p. 10). Reflection is always recollective. As the aim of phenomenological inquiry is to gain a deep understanding of an individual’s experience and the meaning of this experience, it is highly applicable for researching practice.
(Grace, et al., 2009, p. 115). The object of experience in this study is the Honours year(s) of Allied Health students, and the aim of the research is to elucidate what the students experience and how students experience Honours. A phenomenological methodology seeks to learn and describe how individuals ‘feel, perceive and understand’ (Crotty, 1996, p. 3). The aim is to illuminate the phenomenon of Honours to which the Allied Health students attach meaning. It focuses on the author’s understanding of the subject’s experience. It is not merely a subjective study of the sense that students make of Honours, but rather a clarification of what they are making sense of. Adapting Crotty’s phraseology: what is Honours as a phenomenon that Allied Health students experience before they make any sense of it? (Crotty, 1996, p. 3). An authentic phenomenological approach problematises an individual’s experience as opposed to merely describing it. It critiques and calls into question what is taken for granted, not resting with ‘what is’, but striving towards ‘what might be’. It is important to retain this critical stance to ensure that the researcher does not lose sight of the object of experience (Crotty, 1998, p. 83). In accordance with Patton’s thinking, interpretation is essential to gain an understanding of the experience (Patton, 2002, p. 106).

Set aside the idea that phenomenology involves a departure from mundane reality. The world presented in the natural attitude is neither denied nor abandoned: it is, instead, reconstructed. (Natanson, 1973, p. 42)

A critique of the object of experience and reinterpretation enables generation of new meanings, fuller meaning and reinvigoration of old meanings (Crotty, 1998, p. 82). This is essential to a phenomenological methodology, which must be differentiated from a subjective report of a person’s experience. A point for consideration is the different emphasis of phenomenology and hermeneutics. Phenomenology emphasises the phenomenon and how it is subjectively experienced, whereas hermeneutics emphasises how the phenomenon is interpreted.
3.6 Research Design

3.6.1 Hermeneutic Phenomenology

‘Hermeneutics’ derived from the Greek word meaning ‘to interpret’, is the theory of interpretation. Hermeneutics as expounded by Heidegger is concerned with searching for embedded meanings (Lopez & Willis, 2004, p. 728) and developing an understanding of “the thing as it shows itself, as it is brought to light” (Smith, et al., 2009, p. 24). Heidegger explored the duality of appearance, revealing the visible and also the concealed meanings of phenomena:

Only if beings are unconcealed can we make particular conjectures and decisions. [But] without concealment there would be no objectivity, no decisions, and no history: everything the past, the present, and the future, would be wholly transparent to us, leaving no hidden depths to things, and no scope for choices with uncertain outcomes. (Inwood, 2000, pp. 119-120)

Over time, hermeneutics has developed as a philosophical underpinning for the interpretation of a broad range of texts, and is applied across a diversity of disciplines (Smith, et al., 2009, p. 21). An assumption of hermeneutics is that there must be an affinity between reader and text. This common link is necessary as it provides a firm foundation for the emerging interpretation. Hermeneutics in contemporary practice can be adopted not merely for textual analysis, but more broadly for exploration of human practices, human events and human situations “in an attempt to ‘read’ these in ways that bring understanding” (Crotty, 1998, p. 87).

As a method of philosophical inquiry, hermeneutic phenomenology begins with and from a “pre-understanding of being” to make “explicit and thematised what is at first implicit and unthematised” (Crotty, 1996, p. 82). Interpretation of human practices and human situations is never free from pre-supposition. Preconceptions, assumptions and prior experience, ensure that the interpreter appraises the phenomenon in the light of personal experience (Smith, et al., 2009, p. 25). Gadamer (2006) pursues this thinking further to explore the interdependency of preconceptions and interpretation (p. 305). This dynamic process, whereby interpretation can influence the fore-conceptions, is
continuous. New understandings and interpretations of the phenomenon enable new projections, and these new conceptions are “compared, contrasted and modified as part of the sense-making process” (Smith, et al., 2009, p. 26). In this study, the experience of Honours students will be made manifest through interview and the generation of narrative text. My interpretation and understanding of the experience of these students will be developed by means of a dialogue between my ‘fore-understandings’ and the new text. Gadamer (2006) alerts the researcher to the potential for bias in the interpretation of text, more specifically in this context, the students’ experience (p. 467). However, it is relevant to consider that my assumptions and prior experience are valuable guides, and make the enquiry into the experience of Honours students a meaningful undertaking (Lopez & Willis, 2004, pp. 729-730). Smith et al (2009) embrace a ‘spirit of openness’ in acknowledging that whilst some pre-conceptions can be identified in advance, others will become apparent only during the process of engagement with the phenomenon (p. 27).

3.6.2 Philosophical Hermeneutics

Hermeneutics is a distinct research paradigm concerned not solely with the interpretation of texts, but more broadly the interpretation of ‘human being’. Hermeneutic phenomenology is but one of the many blended inquiry approaches, and philosophical hermeneutics is another of these research traditions. For the purposes of differentiation, hermeneutic phenomenology focuses on the meaning of ‘being’ for an individual and how meaning influences decisions and life choices (Liamputtong, 2010, p. 126). In contrast, philosophical hermeneutics “seeks to understand phenomena within their cultural-historical situations” (Loftus & Trede, 2009, p. 62). Gadamer (1976) is widely credited with the tradition of philosophical hermeneutics, tending to emphasise the importance of history and tradition on the process of interpretation (p. LIV). Hermeneutic interpretation is intrinsic to our cultural self-understanding, because it is only within the context of history and culture that we can “articulate ourselves in relation to others and the world in general” (Rundell, 1995, p. 10). Sharing of meaning amongst people within communities is also a fundamental tenet of the hermeneutic approach. The students’ experience of Honours is culturally bound by the norms and expectations
of their professional group, and by the ethos of the institution in which they study. Whether it is apparent to the students or not, the influence of the Honours community of practice is intrinsic to the individual’s experience of Honours. This formative influence emanates from beyond the immediate community of practice, as the Honours community is but one of many within the larger research community, in an institution itself influenced by historico-political society. Philosophical hermeneutics according to Gadamer, is acquiring a historical understanding. For me to be able to interpret the students’ experience of Honours, I must necessarily have an understanding of that sphere; a broad view of the relative significance of things, a pre-existing ‘horizon’ (Gadamer, 2006, p. 305). Gadamer’s ‘fusion of horizons’ conceptualises the notion that it is necessary not only to bring together the students’ experience and my prior experience, but more essentially, for me to rise above and look beyond what is immediately apparent to us all. Past and present is brought together through the process of interpretation, to achieve a ‘fusion of horizons’ (Crotty, 1998, p. 101).

Horizons are thus often initially distinct. They divide us. But they are not unmovable, they can be changed, extended. (Taylor, 2002, p. 134)

This study was informed by both the traditions of hermeneutic phenomenology and philosophical hermeneutics. Central to these two traditions is a dialogical interaction between me as the interpreter, and the texts generated from the students' interviews. A hermeneutic phenomenological approach enabled a deeper understanding of Honours as experienced by the Allied Health students and a clearer insight into what it means to be an Honours student. Philosophical hermeneutics is a philosophical approach to the interpretation of texts. This approach to textual analysis explores the interrelationships between the interpreter, the text and the context (Trede & Loftus, 2010, p. 185). A deeper understanding of the phenomenon of Honours was made possible through a question and answer dialogue with the text. The emphasis in this philosophical approach is finding common ground, shared meaning and consensus (Loftus & Trede, 2009, p. 62). My interpretations and understanding emerged as I engaged with the texts, but it is important to recognise that these interpretations were filtered through my pre-understanding and the language I chose to use. My aim was to develop an
interpretation of the students’ experience which is “coherent and useful” (Trede & Loftus, 2010, p. 187). As philosophical hermeneutics places greater emphasis on our interactions with each other in the world, it is important to interpret these students’ experiences within the historical and cultural contexts of the institutions and the professional traditions, in which these students are immersed.

3.7 Research Participants

3.7.1 Allied Health Honours Students

The student participants in this study were Allied Health students studying either at Charles Sturt University (CSU) at the Albury-Wodonga campus, or at the Bundoora campus of La Trobe University (LTU). The students were studying occupational therapy, physiotherapy, podiatry or speech pathology, and thus represented four of the Allied Health professions. All of the students had elected to participate in the Honours program of their four-year undergraduate course, which for the majority commenced at the start of their third year. This provided the students with two years to engage in research, to undertake a research study and to write a dissertation for submission. For some of the students in this study the Honours component of their undergraduate course was contained within the fourth year, thus compressing Honours into one year. This accelerated Honours program is a feature of the podiatry course at LTU. The diagram below (figure 3), illustrates the duration of the respective Honours programs, for the student participants.
All of the Honours programs in Allied Health at CSU and LTU are ‘embedded’ Honours programs. Relevant issues for Allied Health students undertaking ‘embedded’ Honours centre on their ability to cope with the demands of Honours research, in addition to the rigorous demands of the standard undergraduate course. These courses require students to not only undertake relevant theory subjects, but also to participate in workplace learning. Workplace learning is often undertaken over a period of weeks or months at a distance to the student’s place of study, and this compounds the demands of Honours study. As CSU has a specific focus on educating professionals for practice in regional, rural and remote areas of Australia, this group of Allied Health Honours students is very likely to undertake workplace learning away from home.

Prior experience of research for these students would normally be a research methods subject in the undergraduate course, which provides a broad based introduction to
research. Undergraduate research methods subjects in Allied Health courses are taught across disciplines to large student cohorts, and are necessarily theoretical rather than practical. Therefore, an undergraduate Allied Health student enrolling in Honours will typically not have been involved in primary research, and may only have a very superficial knowledge of research in general. Honours programs must afford not only an opportunity for primary research, but must also provide the foundations necessary to structure the research experience. In ‘embedded’ Honours programs this must be achieved on a part-time study basis, as Honours study runs in tandem with other subjects in the curriculum. If the Honours program is two years in duration, these students commence Honours at the start of their third year. Not only are the students very inexperienced in terms of research at this stage, but are only mid-way through their undergraduate course and still novice practitioners. Therefore, decisions about Honours study are made on the basis of relatively limited clinical and research experience. The Honours program in podiatry at LTU enrols students at the start of their final year. Having had one extra year of undergraduate experience prior to Honours, it is likely that these students are able to make a more informed decision about Honours research, in terms of their self-efficacy and also their clinical experience. Whichever year Honours commences for an undergraduate Allied Health student, an embedded Honours program necessitates concurrent study of professional subjects and research. These students must achieve the same Honours outcomes of advanced disciplinary knowledge, research training, and the production of a substantial independent research thesis/project, as a student studying an ‘end-on year’ program with one year of full time study focused entirely on research.

3.7.2 Finding Participants

Identifying a suitable group of research participants is fundamental to all research studies, and is particularly pertinent in qualitative research where the sample size is small. As the aim of this study was to explore the students’ experience of Honours, it was essential to recruit student participants who could provide “information rich accounts of their experiences” (Liamputtong, 2010, p. 19). Purposive selection of participants is a non-probability sampling method, as the chance of any single Honours
student being included in the research cannot be known in advance. The group of student participants in this study, although generally representative of Honours students in Allied Health, was not intended to constitute a ‘statistically representative sample’. A purposive sample represents "a perspective rather than a population" (Smith, et al., 2009, p. 49). Purposive sampling might have been employed to recruit a sample group comprising an equal number of students from each of the four Allied Health professions, equally distributed between the two institutions. However, this process of randomisation is not consistent with the qualitative paradigm and this study did not seek to compare Allied Health students from the different professions, nor to contrast differences between Honours at CSU and LTU. Purposive sampling in this instance was used as a means to identify and target a specific group of participants, who were able to provide a deep insight into the phenomenon of Honours. This implies that specific individuals were selected on the basis of the perspective they could offer, however, the targeted recruitment of individuals to a research study may be unrealistic. To access specific Honours students willing to participate in this study, it is more honest to acknowledge the use of a convenience sampling method. Convenience sampling implies that participants who are available to the researcher (and are also willing to participate in the research) are recruited to the study. When students are research participants as in this study, the overarching ethical issue of coercion is paramount. Convenience sampling negates this issue to some degree, as it removes the need to approach individual Honours students to request participation in the study.

The intention of sampling is to generate a fairly homogenous group of participants, to ensure that there is commonality across the group and that individuals within the group are subject to similar experiences. Smith, J.A., et al (2009) suggest that how homogeneity is defined is dependent on the study (p. 50). In this study the factors influencing homogeneity were being an undergraduate Allied Health student and studying ‘embedded’ Honours. Homogeneity does not imply that individuals within the group are the same in all respects, as individuals interact with the social world in unique ways. Diversity within a homogenous group is valued as the source of rich experiences, and it is this depth and breadth of experience which is explored through a
phenomenological approach. Sample size in qualitative research is typically small as the focus is on exploring phenomena in depth. The fundamental question pertaining to sample size is whether the sample of participants is adequate to enable research questions or aims to be thoroughly addressed (Liamputtong, 2010, p. 20). Samples of research participants must also be manageable for the researcher in terms of the study design, data collection methods and associated data analysis techniques.

3.7.3 Recruitment

For this study the potential pool of participants were all of the first year Honours students in occupational therapy, physiotherapy, podiatry and speech pathology at CSU and LTU. With two exceptions, all of the Allied Health students at both institutions commence Honours at the start of their third year of undergraduate study. The two exceptions are speech pathology at LTU, which delays the start of Honours until the middle of the students’ third year, and podiatry at LTU which compresses Honours into the final year of the undergraduate course. Recruitment at CSU was facilitated by open access to the Honours students. The cohort of CSU students were sent an email invitation, with the study information sheet and consent form as attachments. Students interested in participating in the study were requested to respond by email and return a signed copy of the consent form. Students at LTU could only be contacted via a year level coordinator and this person distributed study information sheets and consent forms on my behalf. All students were provided with a copy of the written information sheet (see Appendix B), and consequently five students responded from each of the two sites. All of these ten students were recruited to the study. Consent to participate was gained in writing for each of the students (see Appendix C). The demographic data for each of the student participants is illustrated in Table 3.
Table 3: Demographic data for participants

<table>
<thead>
<tr>
<th>M/F</th>
<th>Age</th>
<th>Allied Health profession</th>
<th>CSU/LTU</th>
<th>Qualification on entry to current course</th>
<th>Home area</th>
</tr>
</thead>
<tbody>
<tr>
<td>F</td>
<td>20</td>
<td>Occ. Therapist</td>
<td>CSU</td>
<td>High school</td>
<td>Rural town</td>
</tr>
<tr>
<td>F</td>
<td>21</td>
<td>Physiotherapist</td>
<td>CSU</td>
<td>High school</td>
<td>Metropolitan</td>
</tr>
<tr>
<td>F</td>
<td>20</td>
<td>Physiotherapist</td>
<td>CSU</td>
<td>High school</td>
<td>Rural town</td>
</tr>
<tr>
<td>F</td>
<td>21</td>
<td>Podiatrist</td>
<td>CSU</td>
<td>High school</td>
<td>Rural town</td>
</tr>
<tr>
<td>F</td>
<td>32</td>
<td>Speech Pathologist</td>
<td>CSU</td>
<td>BSc(Honours)</td>
<td>Rural town</td>
</tr>
<tr>
<td>F</td>
<td>21</td>
<td>Physiotherapist</td>
<td>LTU</td>
<td>High school</td>
<td>Regional town</td>
</tr>
<tr>
<td>F</td>
<td>21</td>
<td>Physiotherapist</td>
<td>LTU</td>
<td>High school</td>
<td>Metropolitan</td>
</tr>
<tr>
<td>F</td>
<td>20</td>
<td>Podiatrist</td>
<td>LTU</td>
<td>High school</td>
<td>Metropolitan</td>
</tr>
<tr>
<td>F</td>
<td>21</td>
<td>Podiatrist</td>
<td>LTU</td>
<td>High school</td>
<td>Metropolitan</td>
</tr>
<tr>
<td>F</td>
<td>22</td>
<td>Podiatrist</td>
<td>LTU</td>
<td>1 year BSc</td>
<td>Metropolitan</td>
</tr>
</tbody>
</table>

Ten students were recruited to the study at the outset and it was notable that all of these students were female. This was representative of the group of Honours students at CSU, where only one of the physiotherapy Honours students was male. At LTU there was a greater proportion of male Honours students, but despite attempts at purposive sampling, none of these male students offered to participate in the study. The students were all aged 20-22 years when they enrolled on Honours, with the exception of one mature aged student studying speech pathology. Interestingly, this student had previously undertaken an ‘end-on year’ Honours program as part of her earlier undergraduate study in a different field. All of the student participants entered the study during the first month of their Honours program, and agreed to participate in three interviews during the course of Honours. Interviews were scheduled to coincide with the early, mid and late stages of the Honours program. A sample size of ten students was considered to be adequate as this would generate 30 interviews in total. This number of interviews would provide plenty of rich data for analysis, and would enable a diversity of views to be offered in relation to the research questions. A group of ten participants
would also allow for the potential loss of one or two of the students, from either of the Honours programs.

3.8 Methods

A research method is only a way of investigating certain kinds of questions. The questions themselves and the way one understands the questions are the important starting points, not the method as such. (Van Manen, 1990, p. 1)

Nevertheless, there is a dialectic between questions and method, because research questions are articulated and refined with a research method in mind. Just as the methodology is informed by interpretivism and social constructionism, so the method used for data collection is informed by the phenomenological research design. Methods such as in-depth interviews and diaries are most appropriate to enable "participants to offer a rich, detailed, first-person account of their experiences" (Smith, et al., 2009, p. 56). In addition to the three in-depth interviews at the early, mid and late stages of Honours, I did consider asking the students to contribute reflective diary entries as another source of data. However, it was evident from the early interviews that the students were finding it very challenging to cope with Honours as well as their other study. I was very grateful for the time that the students had volunteered for the three interviews, and I did not want to risk over-burdening them with more demands on their time. Therefore, the data collection method decided on was three in-depth interviews with each of the student participants. This method was considered appropriate to answer the research question: “What is the experience of Honours for Allied Health students?”

3.8.1 Interviews and Interviewing

“A qualitative research interview is often described as ‘a conversation with a purpose’” (Smith, et al., 2009, p. 57). In-depth interviews provide a secure space for conversation and “facilitate the elicitation of stories, thoughts and feelings about the target phenomenon” (p.56). Interviews however, do not share the dynamics of a normal social conversation. The aim of an interview is to permit the participant time and a safe space
to reflect on their experiences and to tell their story. In order for a participant to feel comfortable with an interviewer, a rapport must be allowed to develop between the two. This rapport is important in order to facilitate the conversation, but it is through the participant’s own words that the phenomenon is revealed. If a participant feels that the interview provides a secure space for conversation, they are more likely to be open to the researcher exploring their ‘hidden perceptions’ (Marvasti, 2004, p. 21). The tendency to take a full part in the conversation must be curbed within an interview, to allow the participant freedom to explore their feelings about, and responses to, any specific question. “Interpretive inquirers watch, listen, ask, record and examine” (Schwandt, p.119). The use of open-ended questions, active listening, monitoring the use of jargon and choice of language, the assumption of the researcher ‘not knowing’ and careful attention to the silences in the conversation, are attributes proposed to maximise the participant’s contribution within an interview (Liamputtong, 2010, p. 48).

One-to-one interviews were well suited to exploring the experience of Honours from the students’ perspective, as the interview provided a protected period of time in which the student could reflect on Honours. Importantly, the students commented on this welcome opportunity to speak reflectively about Honours. Space and time for reflection on being an Honours student is not likely to feature as part of a standard supervisory meeting, where the focus is on progress and forthcoming assessment items. As an Allied Health practitioner with an in-depth knowledge of Honours, I was able to develop a partnership easily with the student participants. I could understand not only their experience of Honours, but also their position as undergraduate Allied Health students and novice practitioners. I cared about these students and their experience, and the significance of caring is very relevant to the development of trust and rapport within an interview situation. “One must care in order to acquire knowledge” (Inwood, 2000, pp. 58-59).

3.8.2 Semi-structured Interviews

The structure of interviews can vary according to the context, the research framework and the desired outcomes. Informal conversational interviews are by definition unstructured and allow for vast flexibility. Semi-structured interviews are those in which
the interviewer uses a pre-prepared schedule of questions but accepts participant spontaneity, and allows for diversion of the discussion to explore themes arising during conversation. The standardised open-ended interview comprises set questions which are adhered to in order, to ensure that participants are all asked the same questions (Patton, 2002, p. 344). For this study it was appropriate to use a semi-structured interview technique. In developing an interview schedule I could ensure that the questions I included would allow the participants to explore the areas I was interested in, in order to answer the research questions. The relative fluidity of this approach to interviewing lies in its acceptance that participants all think differently, and respond to questions in a variety of ways. The schedule acts only as a ‘loose agenda’ from which conversation can develop, in a direction comfortable for the participant. Questions are framed in open forms to permit exploration of relevant issues, and the ordering of questions is determined by the flow of conversation. A schedule also serves to anticipate potential sensitive issues, and this is important to flag with the participant beforehand to allow them to prepare for the interview (Smith, et al., 2009, p. 58).

Careful attention must be paid to the environment in which the interview takes place. A quiet space where interruption from the outside world is excluded is ideal. The participant must feel comfortable in order to be able to relax, and to focus clearly on the conversation without distraction. Interviews with students for this study were conducted at CSU and LTU respectively. The office space at LTU was a neutral space, belonging neither to the student nor to myself. At CSU I used either my office or a staff meeting room for the interviews. This choice of space was pragmatic as the office and meeting room were easily accessible for students, and both places provided a quiet environment for the interview. However, I do need to acknowledge that students may experience a sense of intimidation when they are in staff offices. Reflecting on the conversations I had during these interviews, and the depth in which the students were willing to explore their experiences, I accept that all of these environments were conducive to good communication. Nevertheless, there is no substitute for learning from experience, and I certainly learnt much about the skill of interviewing over the course of this study. Most importantly I learnt that participants need time to think and speak, and that silences need not be filled immediately.
In the process of listening we might distort the meanings of the participants. They not only speak through words but also through silences. (Holloway & Biley, 2011, p. 972)

My commitment as a researcher was to understand the students’ perspective of Honours, and not to seek an “unproblematic or ‘true’ account” (Smith, et al., 2009, p. 57). Fundamental to this clear understanding of the students’ experience, was the staging of the interviews at the early, mid and late stages of Honours. This ensured that I was able to capture the students’ experience as it changed over time.

3.8.3 Development of Interviews Over Time

Although this research is longitudinal in design, it is not longitudinal research.

The term ‘longitudinal’ refers to a particular type of relationship between phenomena: the type which evolves over the course of time and is termed *diachronic*. (Ruspini, 2002, p. 3)

In order for me to explore the students’ experience of Honours in depth, it was of fundamental importance to speak to students at different stages of their Honours journey. Experience is absolutely dependent on context and time, and a snapshot of ‘Honours experience’ at any single point in time would compromise my representation of the students’ perspective. Consequently, three interviews were scheduled to coincide with specific stages of the Honours program: early, mid and late. Specific timing of the interviews was dependent on whether the Honours program was one or two years in duration, but the three interviews were spaced accordingly. The schedule for the early interview was developed around the themes of choosing Honours, anticipating the challenge of Honours, and the students’ feelings about Honours (see Appendix D). This early interview was planned to enable an introduction to me as the researcher, and intended to explore the students’ initial impressions of Honours. At this stage the students’ knowledge of Honours was informed mainly by their tutors, research supervisors and senior Honours students, as their personal experience of Honours was very limited. With hindsight, some of the questions on the schedule were beyond the scope of the students’ early experiences. However, the use of a semi-structured
interview approach ensured that conversations could be fluid, and responsive to the individual student’s perspective.

Transcription and preliminary analysis of these early interviews enabled me to identify emergent themes, and provided me with ideas to explore in subsequent interviews. The interview data and literature were mutually informing, and this process of inductive and deductive reasoning allowed me to develop questions for the mid interviews. In addition to following up on specific themes at the mid interviews, I was also able to use some direct quotes from the students, framed as interview questions. The following is an example of a student quote which translated into an interview question: “Honours is a different way of learning something, a different way of doing something” (Sarah). I translated this quote into the question “How is Honours different to your previous study experiences?”

It is important to recognise that data is dynamic and that the development of the interview questions was an iterative process. This process of development ensured that I was able to capture change in subjectivity over time. At the mid stage of Honours the students had developed a much stronger sense of themselves as undergraduate research students. They had been working on the development of their research question and study design, and had experienced the challenges of coping with ‘embedded’ Honours. Interview questions at this stage explored the students’ feelings about Honours, the impact of Honours on their life, the experience of Honours research work, the students’ sources of support for Honours, and the relationship between Honours and professional practice (see Appendix E). During this time I had also become interested in exploring the use of metaphor to understand experience, and I asked the students to think of a suitable metaphor to illustrate their experience of Honours.

The final interview was scheduled to coincide with the completion of the student’s dissertation, in the hope that students would be able to reflect on their experience of Honours in the relative calm of the post writing-up period and submission. By this stage one of the CSU student participants had withdrawn from the Honours program, and this
left me with nine students in total for the final interview. The table below illustrates the
timing of interviews for each of the students.

Table 4: Interview timing through 2009-2011

<table>
<thead>
<tr>
<th></th>
<th>2009</th>
<th>2010</th>
<th>11</th>
</tr>
</thead>
<tbody>
<tr>
<td>CSU</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cassie</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jess</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emma</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sarah</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maria</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LTU</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lauren</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Holly</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nicola</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rachel</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ellie</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* All names used in this thesis are pseudonyms.

I was interested in the idea of using a vignette to stimulate discussion at this final
interview. I felt that this would help to clarify whether my interpretation of the students’
experiences was valid from the students’ perspective.

3.8.4 Vignette

The final interview with the students was an important opportunity for them to review
their experience of Honours with the benefit of hindsight, and for me to explore their
changing perspectives on the challenges of Honours (see Appendix F). I became
interested in the idea of writing a vignette in an attempt to capture elements of the
students’ experience. I was keen to know whether my interpretation of their experience
was valid from the student’s individual perspective, and I knew that writing a vignette
would also facilitate my understanding of the phenomenon of Honours. Having been
immersed in interviewing, reflecting on interview discussions, transcribing and coding data, and undertaking preliminary analysis of the data, I found that reflection on the students’ stories helped my ideas to crystallise, to form new structures and to take shape. I was conscious that my interpretation of the students’ experience was only one perspective, but my immersion in the phenomenon of Honours enabled a clearer view. The aim of a vignette is to develop a rich, evocative description of a phenomenon, which enables the reader to be transported into the life and mind of the individual. A good vignette stimulates the senses, evoking an almost visceral response to the experience portrayed.

My first draft of the vignette was a bland narrative of the experience of an Allied Health Honours student, and portrayed nothing of the rich density of experience typified by phenomenological writing. The second draft was full of rich language used to evoke feeling, but it felt self-indulgent and I was concerned that it would be inaccessible to the students. I wrote a subsequent iteration using a reflective style of writing, but again this failed to elicit the ‘phenomenological nod’ from my research supervisors. Van Manen (2005) states that “one writes to make contact, to achieve phenomenological intimacy with an object of interest” (p. 245). Van Manen’s text enabled me to see that phenomenological writing must draw the reader into the life of the individual. How does the Allied Health student experience this phenomenon of Honours? Experience must be conceived in the broadest sense: physical, psychological and emotional. A failure to write the environment and context into the vignette, means that the writing is unable to evoke the phenomenon with any clarity. Confident that my final draft of the vignette had envisioned the typical experience of an Allied Health Honours student, and with the approval of my supervisors, I presented students with a copy prior to their final interview. I suggested that the students read through the vignette a few times in advance of the interview. This would enable them to reflect on the writing, and to make some notes about their responses to my interpretation of elements of their Honours experience. The vignette is presented at the beginning of Chapter 6.
3.9 Ethical Issues

Clear consideration of the ethical issues pertaining to this study is appropriate at this juncture, to clarify both my responsibility as the researcher, and my relationship with the student participants. Adherence to sound ethical principles is a priority in any research to ensure that the risk to the participants is minimal, and that their consent to participate in the study is fully informed.

3.9.1 Respect for Participants

The National Statement for Ethical Conduct in Human Research (2007) details the values of respect, research merit and integrity, justice and beneficence, as being fundamental to ethical practice in research (National Health and Medical Research Council, 2007). Respect is central to these values and must inform all interactions between the researcher and the research participants. Respect for participants infers that the researcher must recognise the autonomy of all individuals at any stage of the research process, and must act to protect their privacy and confidentiality. The value of respect also involves providing protection for those with diminished or no autonomy, and acting to empower these individuals. In this study the participants are students some of whom were, or could be perceived to be, in a dependent relationship with me as the researcher. This dependency requires very careful consideration to ensure that ethical standards are not compromised.

3.9.2 Working with Students and the Potential for Coercion

In this study, five of the Allied Health students and I were all members of Charles Sturt University. I had supervisory responsibility for one of the podiatry student participants for the duration of the data collection period. During 2009 I also held the responsibility of Honours Coordinator for the School of Community Health. This close working relationship with the inherent responsibility for student welfare, in addition to the experience gained as an Honours supervisor over the years, ensured that I had an intimate knowledge of Honours in Allied Health. However, this responsibility and leadership role carried with it the risk of placing students in a position of diminished
autonomy. This power balance must be acknowledged to address the potential for coercion of the student participants. Coercion may be defined as ‘the act of compelling by force of authority’. In this study, Honours students may have felt compelled to agree to participate, purely because I was in a position of authority. To ensure that the potential for coercion was minimised and the risk of dependency diminished, I had no responsibility for any of the Honours assessment tasks. Students were invited to participate in the study by means of a printed information sheet, distributed during a tutorial session to all students present. Additionally, the use of convenience sampling rather than purposive sampling, placed the responsibility for involvement with the individual student and facilitated autonomous decision making. Students were also reassured that a decision not to participate in the study, would not carry any negative consequences for their Honours study or their progression.

3.9.3 Beneficence

The value of beneficence implies that the likely benefit of the research must justify any risks of harm or discomfort to the participants. Careful consideration was given to the design of this study to minimise the impact for each individual student. Whilst it was desirable to capture the students' experience as they progressed through Honours, I was mindful of the pre-existing responsibilities and burdens faced by Allied Health students. These students are not only expected to manage the academic demands of the various undergraduate courses, but also to cope with the complex demands of internal and external workplace learning. Consequently, the decision to request three interviews with each student participant at the early, mid and late stages of the Honours program, was considered to be acceptable in terms of data collection time and student burden. The acknowledgement of student burden in terms of data collection is important, as these student participants did not benefit directly from the study outcomes.

3.9.4 Risk and Risk Management

Whilst no physical risk exists for students participating in this study there is always the potential for psychological harm, perhaps with the disclosure of sensitive information. The risk of social harm is also evident, as students may discuss peer and supervisory
relationships within the secure space of an interview. It is incumbent on the researcher to identify these potential risks in advance, in order to be able to minimise the impact of the risk should it arise. Reassuring students of the confidential nature of interview conversations, and maintaining this confidentiality, is an imperative. Balancing the duty of care for students with the need to respect confidentiality is complex, particularly in cases where my colleagues had responsibility for Honours student supervision. Less serious than risk is inconvenience, but this is still an issue to consider for student participants. The inconvenience of attending an interview at three points during the Honours program was pointed out to students in advance of their agreement to participate in the study. These elements of risk assessment and risk management are integral to the concept of informed consent.

3.10 Trustworthiness and Authenticity

The use of a qualitative methodology for this study enabled me to explore the experience of Allied Health students, and to become immersed in their perceptions of Honours. The lens of hermeneutic phenomenology focused on my interpretation of the students’ experience, and “it is from our relationships with interpretive communities that our constructions of the world derive” (Denzin & Lincoln, 2003, p. 577). There is no objective truth about the phenomenon of Honours, only my perspective on the students’ experience. My perspective is one of many that are possible, but it is an insider view in as much as it is deeply grounded in the students’ experience. This enhances the validity of my perspective, in comparison to that of someone outside of the field of Honours and Allied Health. Therefore, close attention to the validity of my interpretation of the students’ experience, and the reliability of my account, was imperative. It is also important to consider the language used to distinguish quality in qualitative research, as this varies between research paradigms. Lincoln and Guba (1986) propose the terms “credibility as an analogue to internal validity, dependability as an analogue to reliability and transferability as an analogue to external validity” (Lincoln & Guba, 1986, p. 74). In keeping with my social constructionist perspective I have adopted these terms as subheadings for this section. Intrinsic to the trustworthiness of any study is the ethical
conduct of the research, and relevant ethical issues have been explored in the previous section.

3.10.1 Credibility

The credibility of any research is absolutely dependent on the meaning of a “holistic, multidimensional and ever-changing” reality (Merriam, 1998, pp. 201-202). So the question “how congruent are one’s findings with reality?” is problematic (p.201-202). Credibility in qualitative research is more accurately conceived as concordance between the participant’s voice and the representation of individual and collective perspectives by the researcher (Padgett, 2008, p. 93). How can I ensure that my interpretation of the students’ construction of reality and their understanding of Honours is valid? My role as researcher permitted in depth discussion with the students during the three interviews, and this personal involvement in data collection and analysis facilitates a closeness to reality, which is intrinsic to qualitative research. This intimate perspective on reality is a strength of qualitative research and enhances the credibility of the findings (Merriam, 1998, p. 203). Merriam (1998) proposes six basic strategies to enhance credibility: triangulation, member checks, long-term observation, peer examination, participatory or collaborative modes of research, and researcher biases (pp. 204-205).

Triangulation is traditionally viewed as the use of multiple investigators, and/or multiple sources of data, and/or multiple data collection methods to confirm emerging findings (Merriam, 2002, p. 31). If social constructionist criteria are applied to the concept, triangulation can also be considered as the process of “capturing and respecting multiple perspectives” (Patton, 2002, p. 544). In this study the use of three interviews with each of the student participants at the early, mid and late stages of Honours, ensured that I was able to capture very different perspectives of the student’s experience at different times. The use of the vignette prior to the students’ final interviews provided an additional method to confirm emergent findings. The vignette facilitated the individual student’s reflection on their experience, and enabled me to confirm the validity of my interpretation of the students’ experience of Honours.
Member checking is the process by which data and preliminary interpretations are made available to the research participants. Typically this involves participants confirming that an interview transcript is a correct record of what they intended to convey during interview, and also to consider whether the interpretation of their discussion is valid from their perspective. This process is congruent with a hermeneutic philosophy as reality is constructed “on the basis of their [the researcher’s] interpretations of data, with the help of participants who provided data in the study” (Patton, 2002, p. 115). In this study member checks were used overtly, but were also integrated into the sequential interview process. The use of themes and direct quotes arising from the early and mid interviews, helped to inform the development of questions for the mid and final interviews respectively. This process ensured that the focus of the interviews was grounded in the students’ experiences, and enabled the individual students to determine their perspective on any specific issue. Additionally, the students were given a copy of the vignette prior to the final interview, in order to facilitate reflection on their experiences. The vignette, as a synthesis of my interpretations of the early and mid interviews, allowed me to present emergent findings to the students. This proved to be an excellent method to enable member checking as students were able to directly confirm, or oppose, the validity of my interpretations of their Honours experience. Explicit use of member checks was also incorporated into the study to provide students with the opportunity to check one of their interview transcripts, and to comment on my preliminary interpretation of the issues discussed.

The credibility of a study can also be enhanced with ‘long-term observation’ or ‘adequate engagement in data collection’, ensuring that the data become ‘saturated’ (Merriam, 2002, p. 31). Interviewing students at three stages during Honours enabled me to capture different perspectives, as experience is dynamic and framed by temporal factors. Recurrent themes emerged for the students at the different stages of their Honours journey, but the relevance and impact of these different issues varied across time. Analysis of data from these interviews is an iterative process, beginning at the time of interview and developing throughout the stages of listening to audio recordings, transcription, coding of data, and evaluation of the written transcript. Although these
processes occur in a chronological sequence, analysis is not a linear function but a complex hermeneutic spiral, repeatedly focusing in on the fine detail of the students’ stories and panning out to the big picture of the phenomenon of Honours (Patton, Higgs, & Smith, 2009, p. 186). The long time period of 9-18 months, the three sequential interviews, and the ability to revisit and further explore themes during interview, ensured that saturation of the data was achieved.

The use of peer examination or ‘critical friends’ can enrich a qualitative study, and is of particular relevance when interpretation of the participants’ views is fundamental to the research. By sharing emergent findings with colleagues at forums such as the Quality in Postgraduate Research (QPR) conference, Education for Practice Institute (EFPI) seminars, and the Faculty of Education Research and Doctoral forum, I received constructive feedback on my preliminary data analysis. Presentation of the vignette at the doctoral forum enabled peer review, and the critical evaluation provided different perspectives on my data analysis. A more in-depth scrutiny of the emergent findings and my interpretation of these themes, was made possible through discussion with a small group of colleagues in the School of Community Health.

Intrinsic to the credibility of this study is my position as the researcher and my capacity for reflexivity.

Reflexivity is the process of reflecting critically on the self as researcher. It is a conscious experiencing of the self as both inquirer and respondent, as teacher and learner, as the one coming to know the self within the processes of research itself. (Denzin & Lincoln, 2003, p. 283)

At the very beginning of this study I was an Allied Health practitioner with little research experience, working in a field with enduring positivist traditions. Reflexivity forces an awareness of self or selves: a research-based self, a brought self and a situationally created self (Denzin & Lincoln, 2003, p. 283). As a researcher I am a doctoral student learning about qualitative research, researching Honours students learning about research. I am also a mature aged student undertaking a PhD, with all the complexity and competing demands of full time employment and family life. My professional self is
an Allied Health professional with many years of practice experience, working in the School of Community Health in CSU as an educator, with responsibility for the development of future Allied Health professionals. Through reflexivity I am better able to understand how my experiences and background influence my interpretation of the Honours students' experiences. Focusing on my experience of research, and my learning through research, enables me to more easily identify with the experience of the Honours students (Pietersen, 2002, p. 3). Through the experience of undertaking this study I am increasingly aware that I am in the process of becoming a researcher, and my ideas about the validity of knowledge have been challenged. An intriguing analogy is the parallel 'becoming' of the Honours students as novice researchers.

I have consciously striven to ensure that I do not superimpose my experiences as a developing researcher onto the experiences of the Honours students. In order to be authentic I must have a conscious awareness of my own perspective, in order to fairly and accurately represent the perspective of others (Patton, 2002, p. 546).

3.10.2 Dependability

Dependability is the analogous term proposed for reliability, but the inference of the two terms is not the same. The reliability of a study indicates the extent to which the research findings could be replicated, if the study were to be repeated. However, this concept is problematic for research which explores human experience, as the experience of any individual is dynamic, contextual and no more reliable than the experience of any other. Data generated from qualitative research may be interpreted in different ways by different people, so the important question to ask is “are the results consistent with the data collected?” (Merriam, 2002, p. 27). Lincoln and Guba (1985) suggest that if the research outcomes make sense in terms of the data collected, then the results of a study are dependable (p. 288). Merriam (2002) proposes four strategies which may be employed in qualitative research, to enhance the dependability of the research outcomes: triangulation, peer examination, investigator's position, and the audit trail (p. 27). I have considered three of these strategies in the preceding discussion about credibility, but use of the audit trail requires elaboration.
An auditing process must be visible in qualitative research to ensure that “the process of research is logical, traceable and clearly documented” (Tobin & Begley, 2004, p. 392). An audit trail comprises a detailed sequence of events and portrays clearly the processes by which data were collected, emergent themes determined, and decisions made throughout the study (Merriam, 2002, p. 27). Notes made in my research journal capture my ideas at different points in time and record my changing perspectives on this study through reflection on readings, interview recordings and transcripts, and thoughts precipitated by data analysis. In this thesis, journal writings are translated into an accurate and visible record of research methods, data analysis and decision making, thus ensuring clarity and transparency of process for the reader.

### 3.10.3 Transferability

Transferability, external validity or applicability, all pertain to the issue of how appropriately the research findings may be applied to other individuals or other groups, in different contextual spaces (Bryman, 2008, p. 34). These terms are preferable to the concept of generalisability as this study explores the phenomenon of Honours in depth, from the perspective of a small number of participants. It would therefore be inappropriate to suggest that the research findings could be generalised to other contexts, but rather the findings may “inform and facilitate insights” within other higher education institutions and Allied Health professional forums (Carpenter & Suto, 2008, pp. 149-150). In order to facilitate these insights, the research report must provide adequate detail for the reader to evaluate and compare the ‘fit’ of the data to different situations (Merriam, 1998, p. 211). Merriam (2002) proposes two strategies to maximise the transferability of research outcomes: providing rich, thick description and maximising variation (p. 29).

Rich, thick description implies “detailed and concrete descriptions of people and places”, presented in such a way that the phenomenon becomes readily accessible to the reader (Patton, 2002, p. 438). Rich descriptions are valued in qualitative research as they portray the complexity of the social world (Denzin & Lincoln, 2003, p. 16). Writing should be evocative to draw the reader into the experience of the participants, to clearly
understand their perceptions of the phenomenon, and to enable the reader’s own interpretations about meanings and significance (Patton, 2002, p. 438). The use of thick description contextualises the phenomenon in the participants’ worlds (Huberman & Miles, 2002, p. 360). Rich, expressive text is vital to enable the reader to identify similarities and differences between their own situation, and the people and places portrayed in the text (Huberman & Miles, 2002, p. 180). Thick description is incorporated into this thesis through the inclusion of a vignette, and the use of student quotes within the text to illustrate their experiences of Honours.

Maximising variation as a strategy to enhance the transferability of research findings, seeks to incorporate variation or diversity into the sample of research participants. This diversity implies that the research findings will be applicable to a greater range of contexts, or relevant to a broader group of readers (Merriam, 2002, p. 29). The inclusion of Allied Health student participants from both CSU and LTU in this study, increases the likelihood that the research outcomes are applicable to both regional and metropolitan universities. Relevance to the Allied Health professions of occupational therapy, physiotherapy, podiatry and speech pathology is also enhanced, with the inclusion of Honours student participants from these four professional groups.

Careful attention to the credibility of the study design, the dependability of the researcher and the research data, and the transferability of the research outcomes, is paramount in ensuring validity of this study. Integrating the range of strategies explored in the preceding discussion will also warrant that the research is confirmable or objective. A close awareness of “the degree to which findings are determined by the respondents and conditions of the inquiry and not by the biases, motivations, interests or perspectives of the inquirer” (Lincoln & Guba, 1985, p. 290) is essential to establish a confirmable account of the research.
3.11 Data Collection and Data Analysis

3.11.1 Acknowledging Personal Viewpoints and Assumptions

It is important to recognise that as much as I shape, and am shaped by, my work as a university lecturer and Allied Health professional, so am I influenced by my research. I acknowledge that my interpretation of the research findings is informed not only by my personal perspective on Honours in Allied Health, but also by my understanding of qualitative research and hermeneutic phenomenology. “Perception and description of reality are dependent upon perspectives (of subjects and researchers) as well as upon which facets are momentarily focal while others remain implied” (Huberman & Miles, 2002, p. 277). Researchers interpret their findings in the light of personal experience and context, and present them with an awareness of how the research outcomes might inform practice (Huberman & Miles, 2002, p. 278). As the researcher I am in the privileged position of being responsible for analysis of the data, and my interpretation of the students’ perspective must be credible and dependable. ‘Epoche’ is a primary phenomenological procedure which the researcher engages in, to make explicit pre-existing assumptions and attitudes towards the phenomenon of interest. By engaging in this process, I can explore the phenomenon from a fresh perspective “without prejudgement or imposing meaning too soon” (Patton, 2002, p. 485). Without having analysed all of the interview texts I am not yet aware of preconceptions I may hold, in advance of reading (Smith, et al., 2009, p. 35). With this in mind it is appropriate for me to articulate my position, highlight my perspective, reveal my bias and remember that this approach is cyclical.

My interests in this study have developed over time and have been shaped by my experience as a researcher working with the student participants. An initial motivation for this study was the relatively small number of Allied Health students who chose to enrol in Honours at CSU. This factor stimulated my reflection on research in Allied Health and the development of Allied Health practitioner-researchers. A clearer understanding of the relevance of Honours to Allied Health students is essential, to inform the debate about the retention of Honours in undergraduate Allied Health courses, and the potential loss of Honours in graduate entry Masters programmes. I am
becoming increasingly interested in the nexus between clinical practice and research, and the factors which motivate an Allied Health practitioner to undertake research. In the broader faculty and university context, an Honours research experience is viewed as a precursor to doctoral research, and this is a major driver for encouraging undergraduate students to enrol in Honours. I have always held the view that this motivation is not particularly applicable to Allied Health students, for whom experience in clinical practice is paramount. This perspective leads me to adopt a defensive stance when ‘embedded’ Honours courses in Allied Health are referred to as ‘meritorious’, that is to say creditable in their own right, but inadequate as research training for doctoral study. By inference this view also suggests that Allied Health Honours research is less rigorous or valid than undergraduate research in other fields. It is also important to acknowledge that I wanted to extend my understanding of qualitative research methodologies through this research experience, in order to be better positioned to challenge the dominance of positivism in my professional domain of podiatry.

Qualitative research is a reflexive journey and brings about a transformation of the researcher (Higgs & Titchen, 2007, p. 13). As I am learning to ‘be’ and am becoming a doctoral researcher, I have an increased sensitivity to the Honours students’ experience of ‘being and becoming’ undergraduate researchers. This gives me valuable insider knowledge as I can share the language of the Honours students, and add data from my own experiences. I can empathise with the Honours students but nevertheless I will only ever be able to “grasp the sense rather than give a literal translation” (Holloway & Biley, 2011, p. 973), of a student’s experience. This insider-outsider perspective is important to acknowledge in qualitative research. It enables me to view Honours through the students’ eyes and to theorise about this phenomenon from a different perspective. However, my position of power as the researcher can also be dangerous in terms of my potential to manipulate the data.

Just by choosing some of the participants’ words for our research and leaving out others, by describing some behaviours and not including other actions, we have already taken control and shown our power. We choose from the narratives, interviews, or observations that which confirms our own ideas. (Holloway & Biley, 2011, p. 972)
The following sections explain the process of data collection and data analysis, and this detailed sequence of events forms part of the audit trail to ensure that the outcomes of this study are dependable.

3.11.2 Data Collection

All of the data for this study was collected via three semi-structured interviews held with each of the student participants. Interview conversations were recorded with the students’ permission, using two Sony digital voice recorders. No written notes were made during the interview, so there was no source of distraction for me or the student. Immediately following the interview I did make written notes in my research journal, and sketched diagrams or models. These notes allowed me to highlight specific issues raised during the interview, and also enabled me to reflect on emergent themes and relationships whilst the interview discussion was fresh in my memory. Each of the interviews was saved as an electronic file on my computer and identified with the student’s name and date of interview, ready for uploading directly into N-Vivo. Before I describe the specific process I followed for data analysis, I will discuss a framework for data analysis which has resonance with a phenomenological research design.

3.11.3 Framework for Data Analysis

In a two-dimensional printed report of a study, the consideration of data analysis flows logically from the discussion of method. However, this linear representation cannot depict the iterative process of data analysis in this phenomenological study. Data analysis is not an end point considered when all transcripts have been reviewed, but is conceived as a thread woven through the three interviews. Ideas about the meaning of the data emerge while researchers are in the field and are recorded as field notes (Patton, 2002, p. 436). My analysis of the experience of the Honours students began during the first interview, and has permeated my thinking and informed my research since that time. The research design comprising three interviews staged at the early, mid and late stages of Honours, facilitated the development of themes for exploration based on analysis of preceding interviews. Evaluation of themes emerging from the early and mid interviews enabled me to write the vignette, which facilitated the students’
reflection in preparation for their final interview. Smith (2007) proposed the following strategies for the “iterative and inductive” process of data analysis and I have modified them to suit my study:

- The close, line-by-line analysis of the experiential claims, concerns and understandings of each of the Honours student participants.
- The identification of emergent themes, emphasising both convergence and divergence, commonality and nuance, for individual participants and across the group of participants.
- The development of a ‘dialogue’ between me as researcher, the coded data and my pre-existing knowledge, about what the experience of Honours might mean for these students, leading to a more interpretive account.
- The development of a structure or frame which illustrates the relationships between themes.
- The organisation of this material in a format which allows for analysed data to be traced from initial comments on the transcript, through initial clustering and thematic development, into the final structure of themes.
- The use of research supervisors and critical friends to help test and develop the coherence and plausibility of the interpretation.
- The development of a full narrative evidenced by a detailed commentary on data extracts, which takes the reader through this interpretation, theme by theme.
- Reflection on my perceptions, conceptions and processes.

(Smith, et al., 2009, pp. 79-80)

3.11.4 The Hermeneutic Circle

The previous framework provides a guide to exploring, and structure for interpreting, the extensive and complex experience of the student participants. The process of gaining an understanding of these different perspectives of the Honours experience involves a hermeneutic circle (Crotty, 1998, p. 95). The hermeneutic circle as depicted by Heidegger is ‘a circle of understanding’ (p.98).
Using Heidegger’s hermeneutic circle to explore the phenomenon of Honours requires an understanding of the interrelationship between:

‘Dasein’
“the phenomenology of human being”, in this context an Allied Health Honours student.

‘Forestructure’
“the pre-understanding of Being that we all possess”.

‘Existentials’
the experience of being an Allied Health Honours student.

‘BEING’
“granted to us in an experience”, that is the focus lies with the experience of the phenomenon, rather than the outcome.

(Crotty, 1998, pp. 97-100).

This process of interpretation is conceptualised by Kvale (1987) as a ‘hermeneutic spiral’, through which the meaning of an individual part of a text is determined by the meaning of the text as a whole (p. 62). The ‘hermeneutic helix’ has also been proposed, to more accurately envisage the dynamic process of interpretation and understanding, as the researcher oscillates between a close and distant view of the data (Odman, 2007, p. 119). This process is potentially infinite, but is generally finalised when a rational understanding has been achieved. Smith J.A., et al (2009) explore the ‘double
hermeneutic’ which illustrates the “dual role of the researcher as both like and unlike the participant” (p. 35). The participant is experiencing the phenomenon and making sense of their experience, whilst the researcher is interpreting the sense-making of the participant. In keeping with the principles of hermeneutic phenomenology, my analysis of the data attempts to understand the experience of the Allied Health students, in order to illuminate the phenomenon of Honours.

3.11.5 Data Analysis

In order to develop a phenomenological account using the data from interviews with the Allied Health students, it was necessary for me to identify, describe and understand: “the key ‘objects of concern’ in the participant’s [student’s] world, and the ‘experiential claims’ made by the participant [student]” (Smith, et al., 2009, p. 46). An interpretation is to construct a reading of the meanings, but also I construct meaning from the stories I interpret (Schwandt, 1994, p. 118). The following sections consider the stages of data analysis, consistent with a hermeneutic phenomenological approach.

I commenced data entry and data analysis during the period that I was conducting the early interviews in 2009, and continued this work over the following two years. The process I used for transcription and preliminary data analysis was repeated for each of the interviews, and followed this protocol:

1. Listen to the audio recording and transcribe directly into N-Vivo.
2. Transcribe five minutes of conversation which equates to approximately one hour of typing.
3. Review the typed transcript and identify specific issues within the text.
4. Code sections of text according to the issues discussed by the student and save each coded section as a ‘free node’.
5. Transcribe another five minutes of conversation and repeat the coding procedure.
6. Take care not to generate too many free nodes.

The 29 transcripts representing the early, mid and later interviews formed the texts for analysis. As an initial approach, empathetic reading of the texts facilitated my
understanding of the student’s perspective. An interactive approach to these texts suggests a dialogue between me as the reader and the student as the author. Interactive reading can become critical and thus encourages growth of ideas about the text and the student author’s intentions. Transactional reading produces something new as the insights that emerge have “come into being in and out of our engagement with it [the text]” (Crotty, 1998, p. 110). These as yet unrealised insights are generated through the process of reading, as they are not articulated by the author within the text. These modes of reading in hermeneutics recognise human situations and interactions as text.

As I progressed from transcribing one interview to the next, new issues emerged and I made decisions about whether an issue was covered by a pre-existing ‘free node’, or whether it deserved a new ‘free node’ in its own right. Preliminary analysis and coding of the early interviews generated 54 ‘free nodes’. I have used the term ‘item’ in place of ‘free nodes’, as this makes more sense when discussing issues which the students raised during interview. The raw data relating to the early interviews is located in Appendix G. I used the same protocol to transcribe, analyse and code the mid and final interviews. The mid interviews generated seven new items in addition to the 54 items from the early interviews, making a total of 61 items (see Appendix H). The final interviews generated only 30 items, all of which were pre-existing items from the early and mid interviews (see Appendix I).

Some of the items are very strongly associated with a particular stage of Honours; for example ‘motivation’ and ‘seeking a challenge’ were relevant almost exclusively to the early interviews. However, many of the items permeated the students’ experience throughout Honours, for example ‘managing workload’ and ‘relationship of Honours to clinical practice’, were issues discussed during the early, mid and late stage interviews.

Transcription, text analysis, reflection and coding are all elements of the data analysis process. Although these are listed as separate stages of analysis, the process of data analysis is iterative. It was not possible to do any one of these things in isolation as I was so immersed in the data. “It is not by looking at things, but by dwelling in them, that we understand their meaning” (Polanyi, 1966/1983, p. 18). However, it is very important
to be able to try to view the data with some objectivity too. In order to try and make sense of the 61 items, I began to experiment in forming clusters of related issues. In addition to working with computer generated tables of items, I resorted to cutting up pieces of paper and hand-sorting them into different piles.

Successful analyses require the systematic application of ideas, and methodological rigour; but they also require imagination, playfulness, and a combination of reflective, critical and conceptual thinking. (Smith, et al., 2009, p. 40)

Possibly because this was a creative activity in itself, this method was the most successful in enabling me to visualise the major themes which were emerging from the data. “The researcher follows a path of discovery with a constructionist paradigm” (Denzin & Lincoln, 1994, p. 200). Transcription of each interview ensured that I was thoroughly immersed in the data. With each new interview I transcribed and analysed my understanding of the students’ experience, and my insights into the phenomenon of Honours gradually deepened. An important aspect of hermeneutic inquiry is the dialogue between the interpreter and the text, which is a challenging and confronting process (Loftus & Trede, 2009, p.65). Through close reading of the interview texts and immersion in the students' reflections, I was able to question what the students were experiencing. The idea of questioning a text and allowing the text to question the reader is central to the hermeneutic tradition. As I began to articulate my ideas, I found that the process of writing deepened my understanding. Roughly sketched diagrams and models also facilitated my thinking, and helped me to develop clear themes from the multitude of issues arising from the students' interviews.

Once I was happy with these themes I returned to N-Vivo and clustered the sets of ‘free nodes’ as ‘tree nodes’. Each ‘tree node’ represented one of the major themes. It was interesting to see that when I went on to code the remaining final interviews, it was often the case that the items I coded for were all clustered as one major theme. For example the theme of ‘communities of practice’ comprised these items: ‘Honours peers’, ‘research community of practice’, ‘research supervisors’ and ‘academic staff’. This helped to confirm the sense of coherence I had about these nine major themes. The
following table illustrates the emergent themes and the items which sit most comfortably with each theme.

**Table 5: Emergent themes and items from interviews**

<table>
<thead>
<tr>
<th>Themes</th>
<th>Items coded from interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>Challenging self</td>
<td>Motivation, Honours decision making, Seeking a challenge, A fresh start, Wanting something different, Academic ability, Perception of honours, Not with the pack, Challenges, Personal attributes</td>
</tr>
<tr>
<td>A different way of learning</td>
<td>Feelings about honours, Different way of learning, Choices, Structured experience, Imposing a structure, Self-discipline, Benefits for other areas of academic work, Meaning of honours</td>
</tr>
<tr>
<td>Coping</td>
<td>Sense of direction, Stress, Coping, Personal support, Role models, Positive influences, Negative influences, Managing workload, Finding a balance, Impact on life</td>
</tr>
<tr>
<td>Communities of practice</td>
<td>Honours group, Honours peer support, Research supervisors, Relationships with academic staff, Research community of practice, Support for research</td>
</tr>
<tr>
<td>Self-actualisation</td>
<td>Self-belief, Self-development, Learning through honours, Impact on self, Value of honours</td>
</tr>
<tr>
<td>Developing the practitioner-</td>
<td>Finding your place</td>
</tr>
</tbody>
</table>
However, these nine major themes comprise 61 individual items, and I needed to rationalise the number of items. In order to do this I returned to the coded transcripts and identified the items which I had coded for the majority of the students. These tables of ranked items are included in appendices 7, 8 and 9. The result was a more manageable list of items which represented the issues of greatest relevance to the largest number of Honours students. The nine themes and twenty eight items form the subheadings in Chapters 4, 5 and 6.

Table 6: Relationships between themes and interview items

<table>
<thead>
<tr>
<th>Chapter 4</th>
<th>Themes</th>
<th>Interview items</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Challenging self</td>
<td>Honours decision making</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Motivation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Challenges</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Perception of Honours students</td>
</tr>
<tr>
<td></td>
<td>A different way of being</td>
<td>A different way of working and learning</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Feelings about Honours</td>
</tr>
<tr>
<td></td>
<td>Coping</td>
<td>Managing workload</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Coping strategies</td>
</tr>
<tr>
<td>Chapter 5</td>
<td>Support networks</td>
<td>Impact of Honours on life</td>
</tr>
<tr>
<td>-----------</td>
<td>------------------</td>
<td>--------------------------</td>
</tr>
<tr>
<td>Communities of practice</td>
<td>Honours peer support</td>
<td>Research supervisors</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Research community of practice</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Relationships with academic staff</td>
</tr>
<tr>
<td>Self-actualisation</td>
<td>Self-belief</td>
<td>Honours as an enabling experience</td>
</tr>
<tr>
<td>Becoming a practitioner-researcher</td>
<td>Contributing to professional knowledge</td>
<td>Research skills</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Writing for research</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Extending personal knowledge</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Chapter 6</th>
<th>New perspectives</th>
<th>Talking about Honours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>New perspectives</td>
<td>Meaning of Honours</td>
</tr>
<tr>
<td>Research-practice nexus</td>
<td>Relationship of Honours to clinical practice</td>
<td>Research vs. clinical practice</td>
</tr>
<tr>
<td>Career decision making</td>
<td>Career decision making</td>
<td>Foundation for research</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Opportunities with Honours</td>
</tr>
</tbody>
</table>

This ordering of the nine themes is logical for me as the themes map reasonably well onto the three interview stages, and Figure 4 illustrates this relationship. However, it is important to remember that this is a pragmatic representation of the nine themes, and as such does not articulate the interrelationships between these themes, or attempt to envisage the complexity of the students’ experience.
Chapter 3 has provided a detailed review of the research design for this study, from the ontological and epistemological foundations, through to data collection and analysis. All elements of this methodology were informed by a social constructionist perspective, and guided by the principles of hermeneutic phenomenology. Semi-structured interviews enabled me to collect rich data from the Honours students, and some of this data informed my writing of the vignette. It is important that the process I used for identifying items from the interview discussions, clustering these items and deciding on nine major themes, is transparent to the reader. Ensuring trustworthiness and authenticity of the data is fundamental to the credibility, dependability and transferability of the study findings. Chapter 4 presents three of the nine major themes: ‘challenging self’, ‘a different way of being’ and ‘coping’. These three sections provide the framework to discuss the issues of greatest significance to the Honours students, during the early stage of Honours. The discussion is illustrated with student quotes to provide the ‘thick description’ characteristic of phenomenological writing, and grounded in the literature to enable insight into the relevance of these findings to practice.
Chapter 4: Finding the Pieces

My interest in the use of metaphor as a way of illustrating experience, led me to ask the students for a metaphor for Honours during the mid-interview. One of the students suggested the metaphor of ‘making a papier-mâché vase’:

I would probably simulate it with doing papier-mâché or something, where you need to put all the layers on and get the structure right, so you can finish the whole. (Lauren)

At first she wasn’t quite sure what she was making:

But you know you need to get the structure right, you need to collect all the little bits and things and you need to understand what you’re doing, so you can do it properly and put it together. (Lauren)

I really like this metaphor as it captures the stages of the Honours experience so well. From the initial collecting together of the mass of pieces required for the task, through the structuring of the object and the building of the layers, to the production of something identifiable at the end. The imagery of building up the layers of papier-mâché invites the comparison of building up layers of experience over time, as the students progress through Honours. Ann Grady (1994) captures the experience of Alzheimer’s as a “layered world; a world of time - past, present and future” (p. 72). This prompted me to reflect that Honours is layered over time, as students progressively develop a structure that works for them, informed by previous experiences. Lauren decided that she was making a papier-mâché vase or model, but I selected the vase for this metaphor as it reminded me of Kvale’s vessel of knowledge (Kvale & Brinkmann, 2009, p. 2). At first this vessel is formless, the mass of pieces of paper being the elements of the Honours experience. With the help of the research supervisors, the students begin to identify and order the pieces, to structure the framework and to build the layers. Initially, the vase is very fragile as the walls are thin, just as the early Honours student is rather vulnerable and inexperienced. As the pieces are glued in place the walls become thicker and more stable, and the student develops the skills and relationships they need to sustain them.
through Honours. When the vase is completed, its form is apparent. It is stable enough to stand on its own, ready to be filled with the new knowledge of the Honours student and graduate practitioner.

I decided to structure Chapters 4, 5 and 6 around this metaphor:

- Chapter 4 is titled ‘Finding the pieces’: this represents the very early stage of Honours. The students are coming to terms with the challenge of Honours and are still very unsure of what it entails, what is expected of them, and how they are going to manage this new responsibility.
- Chapter 5 is titled ‘Structuring the form and building layers’: this represents the mid stage of the Honours experience. The students have developed a clearer focus on the task ahead and are developing the skills necessary to successfully complete Honours.
- Chapter 6 is titled ‘Crafting the vase’: this captures the final stage of Honours. By this stage the students have completed, or are in the process of completing, their dissertation. At this point they are able to view Honours retrospectively to reflect on their experience, the meaning of Honours, and the relevance of Honours to their professional practice.

4.1 Metaphor to Illuminate Honours

The ways in which we think, act and interpret our experience are profoundly metaphorical. Metaphor is therefore a major means for constituting reality. (Loftus, 2011, p. 216)

Reality is perceived through the lens of language and metaphor allows human beings to construct meaning about the world. Use of metaphor can enable a person to see their world, and their experiences within this world, in a new light. The use of metaphor allows a person to conceptualise and come to understand their life experiences (Mahlios, Massengill-Shaw, & Barry, 2010, p. 50). Through the use of words and images, humans can “interpret life, their experiences and even their sense of self” (ibid. p.49). Metaphor enables an interpretation of an experience and can serve as a means for forming and more clearly defining this experience. A metaphor as a construction of reality "cannot be true or false but [is] more or less useful" (Loftus, 2011, p. 225).

Metaphors are partially structured with fluid boundaries. Therefore, both the creator of
the metaphor and the listener have the scope to make their own interpretations of the metaphor (Loftus, 2011, p. 216).

There are many definitions ascribed to the word ‘metaphor’, but one that most appropriately matches the students’ choice of imagery in this study is: ‘one thing conceived as representing another; a symbol’ http://www.thefreedictionary.com/metaphor. In selecting their own metaphor for Honours, each student had the freedom to choose which aspects of their experience to focus on. Each of the metaphors the students selected produced “a different description of the ‘same’ reality” (Foss, 2009, p. 268). Metaphor can serve as a means for framing and defining a person’s experience, but until it is articulated, this interpretation is subconscious (Mahlios, et al., 2010, p. 49). Prior to me requesting each of the students to conceive a metaphor, it is unlikely that they would have reflected on the meaning of Honours. Consequently, as I gave the students absolute freedom to develop their own metaphor for Honours, this proved to be extremely challenging for them. Almost all of the students stated that this was the hardest question in the interview, and often needed more time to consider their response. One student was not able to provide any type of visual image for me at the mid-interview, and was still unable to offer anything at her final interview, despite having reflected on this for some time. The use of metaphor is popular in education literature and it is recognised that some students do find it very challenging to develop their own metaphor. It has been suggested that developing metaphor is perhaps easier for students who are more linguistically inclined, and it was certainly apparent that some of the science-focused Allied Health students struggled with visual imagery (Goldstein, 2005, p. 9). However, by asking the students to consider a metaphor to illustrate their experience of Honours, it enabled discussion which facilitated an articulation of their experience. Visual imagery and metaphor provides another dimension, and enhances understanding of the way that a person perceives situations and events. The students who engaged with this way of thinking were able to provide me with insights of which words alone are unable. It was as if an image was able to unlock deeper thoughts, by encouraging a reconceptualisation of their experience of Honours (Goldstein, 2005, p. 9).
… for making public the ineffable, nothing is more precise than the artistic use of language. Metaphoric precision is the central vehicle for revealing qualitative aspects of life. (Eisner (1991) as cited in Janesick, 1994, p. 209)

Other students offered a range of visual images to symbolise the Honours experience, and a few of these are included here to illustrate the breadth of their thinking. Jess suggested that Honours was:

Like you’re trying to walk across a river over stepping stones and you have to go through all these stepping stones like the research proposal and ethics and everything to get to the other side of the river, which is obviously the end. But sometimes they’re a bit slippery and you sort of fall in and drown a little bit and then you can get back up and keep going. (Jess)

Pursuing this imagery through further discussion allowed Jess to concede that:

Sometimes the rocks you step on aren’t so great … sort of the hurdles you go through going through all the stages, gathering all the literature and analysing and sometimes it’s a little bit hard and you get a bit down about it. (Jess)

Discussion precipitated by this image enabled Jess to rethink her experience, to express her frustration, and acknowledge the stress that she had experienced when receiving written feedback from her supervisors.

Maria’s image was precipitated by her focus on a very negative experience at the end of her first year of Honours. An unexpected low mark for her research proposal severely shook her confidence and made her question her self-efficacy. The imagery she used was:

A tornado … it thumped into me. (Maria)

Rachel envisioned Honours as a cycle:

Like for me Honours has been a cycle … goes up, goes down it’s just like a constant thing … so it made me think of like a frog jumps up and down. So I will think of it as like
a frog just jumping up and down. (Rachel)

Rachel’s Honours program ran over one year, as opposed to two years for most of the other students. This image of rapid change and alternating highs and lows, represents clearly the pressures faced by this particular set of Allied Health students. Two students chose to visualise Honours as an ‘opening up of opportunities’:

Like the horizon … you look at it but it could just keep going. I feel at this stage it’s just opening up my opportunities. (Ellie)

Opening doors … as in opening doors to the future, so if you want to do further research and PhD … and also opening doors to different experiences … experiences that other people didn’t have as well. (Nicola)

These images of opportunity are central to the reasons why students decide to undertake Honours. Although these Honours students often don’t have a clear idea of what they want to do after graduation, they are aware that having Honours will give them more choice. This may be in terms of employment, or as Nicola suggests, an opportunity to continue with research in the future.

The following discussion sections explore the issues which were of relevance to the students in the initial stage of Honours, and relate primarily to the early interviews.

4.2 ‘Finding the Pieces’
At this early stage, the students’ experience of Honours is negligible. They know little of the demands of Honours and the knowledge they do possess is informed by academic staff, research supervisors, and senior Honours students. A large number of items arose from the transcription of these early interviews, and it is not feasible to attempt to portray every single element of the students’ Honours experience. The items I selected for inclusion to illustrate the three major themes are featured because they were prominent in the students’ discussions in at least eight of the ten early interviews, and are key to understanding this early Honours experience.
<table>
<thead>
<tr>
<th>Themes</th>
<th>Interview items</th>
</tr>
</thead>
<tbody>
<tr>
<td>Challenging self</td>
<td>Honours decision making</td>
</tr>
<tr>
<td></td>
<td>Motivation</td>
</tr>
<tr>
<td></td>
<td>Challenges</td>
</tr>
<tr>
<td></td>
<td>Perception of Honours students</td>
</tr>
<tr>
<td>A different way of being</td>
<td>A different way of working and learning</td>
</tr>
<tr>
<td></td>
<td>Feelings about Honours</td>
</tr>
<tr>
<td>Coping</td>
<td>Managing workload</td>
</tr>
<tr>
<td></td>
<td>Coping strategies</td>
</tr>
<tr>
<td></td>
<td>Support networks</td>
</tr>
<tr>
<td></td>
<td>Impact of Honours on life</td>
</tr>
</tbody>
</table>

### 4.3 Challenging Self

#### 4.3.1 Honours Decision Making

According to contemporary literature, the broad aims of Honours programs in Australia are to "assist students in developing research, writing and communication skills, with several also having an emphasis on time and project management" (Kiley, Moyes, et al., 2009, p. 18). This paper also details students’ motivation for Honours, but there is no available literature which explores how students make a decision to participate in Honours. This is of particular interest when considering that many academically capable Allied Health students choose not to study Honours. In her research into the take-up of Honours by humanities students, Freegard (2008) noted “a subset of students who demonstrated high academic ability but chose not to proceed to Honours” (p. 1). This trend was also noted for nursing Honours students, with only 5% of students in each cohort graduating with Honours (Gillis, 2007, p. 81).

Across the group of Allied Health students in this study there was no pattern to when the students first considered doing Honours, and this decision was influenced by a variety of factors.
Everybody’s always had the expectation that I will do that because everybody does in my family … it never really occurred to me not to do it. (Emma)

Ellie had not intended to do Honours until the opportunity was proposed to her.

If I can do that, that would be pretty good to experience … so I wrote my name down, put my preferences in and didn’t really expect to get the call up. (Ellie)

Kiley, Moyes et al (2009) reported that students started thinking about Honours from the second year of their undergraduate degree (p. 21). However, this would necessarily be dependent on the timing of Honours recruitment sessions in different institutions, and does not account for personal factors such as family influence. In an ‘embedded’ Honours program, the age at which a student must make their decision about Honours is typically 19-20 years. Coupled with their young age is their relative inexperience in terms of clinical practice, and minimal understanding of the research process. There are many influential factors which inform Honours decision making and the students make their decision from a relatively uninformed position.

To be honest I wasn’t actually sure it was for me … but I talked to some other Honours students about the benefits of doing it and I decided to give it a shot. (Holly)

Students also sought advice from family members and friends to help guide their decision. There is a pervasive influence in both the CSU and LTU undergraduate student communities, entrenched in student lore, that Honours is hard work and a very stressful experience. Prospective students are certainly aware of this attitude and conscious of the fact that it deters many potential Honours students.

I had to weigh up if I thought it was going to be beneficial for me to have in addition to my physio degree or if I thought it was perhaps going to be too much for me. (Holly)

It is apparent that Honours research provides students with the opportunity to explore an enjoyable area of practice, or a topic of personal relevance. Whilst there is no relevant literature in the field of Honours, parallels may be drawn with PhD students. Watt, Greeley, Shea and Ahn (2005) explored the views and attitudes of American
medical students studying an MD-PhD program. They found that “clinical and research interests as well as personal and family issues” (p. 196) were prominent influential factors determining the students’ field of research. The main reasons for medical students choosing to commit to a research year in a Bachelor of Medical Science include:

- Interest in the possibility of a research career; relief from the tedium of the medical course; persuaded by an enthusiastic supervisor; wanted to study an area in depth. (Eaton & Thong, 1985, p. 448)

Depending on the institution they were studying at, and the professional group they were in, students in this study had a variable degree of choice over their research topic. All of the topics that were chosen by the students, or offered to them, enabled each student to further develop an area of clinical interest.

- It was just interesting to me to get a chance to learn more about it. (Emma)

- I always enjoyed the subjects related to my topic and I did well in them and I suppose I’ve enjoyed that aspect of clinical practice the most. (Sarah)

Honours decision making is influenced not only by the desire to gain new knowledge, but may also be viewed as preparatory experience for future research (Kiley, Moyes, et al., 2009, p. 21). Even at this early stage some of the students were able to extend their thinking beyond clinical practice alone.

- I’ll have more knowledge in that [area] and also in the research process … knowing how research works means you can think more broadly as well. (Lauren)

When considering the challenges facing these students, and being aware that the majority of undergraduate Allied Health students do not choose Honours, it is relevant to explore the motivation of these Honours students.
4.3.2 Motivation

At this early stage of Honours the Allied Health students were well aware of their reasons for undertaking Honours. Their motivation had an understandable focus on clinical practice and their professional career. However, before I discuss these various motivations it is important to reflect on the concept of ‘will’. Barnett (2007) debates eloquently the difference between ‘motivation’ and ‘will’ (p. 16). A motive is rational; a reason for doing something with an outcome in mind. “A motive is an end, a purpose, a goal” (Barnett, 2007, p. 17). Will is an entirely different concept and comes from within. “Will is the state of the person’s being. It provides internal energy; spirit even” (Barnett, 2007, p. 18). Without a will to do Honours it would be impossible for a student to move forward with this challenge. But the will is founded on ‘the bedrock’ of self-belief and it is in fact self-belief that allows the student to begin the journey of Honours (Barnett, 2007, p. 110). A student who chooses to undertake Honours is able to see some way into the future (Barnett, 2007, p. 15). A lack of either self-belief or will (rather than a lack of motivation), might perhaps explain why many students in Allied Health decide against Honours. When reflecting on the students’ comments about their reasons for undertaking Honours, it is interesting to draw out those that have no tangible end-point in mind. Even though the students did not specifically make reference to the strength of their ‘will’, it was evident in what they said:

I’m not doing Honours just to have that little ‘Hons’ next to my name, that’s not why I’m doing it at all. (Nicola)

It’s pretty much the opportunity to really immerse myself in a specific topic and develop a really good understanding of it. With Honours you get to really look at something over an extended period of time and really understand it and I know I won’t be an expert on anything by the end, but I think it will be a good experience. (Cassie)

Motivation in contrast to will is specific in nature, and the students were able to articulate these external motives for undertaking Honours. Depending on each student’s profession, Honours was perceived to be of varying value in terms of future employment. The physiotherapy students were the only ones to link Honours with
enhanced job prospects, and discussed issues such as the competitive job market and employment in specialist fields.

It’s a very limited opportunity … I’m thinking if I had greater experience of things in this field, it will give me a better step up into that field. (Jess)

It’s always good to have something else … an additional qualification to have … that was probably my main reasoning behind it [Honours]. (Holly)

Clinical practice is intrinsic to each of the student’s Honours research, and the research-practice nexus is evident even at this early stage of Honours. It is clear from their discussions that clinical knowledge and clinical experience is highly valued. This apparent tension between research and practice assumes even greater importance towards the end of Honours.

I don’t think that having Honours under my belt is going to really affect my work opportunities. I think the experience once I’ve been out working for a few years is going to have more of an influence, compared to whether I’ve written a thesis or whatever. (Cassie)

This clinical emphasis is highly relevant, and absolutely appropriate in Allied Health research, but the student’s individual motives directing their focus of attention did vary. Emma’s interest in working in the field of paediatrics had developed from her experience of working with children with disabilities.

A chance to learn more about that [paediatrics]. It’s just interesting to look at other aspects of their lives that I guess I don’t have much to do with … interesting for me to get a clearer picture … a broader understanding of what it’s like for them. (Emma)

For several of the students their topic of research linked to an area of clinical practice, inspired by their own experience of illness, or that of close family.

And maybe I can learn more about it and possibly in the future put that into practice … and help others so they can get treated … get through it better. (Lauren)
It’s a really good study to be involved in, just to contribute to the current literature and maybe improve care for them. (Nicola)

Finding out more about a disorder that not much is known about and helping people out there know a little bit more about it … getting the information and getting it out there. (Maria)

Rachel’s experience on clinical placement was a strong motivating factor in the choice of her research topic. But more than just exploring a specific area of practice, it was the sense of making a difference.

I felt like on placement I was actually doing something and I felt I was actually contributing, because I was dealing with high risk patients. So I liked that sense that I was working in a multidisciplinary team. (Rachel)

This range of factors determining an area of clinical interest fits closely with those identified by MD-PhD medical students. Three of the top four items were identified as “interest in clinical subject matter, field or type of research interest and personal/family issues” (Watt, et al., 2005, p. 195).

A consistent view amongst these young Honours students was the notion of ‘keeping your options open’, and this motivational factor invariably linked clinical practice and research opportunities. At 19 years of age their careers do seem to stretch far ahead to an uncertain future, with as yet unknown opportunities.

You never know … 40 or 50 or 60 years is a long time to stay in the one thing and you never know what you want to do … if you wanted to go on and do other things like Masters or PhD. So I think it does leave your options open. (Sarah)

Because if you don’t do Honours it’s a lot harder for you later, because who knows what you want to do in 10 years. You might want to go back and do research, you might not want to be just clinically based. So later on I’d like to possibly do a PhD and having Honours is going to help me to get into the PhD program. (Nicola)
Gaining new knowledge and qualifications necessary for further research, and exploring a field of personal interest, are common to Honours students in fields other than Allied Health (Kiley, Moyes, et al., 2009, p. 21). Motivation for Honours is multifaceted but “motives may be ephemeral, whereas the will has an enduring character” (Barnett, 2007, p. 18). It is the will of the student which energises their experience of Honours.

I’m going to enjoy it and make it an experience … I’m testing out research. I don’t want to hate it, like miss the whole point of it, hate it for every other reason and then avoid doing it in the future. So that’s what I think is a big deal for me. (Ellie)

4.3.3 Challenges

Also emerging from this discussion about the students’ motivation for Honours was the element of ‘seeking a challenge’. The students were well aware that Honours research would be challenging, but this was fundamental to their decision-making. Seeking a challenge may be precipitated by wanting something different.

The only challenging part about the other work is the amount of it, there’s nothing that you don’t understand … it’s all very straightforward, the other work. This is something new, so a different way of learning something, a different way of doing something … I think that’s the difference. (Sarah)

In saying this, Sarah is articulating her will to learn and the novel challenge of Honours is energising. This will to learn may have become dulled by the formulaic study required for undergraduate subjects in the Allied Health courses and Emma was also finding some of her subjects rather tedious.

They’re boring and you don’t really need to spend much time to learn what you need to know for exams. I guess Honours is definitely a much more challenging thing to do. (Emma)

Seeking a challenge but from a slightly different perspective, Cassie realised that the different way of learning would help to motivate her to study.
I’m one of those people if I’m meeting with lecturers one-on-one I’m going to do all the work and I’m going to do it really well. (Cassie)

‘Challenge’ for the new Honours student may also be understood as the issues and situations that make the experience of Honours testing for these students. It is acknowledged that students beginning research face challenges associated with research supervisors or mentors, transitioning to a new way of learning, and with integration into the research community (Balster, et al., 2010, p. 108). Seeking a challenge through Honours and then coping with the challenges that this new experience brings, is an interesting dilemma for these students.

I suppose part of me did want that challenge … I mean I’ve never been afraid of hard work, so I knew it was going to be a lot of work. But would I take that on knowing that it would have lots of benefits in the long run … that was the gamble I had to take. (Holly)

Challenges in terms of difficulties for these Honours students were focused on coping with the unknown, time management, managing workload, and writing for research. In a retrospective study exploring the experience of Environmental Science Honours students, similar challenges were identified by the students: transition to a new role in the university, developing skills in writing, reading and research practice and dealing with feedback from research supervisors (Allan, 2011, p. 426). Students also suggested a sense of being overwhelmed by Honours in the beginning.

It’s just that the project is so big and there’s so much to do that it’s a little bit frightening and that was a bit of a challenge for me to get started. Just because I don’t know where to start and I don’t know what to do and I struggled a little bit getting over the idea of that to start with. I think once I start getting into my research it’ll be alright, but just going and doing it will be a little bit of a challenge for me. (Jess)

The transition to Honours study is certainly not without difficulty. Honours, as compared to other subjects, is less visibly defined for the students.

The challenge I’m finding so far is structuring [the work], working out what method works best for me … so the independent research. It’s not as structured as other subjects and
you’re working with a little group of people who are all working at their own pace and it is challenging to hear when someone is that far ahead and I’m this far away and a fair way back. (Cassie)

Challenges may therefore be self-imposed, as with Cassie’s comparison of her progress with that of her Honours peers, or may be due to external factors such as pressure of time. With all the academic and clinical requirements of an undergraduate Allied Health course, Maria was emphatic that “time is probably the biggest challenge”. Allied Health students are very different to undergraduate students in non-vocational courses, as they are required to undertake workplace learning. This clinical work must be managed concurrently with Honours research and other academic study. There is no directly comparable literature available, but this issue of balancing academic study with clinical work was cited as the leading potential stressor, for undergraduate Nursing students studying part time (Nicholl & Timmins, 2004, p. 95).

Time to fit in Honours work and manage the workload was a common issue for all of these students, and this pressure of time may compound stress when the students are still learning what Honours entails. Emma’s comment about work for her early literature review illustrates this well.

So I suppose that it’s been pretty challenging to try and fit all that in … and not really know what our focus is. (Emma)

Time management and workload also impacts on the students’ lives outside of university.

So it’s just having to deal with part-time work, friends and boyfriend and all that to juggle as well, so it’s pretty hard. (Nicola)

The Honours students are coping with multiple demands on their time, coming to grips with Honours, and starting to develop skills to help them manage their Honours work. Writing skills are a common concern for the students throughout Honours and at this stage they were often unsure not only of their skill level, but also how they should be writing for Honours. Ellie’s research supervisor had told her that her writing should be
‘boring’, because ‘science is boring you can’t make it fluffy’, and this was obviously contrary to her natural writing style.

I knew my writing would be [a challenge] because I’m not very scientific, so I knew that would be my biggest challenge. (Ellie)

Understanding the expectations of research supervisors, and knowing how to write for Honours, was similarly problematic for environmental science Honours students (Allan, 2011, p. 426).

I was more concerned about the way in which it should be written. I’ve never written anything like this before so it’s a bit of a challenge … a challenge to know exactly what they’d want to be included and what we’re looking at. That’s a sort of a challenge … trusting yourself to just doing it. (Lauren)

Honours is a challenge deliberately sought by these students, but it presents many challenges especially at this early stage. One particular challenge confronting these students is the perception of Honours students by their non-Honours peers, and in some cases, academic staff. This can be difficult for the students to deal with as they do not wish to be viewed as being different in any way, and the perceptions of other people are often at odds with the student’s own sense of ability.

4.3.4 Perceptions of Honours Students

Amongst uni students I think the perception is quite wrong. Well so far I’ve gotten ‘oh you’re so smart’ or ‘talk about dedicated’ … things like that. But I don’t really see it as that because from my point of view it’s not as though I’m really taking on a much larger workload. So I don’t really agree with the stigma that’s attached to it. I don’t think I’m any smarter than anyone else … I mean we’ve all done really well to get into uni and I think it’s just intrinsic motivation that is playing a role in why I’m doing it. (Jess)

‘Stigma’ was a word used by several of the students when they discussed the way in which Honours was perceived by their non-Honours peers. The Honours stereotype portrays a highly academic student, interested more in research than in clinical practice. However, the reality is very different. Students choose to study Honours to explore an
area of clinical interest in more depth, and to gain knowledge and experience to enhance their future practice. The Honours students were all aware of the skewed perception of other students, but the way in which they were impacted was different for each individual. Comments made by peers regarding workload and the Honours students’ ability to cope with the increased demands, might have a positive impact.

Everyone sort of respects you for doing it but also is glad that they didn’t do it, I think. (Jess)

On the reverse side, an Honours student’s sense of self may be dented by a thoughtless remark.

They sometimes make comments like ‘oh the Honours students’ thinking that we’re smarter than they are. I would never … I don’t think that’s the case. It’s just that people sort of have that stereotype. (Holly)

Although all the students believed that they had the ability to undertake Honours, and to cope with the demands of this new form of study, almost all of the students were modest about their academic level. Even if they felt they were capable of Honours they did not want to appear different, or to be made to feel somewhat apart from the rest of their peer group. This stereotype of superior academic ability can also be perpetuated by academic staff. Cassie’s experience with one of her lecturers illustrates clearly that Honours students do not want to be perceived as different to their peers.

There have been two times when she has made a point of asking us Honours students what we think, after the rest of the class has said what they think and I really hate that. Really I think that’s unfair to be singled out like that. We [the Honours students] all just sort of shrank down in our seats. I just immediately think that people are going to think that we’re pompous arses or something like that ... yeah I don’t really like it at all. (Cassie)

This phenomenon was also noted by McInerney and Robinson (2001) in their study of Honours Nursing students. Students discussed the tensions they experienced around
being an insider as a nurse, but an outsider as an Honours student. This is evident in an extract from the research paper:

   I didn’t know what they would be expecting of an Honours student … I am concerned that they will expect me to be some sort of a high flying expert nurse with all the right answers and that I won’t be able to live up to this (p. 217).

This issue of perceived difference is particularly apparent for the group of Allied Health students in this study, as Honours is embedded in their undergraduate courses. Had these students been studying Honours as an ‘end-on year’ program, their peer group would comprise Honours students alone and there would be no difference upon which to remark. It may not however, affect the expectations of academic staff and clinical educators, but this is speculation. When Barnett (2007) talks about ‘being a student’ he discusses ontological and epistemological anxiety. Honours students are most certainly vulnerable to epistemological anxiety, precipitated by the need to order their thinking about, and planning of, this new workload. But perhaps more importantly they have made themselves different by deciding to be an Honours student, and this can draw the student into an ontological anxiety. A student is a single person albeit within different communities of practice, and by choosing to be an Honours student must “haul herself out of herself and come into a new space that she herself creates” (p. 36). This new way of being forms the foundation of the ensuing discussion.

4.4 A Different Way of Being

4.4.1 A Different Way of Working and Learning

   Through taking up some possibilities and not others, we contribute to forming our present and future, with the anticipation and anxiety that this entails. (Dall’Alba, 2009d, p. 42)

A student with a will to undertake Honours knowingly, accepts the challenge to develop their professional knowledge and research skills, but is perhaps completely unaware of the change in being that Honours awakens. At this early stage students are just coming
to terms with the work required for Honours, and are beginning to realise that it demands a very different way of working. Honours study has been described as:

An ‘in-between space’, a transition between the coursework orientation of undergraduate study and the traditional research focus of postgraduate study. (Schweinsberg & McManus, 2006, p. 52)

Although this reference pertains to an ‘end-on year’ Honours course as opposed to an ‘embedded’ Honours program, the notion of a transition from one form of study to another is highly relevant. Honours for these Allied Health students is integrated into a busy undergraduate course, during the third and fourth year, or the fourth year alone, depending on the requirements of the professional discipline and the institution. Researching a single topic over this extended period of time is a novel experience for these students. It requires a very different mode of study to that required for their non-Honours subjects, and a much greater degree of self-direction.

It’s just very different because with other things you really get told what to do. You get criteria set out and that’s what you do, that’s your topic. Whereas this you’ve chosen it all yourself so you’ve formulated your own work to a degree ... I’ve really enjoyed that part of it. (Sarah)

It gives you a little bit more freedom to do whatever you want to do. (Jess)

The element of choice, and assuming a greater responsibility for decision making in relation to the research topic, are important issues to consider. Some of the students were given a free hand to pursue any area of clinical interest, providing that appropriate supervisory support was available. Other students were offered a list of predetermined research topics from which to make their choice. In both scenarios the student is responsible for their own decision making with regard to their learning, and this is quite different to their prior learning experiences. Interest in the subject, the chance to extend knowledge in a specific area, and the chance to use particular skills, were all rated as important factors determining the choice of research topic by undergraduate bioscience students (Harland, Pitt, & Saunders, 2005, p. 13).
Having that greater sense of self-direction over their learning is appealing to these Allied Health students. The value of independent research to students who thrive in less controlled environments has been reported (Schweinsberg & McManus, 2006, p. 56). Independent learning however must be balanced carefully with the appropriate level of support, to ensure that the student’s expectations are not misplaced.

It’s funny because when I started this year I thought it was like a collaborative effort, I thought they [my supervisors] were just as much part of this project as I am. But now having gone through the first semester I realise that it’s more me, like I’m the one who’s having to sort of [get on with the project] … they’re just there for questions. I am more of an independent learner. I prefer to be an independent learner when I’m in control and I know what I’m doing, but with this it’s just so different for me. I prefer not to be an independent learner when I’m in unknown territory … I’m really reliant on other people. (Rachel)

This quote summarises beautifully the cognitive shift that is required for Honours study, and the change of being that occurs as these undergraduate students become Honours students. Holly seemed to consider that the independent nature of Honours work was a natural extension of what would normally be expected of an undergraduate student.

At university it is up to you to make sure you do the work, no-one’s really pushing you to do it, it’s up to you and I suppose Honours is even more so. Because the only person doing the project is yourself so there’s no-one else going to be able to help you out and you just have to do it … otherwise it’s not going to happen. (Holly)

It is true that being and becoming an Honours student is an individual experience, but students are working closely with research supervisors, within layered communities in the institution. Both ‘research supervisors’ and ‘communities of practice’ are significant areas for discussion in Chapter five. However at this early stage it is relevant to focus on the fundamental importance of the supervisory relationship in facilitating the transition of a student to this new way of working and learning. Maria’s focus on dealing with this new mode of study was very pragmatic:
You have to be a lot more proactive. You have to get things done, you have to have your own timeline and it has to be realistic. You don’t get spoon-fed as much as you do in other classes … you’ve got to kind of work that all out for yourself. (Maria)

In stark contrast to Maria’s supportive relationship with her research supervisor, was Cassie’s experience:

Very unstructured, very unsupervised, not a lot of guidance. It’s been a really confusing process for me … my supervisors have left everything entirely up to me. So it’s up to me to let them know if I want to meet up, or whether I want to submit a draft and I’ve found that a little bit frustrating in some respects. Because they were so forceful in telling me this is what you should study, that’s probably why I expected so much guidance … and I just haven’t got that. (Cassie)

The degree to which students are happy to work independently will vary greatly. Nevertheless, independent study founded on a productive supervisory relationship, is very different to a student struggling to work alone with minimal support. Honours students are novice researchers, in a dependent position as undergraduate students. Learning how to negotiate the supervisory relationship is a highly complex element of the Honours experience. The will is enduring but is a fragile entity, and research supervisors must acknowledge their responsibility towards nurturing the student’s will (Barnett, 2007, p. 25).

As Honours spans a period of one to two years, the duration of Honours study is also a notable difference as compared to the standard undergraduate subjects.

You’ve got to have more stamina I think because it’s ongoing. I’m not used to that … I’m used to how you get ready throughout a semester and then have a couple of weeks where you study for the exam and then you put those books away and move on. (Ellie)

Whilst this may be a worrying illustration of how students study for their standard subject assessments, it does illustrate the persistent presence of Honours over one to two years of the students’ undergraduate course. In itself this fact can be daunting and students wonder if they will be able to cope with Honours.
At the start of the year you think oh gosh how am I going to get through this year, it’s just so much. And there were lots of days when I just didn’t do anything, I sat at home in front of the TV and just didn’t even want to think about it. It’s important to just take it day by day, bit by bit … just do your best, that’s all you can really do. (Rachel)

This highlights again the epistemological and ontological anxiety evident at this early stage of Honours, when the students are feeling overwhelmed by an unfamiliar workload. Compounding this anxiety is the pressure of time, as Honours work is juggled precariously with other academic study, workplace learning, social and family life. Research into the perceptions of undergraduate physiotherapy students completing a research project during their final year of study, highlighted a relationship between stress and time constraints (Dawson, et al., 2001, p. 4). Pressure of time is a persistent issue for these students, but this new and unfamiliar way of working also places a different demand on the students’ time.

Previous assignments you could spend the night on it, or spend a week on it and that was it. But with this no … this is not the case. With this I’m spending **weeks** on one aspect. (Mary)

The challenge for these students in learning what is required for Honours and how to cope with this new way of learning is generally:

… not in terms of **doing** the work, but in terms of knowing **how** to do things. (Emma)

Students have the self-belief that they will be able to undertake the required study for Honours. However, what they need is clear guidance on how to manage tasks such as writing a literature review, and preparing an application for the ethics committee. All of the students acknowledged the self-directed and independent essence of Honours study, but the following comment illustrates an interesting difference between the degree of student dependence in Honours study and non-Honours subjects.

With other subjects you go to class and there’s face to face contact but a lot of the stuff you just do yourself, there’s no talking to anyone about it. Honours is just a completely
Independent study is implicit in both Honours and non-Honours subjects. However, it would seem that whereas guidance for non-Honours subjects is built into the curriculum in terms of marking criteria, the support to facilitate independent study in Honours stems from conversations and relationships with other people, such as research supervisors, academic staff and Honours peers.

The students’ focus on the practical issues of acquiring new knowledge and mastering new skills is inevitable at this stage. But if this new way of working and learning is to transform these Honours students into successful practitioner-researchers, there must be a focus beyond knowledge and skills, to ‘being’ (Dall’Alba, 2005, p. 363); (Barnett, 2009, p. 439). By exploring the students’ feelings about Honours it is possible to gain an insight into their experience of being an Honours student. The following discussion captures the emotional element of the Honours experience at the early and mid-stages.

4.4.2 Feelings About Honours

The phase during which student researchers are orientating themselves to the expectations and requirements of a research course has been termed ‘the groping stage’ (Tan, 2007, p. 207). This stage is characterised by feelings of insecurity, fear, and challenge. ‘The developing stage’, which represents the phase during which students are planning the research and participating in data collection, is characterised by mixed emotions of confusion, exhaustion, motivation and inspiration (p.207). These two phases discussed by Tan (2007) map reasonably well onto the early and mid-stage of Honours in this study (p. 207).

At the early stage of Honours the students have mixed feelings, depending on how they are coping with the additional demands of Honours. Having previously spoken to a group of Honours students at La Trobe during their first two weeks of Honours, there was a strong sense of them being overwhelmed by this new experience, and of not
being able to see ‘the light at the end of the tunnel’. At the time of these initial interviews a few weeks into the semester, students were experiencing a range of feelings.

Definitely much more relaxed than I was a month ago. I have more of a direction … not only where I am now, but where I will be heading. It’s kinda like euphoria for me … like very overwhelmed and very happy and I go through a stage where I just go with it, then once I’ve come down from that it’s OK, well what’s next. (Rachel)

I think at the moment it’s just that the project is so big and there’s so much to do, that it’s a little bit frightening. A bit stressed but I’m really excited as well … there’s so much information out there that I can read and get inspiration from. (Jess)

These comments illustrate clearly the tension between the excitement of accepting the challenge and starting Honours, and the anxiety about the perceived enormity of the task ahead.

Feeling really happy that I have decided to do it and looking forward to getting into more of the nitty-gritty of it … but still pretty nervous about it because I don’t really know how hard it’s going to be, or how much work it’s going to involve yet. (Sarah)

Feelings of self-doubt, nervousness, and being scared, are likely to be precipitated by a fear of the unknown. These same emotions were also reported by environmental science Honours students (Allan, 2011, p. 427). Positive feelings of happiness and anticipation are associated with looking forward to this new challenge and to the future possibilities that it may bring.

Students have had a very brief experience of Honours at this stage, and have no clear idea of what the one or two years ahead will entail. The students’ comments reveal an epistemological anxiety. But once students begin to develop a sense of direction, and feel that they know what they should be doing, their anxiety reduces. Having spent the break writing her systematic review, Lauren was feeling “a little bit stressed trying to write things….but other than that things seem to be going to plan”. A positive supervisory relationship is vital at this stage as it can make the transition to Honours study much less fraught.
I’ve really enjoyed the whole experience so far. It’s been very straightforward and I have had no hassles. It’s very positive because I have a very supportive supervisor and that’s really helped. (Holly)

A vital element to consider in the establishment of this supervisory relationship is the vulnerability of these students. Ellie had received her first piece of written work back from her supervisor:

I was really disheartened and you think to get where I am I’ve had to produce alright work and haven’t really had things ripped to shreds before. And then you get it and you think maybe I’m not really good at this, you know you kind of question yourself. But then you’ve got to look at it from the other point of view that you haven’t done it before and of course you’re not going to get it perfect first time. (Ellie)

Kiley, Moyes et al (2009) reported on a student whose “happiness was defined by the feedback he received from his supervisor” (2009). Research supervisors are certainly key to the emotional response of students, particularly at this early stage. The issue of writing for research continues to be a major concern for these students throughout their Honours experience. With increasing experience of being an Honours student, clarity around expectations and workload begins to emerge.

I’m happy, I’m excited because it’s all starting to become a bit clearer now … it’s exciting to be part of it. (Ellie)

By the mid stage of Honours the students’ feelings were very much dependent on the development of their Honours work, and more significantly their progress with data collection. Students commonly viewed the data collection as the most interesting element of Honours.

I’m looking forward to some data collection and data analysis … I’m getting a bit excited about that. (Sarah)

I’m feeling a lot better about it now that I have participants lined up. Now that it’s starting to come together a bit more I’m feeling a lot more confident in it and comfortable. (Lauren)
This sense of gaining confidence in and control over their research, is evident at this point. Tan (2007) also reported how undergraduate research students were inspired by learning how to apply research methods in data collection and analysis (p. 211). Getting out into the field allows the students to really start to integrate practice and research.

I’m really enjoying the research and I’m really enjoying meeting the people and talking to them, sharing experiences. It’s a very positive and personally rewarding experience this year. Personally rewarding because I’m building networks and I’m helping other people by giving them information. The research is very different to all the fluff that you have to do beforehand. I know that you need to do the fluff but actually doing the research is much more productive. (Maria)

This view of data collection as ‘the research’ is an interesting perspective and certainly aligns with one of the students’ prime motives for doing Honours: ‘making a contribution to professional knowledge’. Nicola was very advanced in her progress at this stage and was naturally feeling very pleased with her progress:

So just finished data collection and really happy with how it all went. I’m pretty much where I want to be so I’m happy. (Nicola)

If a student feels in control of their learning and their research study, and Honours is progressing as expected, it is not surprising that they will be feeling very positive about their experience.

I’m feeling pretty good about Honours. It hasn’t been stressful at all because things have been going so smoothly … I’ve had a pretty positive experience so far. (Holly)

Conversely, frustrations had arisen for a few of the students which were related to different aspects, such as a lack of guidance from research supervisors and workload issues.

I’m finding I’m more by myself on this project and that’s where a lot of my frustration stems from. (Rachel)
When I was trying to get the research proposal nailed it was a bit stressful and I didn’t really put much work into my other studies. But it’s good now that it’s all done … I’m happy with that. (Jess)

The experience of being an Honours student is intimately related to, and impacted by, the students’ relationships with others and the context within which they are undertaking Honours. The emotional experience of these Allied Health students on ‘embedded’ Honours programs, seems to mirror the experience of ‘end-on year’ Honours students (Allan, 2011, p. 427). The added complexity for the students in this study however, is the co-existing requirement to undertake non-Honours subjects and to participate in workplace learning.

I don’t feel like I’m learning anything from it [an on-line subject] and it is taking me away from what I should be doing [Honours]. I just get consumed by it … I really enjoy it. When I’m doing my project like it’s a 100% and I don’t really care what else is going on … probably sounds sad doesn’t it! (Ellie)

Not all of the students are so thoroughly engaged in being an Honours student, but Ellie’s experience illustrates the process of ontological displacement. Her relationship to the world has changed and her engagement is only possible “through her being immersing itself in those experiences” (Barnett, 2007, p. 76). Fundamental to the students’ feelings about Honours at any point in time is an understanding of what is required of them, the knowledge of how to achieve it, and the sense of being in control to some degree. Honours study is challenging as it requires a different way of working and a new way of being. The following section explores the ways in which students manage workload and cope with the complexity of Honours, in the face of competing demands on their time.

4.5 Coping

4.5.1 Managing Workload

I just want to sit down and really get into the literature so I can actually sink my teeth into the literature review. I feel like I’m trying to catch up at the moment so hopefully the
holidays will fix that … but that’s not because of Honours, that’s because of other subjects that are just impinging on the time that I can spend on Honours. (Maria)

Having chosen to study Honours, one of the major concerns for new students is how they will manage this additional workload. Honours is integrated within the standard undergraduate course for these Allied Health students, and coping with the additional workload is an evident source of stress at all stages of Honours. Students are forced to analyse their ways of working in order to ensure that neither the Honours work, nor work for their other subjects, is compromised. Nicola acknowledged the competing demands of coursework and Honours, and introduced the idea of a rather precarious balance between the two.

So there’s lots of different areas we have to concentrate on. Sometimes we can’t just work on Honours for a while because we’ve got to do all this other coursework which is hard, but you just have to juggle it somehow. (Nicola)

Honours presents many challenges to these new student. As they begin to understand that Honours requires a transition in their mode of working, they are also having to cope with additional and unfamiliar academic work. For some Honours students this period of transition is not smooth, and Sarah considers the potential for allowing Honours work to lapse:

We have to be very organised obviously and it’s not like the other subjects where you go to class. You really do have to have some kind of timeline to make sure that you’re not falling behind, so I think it’s very self-directed. It’s very hard to keep doing that … like it’s very easy to let it slip. (Sarah)

Honours study requires many hours of work and the intensity of the workload has also been noted by Honours students in other disciplines (Allan, 2011, p. 425). When researching the experience of undergraduate Psychology Honours students, Pietersen (2002) found that “they felt that they were forced to neglect their research in favour of other demands on their time” (p. 7). ‘Trying to balance work commitments and the required study’, ‘course workload’ and ‘personal time management’, were ranked 1st, 7th.
and 10\textsuperscript{th} respectively, in a list of 39 potential stressors identified by part-time undergraduate Nursing students (Nicholl & Timmins, 2004, p. 96).

I have to admit I probably have been focusing more on Honours than my other subjects, which may result in the whole stress thing further down the line when it comes to my other exams. But that’s the thing because I wouldn’t want to just focus on my Honours and jeopardise all my other work, because it’s what we need for clinical placement, what we’re going to need for the rest of our careers. So you just can’t rely on research skills … it’s very important to keep a balance there. (Holly)

The struggle to find a balance between Honours work and her other academic work is plainly evident for Holly. What is interesting to see is the distinction she draws between academic study to support her clinical work, and the research skills gained through Honours study. Despite the focus of the students’ Honours research being an area of personal clinical interest, at this early stage of Honours the concept of the practice-research nexus is not at the forefront of their thinking.

This need to maintain a balance is not just relevant to the students’ academic work, but also permeates other areas of their lives such as social and employment commitments.

I’ll just have to work around that and manage my time a little bit better. (Jess)

Only work on weekends and not during the week … so Monday to Friday is my time for uni. (Cassie)

Penketh and Goddard (2008) discuss a time of transition for students moving from foundation degrees to Honours study. They noted that students made personal, social, and academic changes to adapt to a new learning context, and their students also discussed time management issues relating to competing demands (p. 323). Successful time management for the Allied Health students must however be considered in the context of the supervisory relationship. Developing a productive relationship with their research supervisors is paramount to the students’ ability to manage the Honours workload with minimal trauma. Cassie embraced the relatively independent nature of Honours study:
Writing emails to them [research supervisors] and that’s really keeping me on the ball and instead of just having to meet my own expectations I’m telling someone else, so then I have to follow through with it … which is a good thing for me. (Cassie)

However, negotiating the student-supervisor relationship can take some time. Emma discovered that research supervisors and delay on their part, can impede the best laid plans for good time management:

I’m usually pretty good at planning, but it’s probably harder to do it for Honours when there’s not just me involved in doing it. I’ve got to co-ordinate things with my supervisors. Just because you put in drafts and things like that, it’s probably harder to get it done early I guess. (Emma)

Whilst the experience of managing workload was similar for all of the students during the early stage of Honours, there were more noticeable differences at the mid stage. Students studying Honours compressed into the fourth year of the undergraduate course necessarily had to progress more rapidly than students who were studying Honours over a period of two years. Therefore, although the students may have had a similar experience in terms of time management issues and managing workload, the timing of this experience varied. For the students studying Honours over two years, this was the stage at which they were writing research proposals and submitting ethics applications. Writing a research proposal was considered to be particularly demanding.

I looked at the outline … it was just so massive I couldn’t get my head around it and all the things that I had to do … I had to break it down into little bits. (Jess)

I think when you sit down and write it it’s not too bad, but there’s a lot more elements to it compared to what we did last semester. (Sarah)

The different nature of the work required for Honours is challenging, but the experience of fitting Honours work in to a very busy schedule was very different for each of the students.
We’ve got seven assessments due in six weeks, so it makes ethics and your research proposal kind of hard to get in. (Cassie)

Five weeks to be able to dedicate to everything I need to do for Honours. It takes a lot of time to organise, to spend hours on the phone to ring different people and groups. I don’t have to do uni work at the same time, which is good. (Lauren)

So the ability of a student to manage the Honours workload is highly dependent on the structure of the specific Allied Health course, and the Honours curriculum operating in the particular school and/or institution. It was evident that there was little consistency between the Honours curricula in terms of workload planning for an individual student. On discussing the implementation of an Honours program in Nursing, Gillis (2003) states:

That it not be so challenging that students are left with no leisure time and consequently suffer a penalty for participating in the programme … learning should be enjoyable (p. 77).

It was evident that the competing demands of other academic work and workplace learning, placed great pressure on these Allied Health students.

I’m getting a bit behind in all the other study because everything’s due at the same time as all our prac exams. It’s hard when it’s exam period and you realise that it would have been nice to be able to spend more time [preparing for the exams]. (Emma)

Honours study requires the students to be very self-directed, and because the external drivers are perhaps not as manifest as for class-based subjects, it is easy for some students to lose momentum. Prioritisation of work is an organisational skill which Honours students possess to varying degrees.

Sometimes it [Honours work] can get chucked to the side a bit. You can sit there and go I’ve got this, this and this to do and that’ll be done last. I will get to it but it’ll be done last and sometimes you don’t get to it. (Sarah)
The importance of completing Honours work in the face of competing subject assessments is dependent on the individual student’s perception of priority, and this issue is magnified when Honours is a one year experience.

Very mindful of the short timeframe … I haven’t even had the chance to allow it to slip. (Rachel)

We had an on-line subject to do and probably that wasn’t given the same priority. It was basically just do enough to get through then focus on the more important stuff [Honours]. (Ellie)

In Shaw’s (2010) research into the student experience of fourth year undergraduate research projects, coursework was identified as one of the negative events associated with Honours, for students enrolled in an ‘embedded’ Honours programme (2010). Some of the Allied Health students at this mid stage were engaged in data collection, and this in itself presented a challenge in terms of managing workload.

The distance I’m having to travel to get participants is worse than anything else at the moment. That’s what’s having the biggest impact. (Maria)

Access to research participants is a potential difficulty for students, but Rachel also identified her dependent relationship with these study participants as impacting on her time management:

In terms of recruiting I would have a plan in mind but obviously you’re having to rely on other people which makes it difficult, because it’s not just you involved in this project. You’re having to put your trust in them … I can’t expect it to go exactly the way I want it to go. (Rachel)

The students begin to understand that their capacity for good time management, and effective organisation of Honours work, is not always completely under their control. This realisation of the need to factor in delays when working both with research participants and research supervisors, is fundamental to the students’ learning through Honours and is intrinsic to their understanding of the role of a practitioner-researcher. If
a student is able to structure their Honours research such that data collection is conducted promptly, this does relieve the pressure to some degree and helps to maintain motivation.

I really prepared for this and knew that it was going to be a lot of work … let’s just do it … it’s only a year, get it all over and done with. I had a list of all my participants which I crossed off as I went along … you feel a bit better when you’re crossing things out. I can just relax now and take my time to analyse it all properly and write it up. (Nicola)

Meticulous attention to the preparation and planning of an Honours study to expedite data collection is one strategy that a student might use to reduce anxiety about the Honours workload. Students also discussed other ways in which they were able to gradually gain some degree of control over this new experience.

4.5.2 Coping Strategies

Taking control seems to be the method by which students can reduce the sense of being overwhelmed, and diminish their feelings of anxiety.

When I started to feel very frustrated and I didn’t know where I was going, then I really homed in on textbooks even emailing my supervisor a lot, to try and get as much feedback as I can from them. That’s when I started to set out my plan of how I could approach every week and if I could keep it similar every week then that way I could get everything done and I would feel like I’m more in control … that things aren’t out of my hands. (Rachel)

I like timetables so I generally try and have set times each week that I do subjects, so that I make sure that I don’t lag behind in one thing. Sometimes it falls apart if you’ve got something due but it’s supposed to all even out. (Sarah)

Students may take control by trying to improve their time management. Rachel’s strategy was to become more proactive in her relationship with her research supervisors, in order to seek support and guidance. With a busy time ahead towards the end of the year, Maria suggested that she was:
Planning to actually do some research in September……to have my research done by the time I do prac, otherwise I think it will just be too busy. (Maria)

A clear understanding of personal study habits underpinned by self-belief, may be all that’s required to enable a student to cope with the complexity of Honours.

It’s OK to work at my own pace and just be comfortable that I do have the ability … I’ve just got to plod away at it and that’s how I feel most comfortable working. (Cassie)

In order for a student to have a will to learn, it must be founded on a ‘bedrock’ of self-belief (Barnett, 2007, p. 111). This self-belief will enable a student to persevere when confronted with the challenges of Honours, and to cope with the unpredictability of this novel experience. Although Honours requires the students to work much more independently, these Allied Health students are not alone, working as they do with research supervisors and Honours peers. These communities of practice will be discussed in Chapter five, but it is important to understand that Honours students will also seek the support of other people, in order to help them cope with the demands of Honours.

In terms of external resources I was actually seeking them more than I was at the start. Now I’m actually talking more, emailing more … not just with supervisors but even with other staff members. I think it’s because I started to develop that relationship that I felt more comfortable that I could seek their assistance, whereas I couldn’t really at the start, or felt I couldn’t. (Rachel)

4.5.3 Support Networks

The development of these relationships with research supervisors and other academic staff is an important strategy to help students cope with Honours, but these students utilise a range of support networks to help them cope with Honours.

There’s lots of support like I’ve got two supervisors and if they’re not there, there’s always the coordinator of the Honours program and yeah there’s people everywhere that are willing to help you. So it’s not a daunting thing really because you’ve got lots of support networks. It gives you an idea of what research is all about. (Nicola)
Honours students gradually become aware that they are part of something bigger and that they are not expected to work through Honours alone.

Because research is quite independent and a lot of it is working just with yourself. So having them [academic staff] there is quite good because I feel like it's a team, especially when at times I’m feeling like there’s no light at the end of the tunnel by myself in this. But when I talk to them I feel like there is support there and they do understand where I’m coming from, because you know they have done it x number of years ago. It does assist me in the research because I know that they are there. (Rachel)

This theme of a research community of practice permeates the students’ discussions of their Honours experience. Although it was not articulated as such by the students, it was apparent in the words they chose. Emma’s experience of group supervisory meetings illustrates the support that can be gained from both academic staff and other Honours students.

Having the extra lecturers around to look at our topics probably helps give us more ideas and [helps us] come up with different ways of doing things. With the students it’s just good to be able to talk to them about what they’re doing and how they’re doing different things and what strategies their supervisors have given them, that maybe we haven’t been given … that we could sort of use. (Emma)

This sharing of information between Honours students, and self-assessment of how they are managing the Honours work, is another important coping strategy.

Even things like knowing where other people are up to … am I falling behind, because we’ve got timelines we have to work towards. But also things like finding out about different tests and being able to share information between each other … that’s really good. (Lauren)

Students entering Honours generally have not developed any significant research skills, and practical support to develop these skills is something they often require. Holly indicated that she used her support networks to help her cope with technological problems:
I have to admit I’m not very good on the computer so that has been a little bit of a challenge. Probably the hardest thing I found was just getting my head around how to do the search strategies in a straightforward way. But any questions I’ve had the other students have been able to answer … or my supervisor’s been great, she’s helped me out with that. (Holly)

Support for Honours comes from many sources and is multifaceted comprising academic, emotional and practical support. Allan (2011) also identifies research supervisors, Honours students, and other academic staff, as comprising the support network for a group of Environmental Science Honours students (pp. 428-429). Particularly at this early stage when students are finding their way in Honours, and still developing these new support networks, they rely on the strength of support from family and friends. It may also be relevant that these students are typically 19-20 years of age at the start of Honours, and therefore younger than students undertaking Honours as an ‘end-on year’ course. Age in itself may mean that students in an ‘embedded’ Honours program are more likely to be dependent on the support of family members. However, there is no comparable evidence available in the Honours literature.

I’m calling up my Mum who lives five hours away and telling her all about it. I’ve got housemates but they aren’t very interested in things like that. I’m learning to rely on the supervisors a bit. (Cassie)

Just as the Honours students’ support networks extend beyond the confines of the university, so too does the Honours experience influence other aspects of the students’ lives.

4.5.4 Impact on life

It is difficult to separate the academic experience from the social or personal and it is evident that the students’ academic development is influenced by their lives and that their lives may be affected by their academic learning. (Penketh & Goddard, 2008, p. 320)
Honours students like all other undergraduate students, have complex lives within which Honours is just one extra commitment. The impact of Honours may effect daily living in terms of reduced time for paid employment or social activities, or may change the student’s being in some way. I will explore self-actualisation in Chapter five, but for the present I will focus on the pragmatic issues of accommodating Honours into a busy life. Time for Honours study erodes time that would otherwise have been spent on pursuits such as paid employment and social events.

When I’m planning something with a friend I organise something that won’t consume the whole day. Work commitments as well … I still wanted to do a couple of shifts a week, so having that to work around. There are only so many hours in the week and then you’re left with a small amount to dedicate to the project. (Rachel)

More [Honours] work in the holidays than I would have otherwise, but that just impacted on how much time I spent at work and I’m more aware about how many hours I scheduled. (Emma)

I haven’t been doing as much socially … like I haven’t been seeing my friends as much as I normally would and I’ve cut down my hours at work. (Nicola)

It is relevant to consider that even if the Honours curriculum is structured to ensure that students are not required to study more subjects than non-Honours students, Honours work cannot be easily confined. As with all research work, Honours can infiltrate all aspects of the students’ lives and invades time intended for other activities.

It’s taking a bit of time out of my life. I’m probably spending more time doing Honours and uni-related stuff than I would otherwise … as opposed to doing other things. (Sarah)

Approaching completion of her first major piece of work, Ellie found that Honours had completely consumed her life:

I was living it, breathing it … like it was just always in my head. So in terms of taking over my life, it did especially then. I’m hard on myself and I really put this as my number one priority. I didn’t even go to the ball this year because I just wanted to get it done and that was a sacrifice I made. (Ellie)
Despite it impinging often markedly on the students’ lives, Honours can also have a beneficial impact.

In terms of time management and being really organised I suppose that’s assisted that as well. Just making me that bit better about being organised. (Holly)

I think if you’re organised in one aspect … well I’ve found that I’m more organised in other aspects of life. I find that if everything’s well structured then more things get done. (Sarah)

Once a student starts along this path, Honours interweaves all aspects of their life. Honours changes not just how they manage their academic work or how they approach their studies, but their very being.

Chapter 4 has illuminated the formative experiences of these novice Honours students, through an exploration of: ‘challenging self’, ‘a different way of being’ and ‘coping’. This early stage of Honours is characterised by uncertainty, a sense of being overwhelmed, coping with new ways of working, and learning a different way of being. The students develop ways of coping by using various support networks, and endeavour to maintain a balance between Honours and the competing demands of other academic work, workplace learning and social life. Chapter 5 continues this exploration of the Honours experience, as the students progress from the early to mid stage of Honours. As the students develop a clearer understanding of Honours, the relationships they develop and the relevance of Honours to practice, their experience is represented by three major themes: ‘communities of practice’, ‘self-actualisation’ and ‘becoming a practitioner-researcher’.
Chapter 5: Structuring the Form and Building the Layers

This chapter is informed primarily by discussions during the mid interviews. At this stage the students were absolutely immersed in Honours and their confidence in articulating this experience was enhanced greatly. Contributions to this chapter also arise from discussions at the early and final interviews, as the concepts of ‘communities of practice’ and ‘becoming a practitioner-researcher’ resonate with the students’ experience at all stages of Honours.

Six of the ten items selected for inclusion in this chapter featured in the interview discussions of eight or more of the ten participants. The four items marked with an asterisk arose from interviews with four to seven of the participants, but are included because of the insight they provide into the students’ experience.

<table>
<thead>
<tr>
<th>Themes</th>
<th>Interview items</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Communities of practice</strong></td>
<td>Honours peer support</td>
</tr>
<tr>
<td></td>
<td>Research supervisors</td>
</tr>
<tr>
<td></td>
<td>Research community of practice</td>
</tr>
<tr>
<td></td>
<td>Relationships with academic staff*</td>
</tr>
<tr>
<td><strong>Self-actualisation</strong></td>
<td>Self-belief*</td>
</tr>
<tr>
<td></td>
<td>Honours as an enabling experience*</td>
</tr>
<tr>
<td>**Becoming a practitioner-</td>
<td>Contributing to professional knowledge</td>
</tr>
<tr>
<td>researcher**</td>
<td>Research skills</td>
</tr>
<tr>
<td></td>
<td>Writing for research</td>
</tr>
<tr>
<td></td>
<td>Extending personal knowledge*</td>
</tr>
</tbody>
</table>

5.1 Communities of Practice

5.1.1 Honours Peer Support

Consistent with a social constructionist perspective is a belief that the experience of these Honours students is shaped through their interactions with other people, within different communities of practice. An illumination of the phenomenon of Honours is
possible through the exploration of a student’s individual experiences, but it would be an incomplete picture without consideration of the social interactions which colour this experience (Chaiklin, 1993, p. 385). Communication with each other is fundamental to the construction of, and implicit within, our understanding of the world in which we live (Gergen, 2009, p. 4). The Honours peer group emerged as a very important community of practice for these students, and the relationships with their peers are fundamental to the students’ experience of Honours.

Across the different Allied Health courses there is a group of Honours students who may or may not meet together on a formal basis, depending on the institution and the structure of the Honours program. More typically, the Honours students will work with, and gain support from, their peers within their own professional group. Honours decision making does not seem to be dependent on whether friends decide to undertake Honours, but this appears to be an influential factor.

I think I would have done it either way, but it was nice to know that there’s going to be a support basis amongst peers. I’m really great friends with them and knowing that they were doing it also … well actually I probably motivated them to do it. It’s a great way to get to know other people but you sort of fall back into your little comfort zone. There are students from other disciplines but I don’t really know them. (Cassie)

Remembering that these Honours students are already feeling somewhat different to their non-Honours peers, it is important for them to know that they have friends who can understand what they are going through, and provide support to help them cope with the demands of Honours.

I think it is comforting for me to have my friends who are doing Honours and who will be going through the same stressful period, like when assignments are due for Honours. Everybody else doesn’t have that same pressure. Yeah I think that was a reason why I chose to do it as well. (Jess)

It was apparent that the students’ relationships with their Honours peers were stratified. Friends undertaking Honours are valued highly, not only for their shared understanding of the experience, but also for the moral and emotional support they are able to provide.
Other Honours peers, also from the same professional group but not pre-existing friends, have a more distant relationship. They will share the Honours experience in the context of a specific Allied Health profession, but the trust necessary to enter into an emotional relationship must be developed. Honours peers from other Allied Health disciplines are likely to be unknown, particularly during the early stage of Honours.

I suppose for me there’s extra benefits as a couple of my good friends are also doing Honours. I don’t know the rest of the group quite as well … that’s a closer network which is really supportive. Also knowing that there’s someone else who knows exactly what you’re going through instead of going ‘oh there’s so much stuff I don’t need to do Honours’. (Lauren)

In these early days the support that Honours peers provide is emotional, and this vital support continues to be important to students throughout Honours. In contrast, the students’ capacity to provide effective academic support for each other is, understandably, rather limited.

I do find the Honours group very good to chat to outside of Honours, but when it’s specifically related to Honours or to the research side of it, I’m leaning more with the staff. (Rachel)

It’s quite difficult sometimes because we’re all at different stages and I’ve become aware of being ahead of other students, simply because my supervisor wanted me to have a certain thing done. So it would be difficult to turn to my friends and ask for help, when they hadn’t got to that point yet. But in terms of just being a great bunch if I did feel stressed out I’d feel comfortable going to them, because we’re all going through the same thing. (Holly)

In her research with environmental science students, Allan (2011) describes accounts of Honours peer support as “the most animated relationship stories” (p. 429). These stories reveal elements of emotional and practical support. This emotional dimension of the students’ learning is very important to embrace, in addition to the cognitive and environmental influences which shape the Honours experience (Fuhrer, 1993, p. 186). Making time to talk about Honours to facilitate these support networks is an important
element of the Honours experience. However, Honours meetings or seminars may not always meet the needs of the students.

We’ve only had a few seminars together but we don’t really get much time to talk and if we do it’s really just a debrief with each other. We probably don’t work as closely together because our projects are so different … we don’t really get much of a chance to come together. Maybe I think the support as a group is probably lacking there. We don’t get time to talk about how are you going, how are you coping … that would probably be good … of benefit to us, especially because we’re a small group. (Ellie)

Emotional support is essential to ensure the continued wellbeing of Honours students, but given the right setting it is possible for students to extend the support they are able to provide for each other. In the space of a group supervisory meeting, Emma had found that academic support from other Honours students could be facilitated.

We have these group meetings so we can all brainstorm each other’s ideas and things like that … structured it so we become part of the group. (Emma)

The presence of research supervisors is key to providing the necessary guidance for productive discussion at this stage, but there is also the sense of inclusion suggested. Becoming part of the group could be conceived as being accepted into the Honours community, the research team, or the larger research community within the Allied Health discipline or school. Balster et al (2010) reported that the ‘Entering Research’ course enabled discussions between academic staff and students in facilitated peer groups, which “helped establish a community that transcended the students’ individual research projects” (p. 114).

A different perspective on relationships and communication within the Honours group was introduced by one of the students, when she discussed the element of competition between students. Interestingly, this phenomenon was also evident within a group of Environmental Science Honours students (Allan, 2011, p. 430).

But even maybe you will sense a bit of competitiveness from Honours peers. The negative aspect would be that competitive side and sometimes it can stress you out. So I
try to stay focused when I see them, I try not to get too caught up in talking about Honours. Because otherwise I feel that competitiveness in myself is going to come out and I want to keep it friendly with them and not get caught up too much with what they’re doing and where they’re at. (Rachel)

This potential negative influence within the Honours group seemed to arise from other students, trying to gauge their level of progress against that of their peers. But despite this perception relating to academic rivalry, Rachel did accept that her Honours peers sharing this mutual experience would be a source of emotional support.

But then you know if you do go and talk to them about something and express your concerns, they do understand where you’re coming from. (Rachel)

As the students progressed through Honours they perceived this Honours support network in different ways, and utilised it varyingly according to their needs at different times. It is apparent that the trusted friendships pre-existing Honours continued to provide support.

Because we were all friends before we did Honours we were already supporting each other … so the support continues I suppose. As opposed to external support people you’ve met who are just doing Honours, you don’t really know them after that. (Lauren)

This common experience of Honours is a strong thread through the students’ discussions, and Holly refers back to the differentiation between Honours and non-Honours students.

We all know what each other’s going through whereas I suppose other students don’t know quite so much what we’re experiencing. We can offer support and advice to each other about how we’re going. (Holly)

Although the students articulated a sense of togetherness and mutual experience, it is also important for them to be able to gauge their progress against that of other Honours students.
We can talk about how we’re going and see where we’re all up to, so it’s not just you’re on your own there. You know that everyone else is going through that process at the same time as you. (Jess)

I suppose finding out where they are, how they’re going, that kind of thing. Seeing if I’m on the same level, have I missed anything, have I forgotten anything? I’ve actually found out a couple of things that I need to do through my Honours friends as opposed to through my supervisor. So I suppose that support and encouragement, doing something together, a common talking point. (Lauren)

We compare where we’re up to in terms of the write-up … it’s good to bounce ideas off each other. (Holly)

Talking about Honours seems to serve different purposes; not only the provision of emotional and practical support, but also the opportunity for students to assess their rate of progress against that of their peers. Emma seemed to use this comparison with her Honours peers to maintain her momentum:

You don’t want to be behind where they’re up to … just knowing that you’ve got to get it done. (Emma)

Students may also seek support from senior Honours students, as they have already been through the experience and will be better placed to offer practical advice and academic support.

I’ve found that Honours students in the year above us have been helpful as well, just talking about how they went about writing their research proposal. (Sarah)

Perhaps it is not too surprising that students will seek out friends to provide support in Honours, if the support they require from their peers is primarily emotional. But this fact in itself can be potentially isolating for some of the Honours students. Students may not engage in this community of Honours students for a variety of reasons.

The two other Honours students, they get along very well together … but yeah perhaps not the three of us. (Maria)
For me not … which is sad, even though I suppose they would understand where I’m coming from. I know that they’re there but I don’t feel like I get support from them. I don’t seek support from them and a lot of the time we’re not really interacting that much at all. They’re doing different projects so the support that I’d want to get is from outside … the people that know me more and understand me more. I was never close with them before this year and I actually thought this year would enable me to sort of get closer to them. (Rachel)

It is evident that just because a group of Allied Health students are brought together by this common experience of Honours, it does not necessarily imply that they will form a cohesive community. Pre-existing friendships and the needs of the individual student will dictate how much trust they invest in, and support they seek from, their Honours peer group. The students depend on existing relationships to help sustain them through Honours, but the formation of new relationships is perhaps more critical to their Honours experience. The most important of these relationships is the one they develop with their research supervisors.

5.1.2 Research Supervisors

I like the thought of being with somebody one-on-one like with your supervisor … having a mentor, having that close relationship with somebody for a year. That’s why I put Tomas as my first preference. It’s just feedback from other people who had done Honours, they said you want to be with someone you know you’re going to gel with and works with your style. (Ellie)

Whether Honours students are able to have some choice about their research supervisors, or whether the decision is predetermined, this specific type of relationship is new for these students. For some students, the decision to undertake Honours is influenced strongly by the prospect of working closely with a member of academic staff, to benefit from their knowledge and guidance. Cassie was seeking this supervisory relationship to enable her to develop her writing:

   It’s just a great chance to work very closely with lecturers and get some of their knowledge. I’m always told that my ideas are really, really good it’s just the way I write
sometimes. So I figure doing Honours I’ll be able to work on that quite well and get really good feedback from the lecturers I’m working with. (Cassie)

Honours requires the students to engage in different ways of working. Anxiety precipitated by this unfamiliar way of working may be alleviated by means of a facilitative supervisory relationship.

I guess it’s just having the guidance around you. I never know what the expectations are and I never really get exactly what the lecturers want from me, so I feel more confident that I can do it … like I can do a better job if I’ve got people who can actually guide me, which we don’t have in our normal classes. (Emma)

Honours students are inexperienced in terms of research and it has been suggested that this factor, in combination with the relatively short duration of Honours in comparison with postgraduate research degrees, presents additional challenges for research supervisors (Schweinsberg & McManus, 2006, p. 58). A research supervisor working with an Honours student is a valuable source of knowledge and inspiration, but also needs to be a guide in this unfamiliar research environment.

A sense of direction and clarification on a lot of points that are jumbling around in my head and a specific pathway that I need to take. I think that’s what I get from my supervisor. (Rachel)

Emma identified that she learned from her supervisor’s research experience of refining a research question.

It’s been interesting to see the process of how the lecturers actually do it … people who’ve done it before, sort of know how to narrow things down. (Emma)

A deeper thread underpinning this more visible support is the fundamental responsibility of the research supervisor to nurture the Honours student. This one-on-one relationship with a research supervisor is a unique experience for these Honours students. “To nurture with any lasting effect the process has to endure over time” (Barnett, 2007, p.
The one to two year period of Honours provides the chronological and pedagogical space for this nurturing relationship to develop.

I have had a very supportive supervisor … I feel that’s something that’s really helped. She’s given me guidelines of what I should have done by this point and I really appreciate that sort of guidance. (Holly)

The Honours experience enables students to become immersed in research, and students can come to a “state of self-criticality” through research (Barnett, 2007, p. 126). A research supervisor who nurtures an Honours student will help her to develop a spirit of enquiry and a critical perspective.

My meetings have really inspired me to get thinking about different areas. (Jess)

Students at this early stage of Honours are learning how to work within this supervisory relationship, and are developing the negotiation skills necessary to ensure a productive partnership. Honours students will establish different ways of working, and this may depend on the availability of their supervisors and the degree to which the student is self-directed.

I have requested with my supervisors that we meet on a weekly basis because I know that’ll keep me doing the work every week … at least for the first semester to keep me on track. (Cassie)

I don’t involve the supervisors if I don’t have to because they’re both very busy people … so you can always ask each other [Honours peers] some things instead of involving the supervisor all the time. (Nicola)

By the mid stage of Honours the students had gained much more experience of working with their research supervisors, and their perspective had shifted with time. This led to the discussion of both positive and negative aspects of the partnership, depending on how this working relationship had developed. Student-supervisor relationships in which there was a match of expectations and good communication, were understandably perceived in the most positive light.
A few of the students are envious of the relationship with my supervisor, I’m very lucky to have such a great relationship with her. She gives me guidelines in terms of when I should have little bits of work done, so that’s really helpful. She’s not telling me what to do … she’s obviously making me think about it and then she gives me guidelines when to have it done by. (Holly)

It’s been nice having Tomas saying when can you meet. He wouldn’t give me deadlines because I’m tough on myself and I would want to get it done. It’s been really fun and I’m learning a whole heap of other things I hadn’t expected to along the way. I never felt when I did something that it was a waste of time. (Ellie)

Good communication between a student and research supervisor facilitates a shared understanding of the student’s experience.

They know exactly what you’re doing and what you’re going through. When you come in and meet supervisors they can bring up things that you’ve never even thought of … that’s really good, just having other opinions. (Sarah)

However, Cassie’s experience exemplifies the worst possible scenario in the Honours supervisory relationship. The mismatch of expectations and the repressed communication led to a great degree of stress:

I don’t know what I was expecting. I think I expected to be babied a little bit more by my supervisors in the first year of Honours … I expected a lot more guidance. I had a meeting with them last week to ask how this was all meant to work and they just said it’s up to me … I’ve got to organise everything. It probably would have been helpful to be clear right from the start as to what this supervisor-student relationship would be like and we just never had that. I’m obviously not incredibly good at communicating with them or else I wouldn’t feel how I do. I find it hard to communicate what I feel without being made to feel an absolute idiot. (Cassie)

Schweinsberg and McManus (2006) highlight the inexperience of Honours students, and Barnett (2007) explains that nurturing requires an enduring commitment (Barnett, 2007, p. 128; Schweinsberg & McManus, 2006, p. 58). Very careful attention needs to be paid to the expectations of both the Honours student and the research supervisor in
this potentially complex relationship. In comparative literature exploring the experience of Environmental Science Honours students, reference is made only to the influence of positive supervisory practice (Allan, 2011, p. 428). In contrast, research into the experience of Nursing students undertaking a coursework Masters program revealed that although graduates were generally satisfied with the quality of research supervision, this was to a lesser extent than other elements of their research experience (Drennan & Clarke, 2009, p. 492). Issues highlighted for concern included “provision of information from the supervisor” and “advice received from supervisors on topic selection and refinement” (Drennan & Clarke, 2009, p. 495).

Within a healthy supervisory relationship, an Honours student should become empowered to take responsibility for their progress. Jess illustrates her changing perception as she progressed through Honours:

> When I first started they were these big scary lecturers and I didn’t really know anything. I think I view them differently now because I know more about them and you can have a chat with them before you talk about your Honours project … it’s a nicer relationship with them. I’ve learnt a lot about interacting with people like my supervisors and how to get things … like if I need feedback by this day, how to approach them about it. I’ve learnt that through learning more about them that’s OK to do that. Sometimes they need that in order to organise their lives as well. (Jess)

> At the start of the project I used to just focus on the support of my supervisor, but now it’s shifting a bit … I am relying on it less. At the start I needed to email query a lot of things and now I get the sense that I can pull myself away a bit from that, that I’m not having to run to them so much. You don’t want to hassle them too much, they’ve got other commitments … .it’s not just this project they’re working on with you. (Rachel)

The relative intimacy of the supervisory relationship does permit the development of new relationships with academic staff, whom the students have known previously only as lecturers and tutors. Barnett (2004) proposes that open relationships between teacher and those taught are essential, if students are to be able to cope with the uncertainty of being (p. 258). These new insights herald not only a new perspective of
academic staff as colleagues, but also allude to the inclusion of the Honours student in a new community of practice. Insight into this research community of practice allows the students to more clearly conceive the complexity of academic life. This mutual understanding enhances the trust between student and supervisor, and this is an essential element particularly in extreme circumstances, such as when a student is considering withdrawal from Honours. Maria had received a severe blow to her confidence with negative feedback on her literature review, and was seriously considering the possibility of discontinuing. Her supervisor was critical in providing the support she needed to continue:

Dee is the one that’s actually kept me going when I thought I was going to quit. She said what I needed to hear at the time and what was going to keep me motivated. (Maria)

A research supervisor has a vital role in caring for a student’s self-belief, to ensure that they have the will to continue with their Honours research. Good research supervision, in addition to sound infrastructural support and intellectual motivation, have been cited as strong predictors of outcomes for Masters research students (Drennan & Clarke, 2009, p. 496). However, not all Honours students require or want such a close relationship with their supervisor.

Although they’ve guided me in the right direction and helped me along the way when I needed them, I do like the fact that they’ve actually stood back a little bit as well and actually let me do it myself. Because it’s my own work … they’ve actually given me that space and freedom to do it myself. (Nicola)

I suppose I’ve been left to my own devices for a bit, so I’ve been doing a lot of the work myself. Having supervisors on your back can sometimes be a nice thing … a bit more guiding, showing you what to do and helping you like that. I don’t know whether it was spurred on by my supervisor saying go out and do this and let me know if you have any problems. That’s kinda led me to thinking I need to do this myself … it’s my Honours. (Lauren)

Communication within this supervisory relationship is fundamental to its success, and the ease with which this communication was established was impaired for some of the
students. Emma had experienced great difficulty in getting feedback from her supervisors and this was impacting negatively on her time management:

The hardest bit’s probably been juggling with supervisors. They haven’t been very good about doing things when they said they were going to. So I’ve managed to be quite organised in when I’ve handed things in, but then they haven’t been organised for handing things back. I can’t get things done in advance because getting feedback at 10pm the night before or not getting any feedback, is not really helpful. (Emma)

The fact that her supervisors were also her senior lecturers meant that she felt very inhibited in raising this issue for discussion.

I’ve discussed it with the other Honours students but none of us can possibly imagine actually bringing it up. It’s just very difficult to … I wouldn’t be at all comfortable having that kind of conversation with them. (Emma)

It is important to reflect on the fact that relationships between Honours students and supervisors are complex, and the course of their development varies markedly over the duration of Honours. Whilst one student may reside comfortably within several communities of practice, another student may find it very difficult to reconcile this new relationship with her lecturers. In such instances, a student is very likely to seek support from peers within the Honours community of practice. Cassie had tried to cope with her challenging supervisory relationship by using this support network:

I’ve talked to another couple of students and I like the way their supervisor works and I’ve asked that when he writes an email telling them to start this, that they actually send that email on to me. (Cassie)

Honours students will do whatever they need to in order to try and succeed. As their Honours peers are the people most likely to understand their experience, this support network is fundamental to the students’ ability to cope with this challenging experience.

A lot of the structure and what I ended up putting in the literature review came from what their supervisors had told them, rather than what my supervisors told me. (Emma)
A sense of the students becoming independent is apparent, with this transition from dependency on the supervisor to provide structure and guidance, to a student who has a growing awareness of her capabilities and increasing self-reliance. Developing positive and productive relationships with academic staff as research supervisors is pivotal to the Honours experience. This relationship provides students with an entrée into the research community of practice.

5.1.3 Research Community of Practice

The development of academic communities of practice where both students and academics engage as legitimate peripheral participants, cannot take place without the relationships between students and their teachers changing. (Brew, 2003, p. 15)

Because they feel like they know you a bit better they’ll talk to you a bit more. It’s definitely changed the dynamics … different dynamics of the student-teacher relationship I guess. (Nicola)

It is clear that the Honours experience facilitates the development of new relationships, not only between the students and academic staff working as research supervisors, but also between the Honours students themselves. The research community for some of the students comprised their Honours peers and their research supervisors.

I definitely did feel part of the research community especially at uni with all the other Honours students … all the Honours students in Allied Health. Even though we were doing completely different topics it was just good to be able to talk to each other about what we’re up to and what we’re struggling with and getting ideas from each other as well. Towards the end it was more just like a relationship with the supervisors mostly. (Sarah)

Unsurprisingly, the Honours students undertaking research within an established research team had a heightened awareness of a larger research community, much earlier than their peers working on independent projects. The research community for these Allied Health students may be internal, within the Allied Health discipline or school, or could be external to the institution.
The idea of being part of something bigger … I’m the smallest part of it, but it’s pretty exciting to say I was in the making of that and changing things. (Ellie)

I did feel part of a research community when I was with my supervisors at the institute where I did most of my data analysis. When I was there I’d go with them to have lunch and talk about research as well as normal professional things. It was a project I was doing which was in a similar vein to other people’s … a bit smaller, but it opened up that kind of world to me. (Lauren)

Peripheral participation can open up a practice to new generations, but to do so it must provide access to Wenger’s (1998) three dimensions of practice: “to mutual engagement with other members, to their actions and their negotiation of the enterprise, and to the repertoire in use” (p. 100). Walker, Golde, Jones, Bueschel and Hutchings (2008) characterise the doctoral intellectual community as: having a shared purpose; being diverse and multigenerational; being flexible and forgiving; being respectful and generous (p. 120). Learning through engagement with a community of practice is dependent on the student having the opportunity to contribute actively to the practices of the community which they value, and which values them as novice practitioner-researchers (Wenger, 1998, p. 227). Integration into a research community of practice is an important element of Honours. It can enable students to see more clearly the contribution that they can make, and may serve to expand their horizons in terms of future research. Close parallels can be drawn with doctoral students for whom “intellectual community is the most important facet of any doctoral community” (Walker, et al., 2008, p. 120).

Being an Honours student facilitates a sense of engagement with other researchers, and illustrates the differentiation between Honours and non-Honours students.

I did feel part of a research community in that feeling of difference between you and the other [non-Honours] students in that you’re invited to the research fest and things like that. But I don’t want to make myself appear any more different than I already am, so I think it’s my choice not to feel overly involved in that community at the moment. I think it
set me up nicely with relationships with supervisors to be able to become involved in future years if I want to keep researching. (Jess)

Wenger (1998) explains that newcomers to a community of practice are on an inbound trajectory. Non-participation is considered as enabling and an opportunity for learning, because full participation may not be a goal for that individual to start with (p. 166).

You get the sense that you’re sort of welcomed into their environment … they all have research backgrounds so they all provide a bit of guidance in different ways. You feel sort of involved in their circle, being part of that which is nice. In fact that’s probably been one of the biggest highlights of this year … it’s nice … you feel like you’ve got a connection there. I think other students wouldn’t understand that … not having done much research. (Rachel)

‘Legitimate peripheral participation’ is the term used to characterise the process by which Rachel created relationships with the academic staff, in order to become included in their research community of practice (Wenger, 1998, p. 100). This sense of belonging is echoed by research students in other disciplines. Both Geography and English undergraduate students reported enjoyment of collegial research and a sense of belonging to a research community (Robertson & Blackler, 2006, p. 225). Learning within a community of practice was also highlighted as one of the major themes for undergraduate students involved in an undergraduate research scholarship scheme. Students commented on the benefits of being embraced by departmental research cultures and the value of working with more experienced researchers (Blackmore & Cousin, 2003, pp. 24-25). This realisation of teamwork in research is a valuable experience for Honours students, extending their horizons and facilitating their learning.

I never knew how to read a paper. Just watching Tomas who’s completed a PhD and sitting there with him and learning from him … this is how you look through a paper, this is what you pick out. (Ellie)

Balster et al (2010) evaluated the experience of undergraduate students participating in an ‘Entering Research’ course, and noted the importance of this community “where beginning researchers can safely share their experiences and begin to identify
themselves as members of the research community” (p. 117). For students working as part of a research team, the research community of practice is evident from the early stage of Honours. However, many of these Honours students develop independent research studies, collaborating with only one or two research supervisors. In these instances it is possible that the student may feel much more peripheral to the research community. This lack of integration has been noted for Nursing Masters students working on individual, rather than team-based projects (Drennan & Clarke, 2009, p. 494). The sense of not yet being part of a more far-reaching research community was an interesting perspective voiced by one of the Honours students:

I don’t know if I necessarily feel part of a greater research community outside of La Trobe. With the Honours students and the group of supervisors I felt accepted and included and that they respected my work. However because my article hasn’t been published yet I don’t feel part of that greater paediatric research community I suppose, because no-one really knows of my work. (Holly)

This issue of legitimacy is relevant for newcomers to a community of practice. It may be that with help from her research supervisors in the preparation of a journal publication, Holly will gain entry into this community of scholars (Wenger, 1998, p. 101).

It is relevant to consider that the changing relationships for these Honours students are not restricted to those with their research supervisors and Honours peers. Other academic staff members within the research community of practice can also have an important role to play in making the Honours students feel welcomed into, and accepted by, this community.

5.1.4 Relationships with Academic Staff

This element of the students’ experience of Honours was most relevant to the students from La Trobe University, where the number of Honours students is greater and the size of Allied Health student cohorts much larger, than at Charles Sturt University. Being one of a relatively small group of Honours students within a specific discipline inevitably makes them more visible to staff within that team.
I was like ‘oh I didn’t know you knew my name’. Because all of a sudden you’re not one of eighty any more, you’re someone who’s up here a lot more often and that’s a bit different. But I’m enjoying that a lot. (Ellie)

Another thing I’ve noticed in terms of the relationship with staff in podiatry is you definitely do get close with them and you get to know them on a different level. So I suppose the perception from them is quite different as well … and they talk to you on a different level. It might not just be about research or uni … they may even express their frustration when they were undergoing their studies and what they learnt from it. So that’s good … a personal and professional level. I feel by being part of this Honours stream as if they look at me on a different level. You know even more of an academic and professional level, so I feel like I’m part of that circle they have formed. (Rachel)

This feeling of belonging is a very important one to nurture, if there is a serious intention to encourage students back to the institution to undertake higher degrees.

I would be more than happy if I did go on to do a PhD to work with the people here at the faculty. They’re all very passionate and they put a lot of emphasis on the importance of research and I think that’s a good thing … going back to the development of the profession. (Ellie)

Allen (2011) also reported on the role of other staff within the School of Environmental Science, and noted that the experience of the Honours students varied. These students had elected to return to full-time Honours study after completing an undergraduate degree. Whilst relationships with other staff members were often supportive, some of the students had experienced negative encounters, with elements of criticism and competition reported (p. 429).

The Allied Health students are required to negotiate several communities of practice, which adds to the complexity of their Honours experience. Primarily they are members of the undergraduate community of students and more specifically, the relevant community of Allied Health students, depending on their profession. Enrolling in Honours opens up the Honours community of practice, and through their Honours research they may participate in a research community of practice. Changing
relationships are implicit as the students engage with these different communities. However, their sense of belonging will necessarily be influenced by many factors, such as the student’s personal desire for inclusion in the community and prevailing professional and institutional cultures.

A clearer understanding of Honours, increased confidence in their ability to undertake research, and a sense of their place in the various communities of practice, will gradually change the individual student’s ‘being’. A student’s being evolves through immersion in experiences, “her life, her relationship to the world, has changed” (Barnett, 2007, pp. 76-77).

5.2 Self-actualisation

5.2.1 Self-belief

An individual student’s experience is not only about being an Honours student, with all the complexity and uncertainty which that entails, but also about becoming. Honours students become increasingly self-knowing, and grow in confidence as they develop new perspectives about their being and their practice. This new understanding is self-actualisation.

Self-belief gives rise to a student’s dispositions and it is fundamental to a drive to achieve (Barnett, 2007, p. 110). Self-belief is essential if a student is to accept the challenge of Honours in the first instance, and is then to cope with the additional workload in order to complete their Honours research. As Honours students in Allied Health are not necessarily students who have achieved the highest grade point average, they may still harbour doubts about their academic ability.

I think I need to believe in myself a little bit more. When I look at everything I have to do I go ‘oh I could never do that’, but it always gets done and I’m happy with what I’ve written so far. (Jess)

The experience of Honours affords students with an opportunity which can invigorate their sense of self-belief and enable self-learning.
It’s probably helping me build confidence in terms of my own ability to write and be independent. It’s forcing me to really step up and be very independent and very motivated and that’s what I will need to be like when I graduate and actually work as an Allied Health professional. (Cassie)

I think it’s enabled me to build up confidence in myself … sometimes even trust my intuition and go with it and not wait to hear a response from someone else. (Rachel)

Balster et al (2010) demonstrated that “students who participated in mentored research have significant gains in their skills, knowledge and confidence” (p. 113). These gains were self-reported by undergraduate students in relation to their research activity. Therefore, the Honours experience can help to develop a student’s confidence in terms of practical attributes such as writing and research skills, but this perspective on confidence is rather narrow. Learning to work with Honours peers, research supervisors, and other staff within the research community, can also develop a student’s confidence in their communication and negotiation skills. Greater confidence in research engagement was also elucidated by research into the experience of undergraduate Science students undertaking summer research programs (Seymour, et al., 2004, p. 508). Perhaps most importantly the experience of Honours can enhance a student’s self-confidence, enabling them to develop a progressive degree of independence in their Honours research. As students gain knowledge through Honours, their ‘being’ is undergoing transformation. The experience of Honours enables a student to develop an authentic understanding of research as preparation for becoming a practitioner-researcher and “so there is this extraordinary and intimate relationship between knowing and becoming” (Barnett, 2009, p. 435).

Enhanced self-confidence may also impact positively on other areas of the student’s life.

Like a domino positive effect. At work, like my part time job, I’ve started to say what I think and maybe we can do this and that’s been heard … that’s a really good idea. I’ve never had the confidence to say it … so in that way it’s been positive. (Ellie)
Self-confidence is also apparent in the students’ ability to keep Honours in perspective, and to take control in order to maintain balance in their life.

I’ve learnt a lot about myself … I’ve learnt that I can actually cope under really stressful situations. Honours has definitely helped me just being able to balance my life. So I can still do all the things I want to do because there’s a lot more than study in your life. You’ve got to balance all those things. (Nicola)

Making sure that I still keep a balance in my life and not let Honours take over, because I think that would make everything pretty stressful if I did. (Holly)

It is apparent that Honours enables a change of ‘being’. As Allied Health professionals, these students were most likely to envisage this change in terms of their clinical practice.

5.2.2 Honours as an Enabling Experience

The enabling influence of Honours on the students' clinical practice, reinforces the intimate relationship between professional practice and Honours research for these Allied Health students. An improvement in communication skills, and an enhanced confidence in liaising with professional colleagues, was relevant to most of the Honours students as their research had a strong clinical focus.

With Honours I’ve had to meet a lot of different health professionals and I think the way I portray myself is a lot more professional. So Honours has enabled me to learn how to be I guess … appropriate and professional. (Nicola)

It’s enabled me to become more confident, talking to people in a more professional way. Just sending professional emails and organising meetings and talking to people on the phone. You don’t really have that much of an opportunity to do that in the undergraduate course and this has kind of accelerated all of that. Given me skills, I suppose thrown me in the deep end … but that’s a good thing. (Lauren)

Through the challenge of Honours the students grow in confidence, developing skills which enhance professional practice and enable new perspectives. Skillful practice is
achieved however not merely with the acquisition of skills and knowledge, but through a transformation of self (Dall'Alba, 2009b, p. 41). The experience of doctoral students highlights some aspects as critical to self-transformation through education: “seeking to understand the perspectives of others, reflexivity, and realising differences in the nature of professional practice” (Wood, 2006, p. 64).

I feel a bit more open-minded about everything. I think I’ve been trying to think more outside the square … more holistically … which Honours makes you do because there are a lot of factors you don’t think about. (Sarah)

I think it’s opened me up to so much more. By taking on Honours and the opportunity my confidence is a lot greater, in other parts of my life as well. You can actually do what you want in life apparently … that’s what I’m learning. (Ellie)

This sense of blossoming self-belief evokes reflection on the value of Honours for these Allied Health students. Kiley, Nursoo et al (2009) state the valued aspects of Honours as: “advanced disciplinary knowledge, research training and a substantial independent research thesis/project” (p. 6). However, the experience of Honours is much more complex and the value of Honours to the individual student is evident throughout these three chapters.

5.3 Becoming a Practitioner-Researcher

5.3.1 Contributing to Professional Knowledge

I just think that you’re in this profession for the next I don’t know how many years and it’s your life and that’s what you do and I think contributing to it is important, especially in our field because there isn’t a lot of research into a lot of things we do. So if most people did it [Honours] then we would have more research in areas and we would have different interventions for things. It’s also my own thing as well … like it further improves you as an Allied Health professional. (Sarah)

This quote illustrates a commitment to the development of professional knowledge through Honours, and suggests that knowledge generation is intrinsic to professional development. This is a vital perception particularly for an undergraduate student, as
Allied Health professionals are required to: select and utilise knowledge, to modify existing knowledge, and to create knowledge in the practice setting through reflection on practice (Higgs, et al., 2004, pp. 90-91).

I feel like I’m contributing towards the current literature and also maybe podiatric care for this population group. If your Honours research gets published in a reputable journal, definitely I think it’s a valuable source of literature. (Nicola)

Through Honours research a student is able to make a small contribution to practice knowledge, and several of the students could see that their potential contribution may extend beyond their own professional field.

There is so much information about the sort of injuries that are occurring and the incidence, but not about why they are occurring. I think that if GPs, physios, everyone who works with these young people had a better understanding of why they’re occurring, we could prevent them in the long run. (Jess)

Consistent with the philosophy of care in Allied Health, these Honours students are motivated by wanting to help others through their research and practice.

Compiling the evidence, doing the actual research project and [writing] the research study which people across the world will be able to look at. Helping improve the way that stroke rehabilitation is undertaken or people’s knowledge about it, so that further developments can occur. I suppose that’s the whole point of me doing it … to make a contribution to someone outside of myself as well. (Lauren)

Honours may be viewed as an opportunity for self-development, comprising the potential to make a difference to professional practice through knowledge generation. Honours therefore sits very comfortably within the context of contemporary views on professional education, as it enables “an integration of knowing, acting and being” (Dall’Alba, 2009a, p. 50). A couple of the students were more restrained about their personal capacity to make a contribution to professional knowledge through Honours.

Well it’s a little bit hard to see how it’s really going to be that useful for anybody else, because it’s such a small project. (Emma)
I know that in an Honours degree you’re not doing any ground-breaking research … it is something quite small. But someone else might want to take the project and continue further research on it. I might take it on at a PhD level and expand it out. (Rachel)

The Honours experience is viewed as a foundation for future research by these Allied Health students. Consequently, even if a student considers their Honours research to be ‘small-scale’, it may well provide the platform from which they can progress to a higher degree. Viewing Honours as research preparation is certainly facilitated when students feel included as part of a research community.

It’s exciting to be part of that … I’ve seen in a small profession how you can contribute and I think that’s a big thing. It’s an honour to be able to say that you can contribute to the development of this. You’re not just an insignificant piece. I’m the smallest part of it, but it’s pretty exciting to say I was in the making of that and changing things. (Ellie)

The potential for making a contribution to professional knowledge is a prominent motivating factor for Allied Health students contemplating Honours study, and “research about practice is a vital way of exploring practice knowledge” (Higgs, et al., 2004, p. 104). The Honours experience enables this exploration for Allied Health students who seek a challenge and a different way of learning. A desired outcome of Honours is that the students will be predisposed to incorporate research into their future clinical practice, or will engage actively in research as a practitioner-researcher or academic.

Cusick (2000) investigated practitioner-researchers in occupational therapy and suggested that a predisposition to research was influenced strongly by university undergraduate project work, and relationships formed with research supervisors (p. 16). It has also been noted that medical students who have a positive research experience are more likely to engage in research or academic medicine as postgraduates (Solomon, et al., 2003, p. 153). The Honours experience enables students to learn about practice through research, but students should also develop a sense of how they learn. Practitioners with this insight are the ones who will continue to grow and develop throughout their careers (Walker, et al., 2008, p. 85).
I have focused previously on the potential of Honours to transform the self, and this is relevant when conceptualising the ‘becoming’ of Honours students as practitioner-researchers. However, the focus of the individual students is much more pragmatic, as their attention is directed primarily towards the development of research skills and issues related to academic writing.

### 5.3.2 Research Skills

The development of research skills through engagement with undergraduate research is well documented in the literature, for a broad range of students in diverse settings. Undergraduate medical students undertaking a one year Bachelor of Medical Science, cited a “greater understanding of research methods” (Eaton & Thong, 1985, p. 449) as the first item in a list of benefits gained from the research experience. Similarly, Nursing students engaged in a coursework Masters degree identified the development of research skills as “the area of greatest impact and outcome as a consequence of completing a research dissertation” (Drennan & Clarke, 2009, p. 489). Specifically, this group of Nursing students identified skills in problem-solving, data analysis, planning and writing (Drennan & Clarke, 2009, p. 492). Lopatto (2004) surveyed 1135 undergraduate students across a broad range of Science courses and identified that their research experience enabled gains in areas such as: “understanding of the research process, learning to work independently, skill in the interpretation of results and ability to analyse data” (p. 273). Research comparing three groups of alumni reported significant differences for “science, math, logic and problem solving” (Bauer & Bennett, 2003, p. 221). The alumni group with previous research experience, rated their research skills more highly than the groups who had not engaged in the undergraduate research program.

When asked what they had learned from the experience of Honours, the Allied Health students invariably mentioned research skills. I have differentiated research skills in general from writing skills, as the topic of writing for research warrants separate consideration.
One of the best things about Honours is that it’s made me appreciate research and my understanding of it has improved so much. (Emma)

My critical analysis of things has improved. (Sarah)

Able to analyse the literature and being more critical of what other people have researched. (Jess)

Students inevitably become more proficient in literature searching and the use of databases as they progress through Honours, but the way in which they interpret this literature is also more informed. It was evident to some of these students that the way they researched a topic, or sought evidence to support practice, was different to their non-Honours peers.

We had to do this presentation where two of my group were Honours students and the way we worked it out was very different to how the other [non-Honours] members of my group thought about doing it. The [literature] search we did was so much more extensive and it didn’t seem odd to us to go through and read all the articles, whereas it kinda did for the other students. (Emma)

It was natural for me to want to look up evidence to apply it to my practice, whereas for some of the other students that didn’t come quite so naturally for them … it’s more they had to be prompted to do it. I’ve learnt a multitude of research skills that will be really valuable for when I go out into the clinical setting. (Holly)

Students often linked the development of these research skills with application to current and future clinical practice, with an emphasis on enabling evidence based practice.

A better understanding of how to analyse research so that you can make sure that you’re following evidence based practice. Hopefully I’ll be better at wading through all of the evidence and articles, to really work out which articles are worth following. (Emma)

This relationship between research skill development and application of research to professional practice, was also noted for Masters Nursing students (Drennan & Clarke,
This integration of research into clinical practice through the experience of Honours, is extremely relevant when considering the application of evidence based practice. Upton and Upton (2006) explain that the relatively low level of engagement with evidence based practice, for some groups of Allied Health and Health Science professionals, might be explained by the absence of research experience in the practitioners’ initial professional education (p. 132).

I’ve learnt a lot more research skills, how to find information … all the background information I can find a lot easier. I think the skills are really good to know if you’re a physio because there’s not enough evidence [for practice] … and it’s better to do something if you know why you’re doing it. (Lauren)

Database searching is not only going to help me with my project but when I’m a podiatrist, helping me access all the current literature and keeping up to date. I think that the skills I’m getting now will help me later on so that I can continue to always develop and go beyond everything I know now. (Ellie)

A clearer insight into the research process, and an enhanced understanding of methodology and data analysis, will enable these Honours students to make better use of the available literature to inform clinical practice

I could actually understand it at the end of it … it wasn’t just all numbers. I suppose it’s like anything, when there’s nothing of interest in that area it doesn’t grab you … what’s the point of knowing that. But once I could put it into context I can appreciate it a bit more. (Ellie)

If I work in the public sector I think that statistics plays a big part in that, so Honours has enabled me to develop those skills. I think actually it’s probably one of the biggest part of the Honours year, even if you don’t go on to pursue further research. You’ve got basic skills, those basic research skills, which are important in clinical practice. (Rachel)

Honours research and clinical practice is intimately intertwined for these students, and the potential to make a contribution to professional knowledge imbues their entire Honours experience. Through the development of a range of research skills, Honours
provides a strong foundation to enable these novice practitioners to contribute to professional research, and to be active in the future generation of practice knowledge. The development of research skills includes writing for research, and this was an issue discussed frequently by the Honours students.

5.3.3 Writing for Research

It’s a very different style of writing to what you would do or to what we have done so far in other subjects and I’ve really enjoyed that, just learning how to write differently. (Sarah)

A very different approach to previous years or previous case studies that I’ve done … yeah definitely the way you write is different and I’ve had to learn that. (Rachel)

This ‘difference’ in writing for Honours was an obvious issue for these students. Without exception, they considered that one of the biggest challenges for them in Honours was learning how to write for research. Some of the students viewed Honours as a mechanism by which they could focus on their writing skills, and further develop their academic writing through the close supervisory relationship. This motivating factor did not however, minimise the challenge.

Because it is different. I haven’t written a thesis before so that’s a challenging aspect and all the parts and components that make it up … it’s all different to what I’ve done before. Whereas other subjects, yes some of the content may be different and I’m learning new stuff, but it’s more related to material that I’ve learnt before and I suppose it’s not as challenging. Honour’s is a whole new different area. (Lauren)

What it is specifically that each Honours student needs to learn about writing, depends on their individual writing style and the research study they are undertaking. Ellie had to learn “how to be more concise because I was more of an artistic writer”, whereas Nicola had learnt “a new way to write, sort of going from more factual to more story-telling, with those things incorporated into it”. At the early stage of Honours the students are certainly challenged by writing, but this challenge consistently persists for the duration of Honours. The students gradually gain increasing confidence in their writing skills, and this is a vital area of focus for the research supervisors.
I think my writing is improving … it’s still not where I’d like it to be but it’s getting there. I’m learning how to justify why I’m writing what I’m writing and the structure of it. So being able to synthesise all the feedback that I get from my supervisors especially since there’s two points of view and I have to work out which one will be better to go with … which way I’m going to go. (Jess)

This illustrates the important dynamic between the Honours student and the research supervisor, through which the supervisor facilitates the student’s insight into not only the content of their writing but also the meaning of that writing. Honours students are therefore developing critical skills in order to justify the direction their writing takes. Tan (2007) iterates the importance of regular supervisory meetings to review and refine an undergraduate student’s writing (p. 211). In the absence of a secure supervisory relationship in which these discussions can take place, the student is likely to flounder.

I’m building my confidence with writing, just increasing my ability to articulate things better. If I had a better support system where I was talking to someone about the justification of my research and how it’s going to contribute to the profession. If I was actually made to articulate that in words, I’d probably do a lot better in writing them down. But I don’t just sit at home talking to myself unfortunately. (Cassie)

Honours is very likely to be the first time that these students have had the benefit of close scrutiny of their writing. This in itself presents a challenge particularly if, as Jess suggests, there is different feedback from more than one supervisor. In addition to negotiating their needs, the students also have to learn to cope with critical review of their early writing. As the students are still developing confidence in their writing skills, this close scrutiny of their written work can be rather stressful.

You get the paper and there’s red just all over it. When you go through it and actually work through the comments you don’t have to change that much … but just listening to them going ‘yeah you need to do a lot more work’ … that gets me a bit down. (Jess)

I handed in the second draft of my literature review and it was absolutely ripped apart. Like getting used to that … that kind of feedback and criticisms that you need to take.
But you know taking that and not going ‘oh my gosh I don’t know what I’m doing, I’m really bad at this’, but going it’s OK I am getting help you know, to turn it around. (Ellie)

I’d handed in several drafts and my supervisors would go through and say keep that, change that, do that and I was feeling am I ever going to get this right ... is it any good? I had to understand that it’s not a criticism … it’s not wrong it’s just they’re trying to give you ideas to make it better. (Nicola)

This is one of the times when students may well seek support from their Honours peers, to gain comfort in the fact that they are not alone in this experience.

I had several conversations with a few of the girls doing Honours. You know I got my thesis back and got red marker all over it again … oh yeah I know mine too, mine too. We just sort of talk about it … our frustrations and things like that. One of the girls gave me a bit of support and vice versa. (Nicola)

Allen (2011) echoes these issues very closely when discussing the experience of Environmental Science Honours students. The challenges of writing for research and coping with critical supervisory feedback are evident for students undertaking ‘end-on year’ Honours, just as much as they are for these Allied Health Honours students (p. 426). Ninety-one percent of part-time undergraduate Nursing students indicated that academic writing was a source of moderate stress, with students uncertain about the level required (Nicholl & Timmins, 2004, p. 96). Despite the Honours students finding the writing very challenging, they did realise that writing for Honours had improved their skill level.

I’ve really enjoyed just learning how to write differently and I think I’ve benefitted from it as well, because Honours is a lot more writing than most other subjects. So doing a lot more writing I think has helped. (Sarah)

I was saying about the projects for placements … I was finding it a lot easier to write the projects out in comparison to other students. (Holly)

With increasing experience of Honours and enhanced self-confidence, students are able to appreciate an improvement in their writing skills, which may in turn benefit other
areas of their study. The ability to write effectively was ranked fifth in a list of thirty two skills and abilities enhanced through undergraduate research, by Science alumni (Bauer & Bennett, 2003, p. 222). However, in marked contrast, ‘skill in science writing’ is the penultimate item in a list of undergraduate research gains, for students across a broad range of science disciplines (Lopatto, 2004, p. 273).

Writing for research is not purely a skill which the Honours student acquires but is, more fundamentally, the means by which they convey a sense of their understanding of research to the reader. As a student develops confidence in their writing their being is gradually transformed, and so too their relationships with others. “The person who learns to ‘really’ write, gains the experience of being in touch with something” (Van Manen, 2005, p. 245).

I was a little bit skeptical … I had heard that other Honours students had said it improves your writing skills so much … I don’t know if it will alter me that much. But I have to eat my words because I have found that’s the case since I’ve started. (Holly)

The development of research and writing skills through the experience of Honours is explicit, but perhaps less obvious is the creation of personal knowledge.

5.3.4 Extending Personal Knowledge

The desire to extend their knowledge about a specific topic is an important motivation for Honours students to undertake research. The specific interest of individual students may arise from clinical practice, or may be inspired by the student’s personal, family, or social connections. The spectrum of research interests for this group of Allied Health Honours students is broad ranging and includes: netball and dance-related injury; children with disability; end-stage renal disease; vascular assessment; stroke; play and creativity; and diagnostic investigation of arthropathy. Hence the time afforded for prolonged study is made available through Honours, to enable a broader and deeper understanding of an area of interest.

The opportunity to really immerse myself in a specific topic and develop a really good understanding of it, because as we go through uni you touch on so many topics and you
gain some understanding of things. But with Honours you get to really look at something over an extended period of time and really understand it. (Cassie)

I’ve been talking to other people and reading up on information about my topic and I suppose it just really interests me more than I expected. I keep reading about it and read something else and that’s really kinda grabbed me. (Sarah)

This sense of engagement is very important, because one of the reasons for students choosing Honours is their sense of frustration or boredom with the standard coursework. Students seek the challenge of Honours and the opportunity to study and learn in a different way. In considering the six conceptions of learning proposed by Marton et al (1993), it is apparent that the experience of learning through Honours is encapsulated by these conceptions: increasing one’s knowledge; memorising and reproducing; applying; understanding; seeing something in a different way; and changing as a person (pp. 283-284). As the students research an area of interest, they gain knowledge, their understanding of the topic is expanded, and they are able to begin to apply this knowledge to inform practice.

I’ll have a very good idea of what these children enjoy participating in and now I’m going to have a better understanding … when I’m wanting to prescribe exercises for example. (Holly)

If you’re looking at it from a holistic approach when you’re treating kids, it’s good to know what else is going on in their lives that they’ve got to deal with. (Emma)

In discussing the relationship between teaching and research, Brew (2003) states that “both learning and research are about making meaning” (p. 15). Through research the Honours students learn. New perspectives are enabled as a consequence of this learning and the student’s ‘being’ is changed. Just as the Occupational Therapy practitioner-researchers presented by Cusick (2000) are not merely practitioners who undertake research, so too are Honours students not just undergraduate students doing research.
It is the individual practitioner who identifies research as a valued object, who constructs the role in his or her life to attain it and who determines whether it was worthwhile. (Cusick, 2001, p. 15)

Research is integral to being a practitioner-researcher and it is apparent that the Honours students undergo a similar change.

It’s been really beneficial to see the research that I’m reading and to look at the population I’m researching and the same things are coming out. It’s giving me insight into where the research needs to be. (Jess)

So it’s not going to directly affect my practice but the aspect of research probably will, because I will keep on researching different areas. (Maria)

The experience of Honours will inform the student’s practice through the skills developed and knowledge gained. However as Barnett (2004) suggests “learning for an unknown future cannot be accomplished by the acquisition of either knowledge or skills” (p. 259). Learning experiences should afford the possibility of developing qualities in a student which “make authentic being possible” (ibid). Through the experience of Honours, qualities such as courage, carefulness, criticality and resilience are nurtured, within the relative safety of research communities of practice, in order to allow these Honours students to become novice practitioner-researchers.

Chapter 5 has illuminated the experiences of these Allied Health Honours students as they progress towards the mid stage of Honours, through an exploration of: ‘communities of practice’, ‘self-actualisation’ and ‘becoming a practitioner-researcher’. At this mid stage of Honours the students have developed a much clearer sense, not only of the Honours experience, but also of themselves as undergraduate student practitioners engaged in research. They express a growing awareness of the relevance of Honours to practice and the communities to which they belong. Their confidence in their ability to cope with Honours is also more evident. Chapter 6 continues this exploration of the students’ experience from the mid to late stage of Honours. Through their research projects the students develop new perspectives on practice, and reflect
on the relationship between research and practice. This relationship however is not a simple one, particularly in terms of the students' ideas about future employment. Their experience at this late stage of Honours is represented by these three major themes: 'new perspectives', 'practice-research nexus', and 'career decision making'. 
Chapter 6: Crafting the Vase

This chapter is informed primarily by discussions during the final interviews, but also incorporates items such as ‘relationship with clinical practice’ and ‘talking about Honours’, which were evident in the interview discussions throughout. At this stage, most of the students had submitted their dissertation prior to the final interview, and only three of the students were interviewed during the final few weeks prior to submission. The timing of this interview ensured that the students were able to view their experience of Honours with the benefit of hindsight, and in most cases, in the absence of any Honours-related stress.

As preparation for the final interview I provided the students with a copy of the vignette I had written during the mid stage of data collection. The purpose of this was to explore the authenticity of my interpretation of the students’ experience of Honours. The scope of the vignette is limited to certain elements of the students’ experience during the early and mid stages of Honours, and could not attempt to capture the Honours experience ‘in toto’. I suggested that the students read through the vignette a few times in advance of the interview, to reflect on the writing, and to make some notes about their responses to my interpretation of their Honours experience.

6.1. The Vignette

“OK that’s enough for today, we’ll pick up from here next time”. I hadn’t been aware that I wasn’t focused on the lecture but the tutor’s closing statement snaps my attention back to the crowded classroom. Loud outbursts of chatter erupt from groups of students around the room, suddenly reinvigorated by the prospect of a one hour break from classes. As students around me hastily collect up pens and papers, uncomfortable seats are quickly abandoned in exchange for the warm sunshine of the late spring morning.

I am more deliberate in my preparation to leave, taking care to file my papers carefully, in an attempt to impose some sense of order on my hectic life. The apparently carefree conversation of my departing friends as they catch up on the
weekend’s gossip, serves to accentuate the difference between us. I am an Honours student and have purposefully chosen to be differentiated from the majority of my peers. I have deliberately chosen a challenge to open myself to new opportunities, but often I feel burdened with the extra work and confused by this unstructured way of learning.

I pick my way carefully between the rows of seats, leaving the secure familiarity of the ordered lecture theatre where lecturers state clearly their expectations and requirements for the subject, and head rather reluctantly to my supervisor’s office. We have arranged to meet over the lunch break at 12pm and it’s 11.50am now, so I have a little time to recall what we agreed at our last meeting. As I wander along the comfortless concrete pathways of the campus, I’m aware again of the sense of unease I experience before these supervisory meetings. Promises I make to myself about better planning of my work and detailed schedules devised to keep me on track with Honours, do help to alleviate the anxiety, but promises to self are easily broken.

I reach the door of my supervisor’s office and am greeted by her knowing smile. She’s on the phone but motions for me to take a seat by her desk. Bookcases lining the walls are home to neat rows and odd piles of colourful textbooks and folders, and papers cover most of the desk in disorderly mounds. A picture on the wall and a family photo are personal imprints on this place of study. This academic world has gradually become more familiar to me and as Honours takes me further into this research community, I feel welcomed and secure here. The warmth of the sunshine filters through the window and I relax into the chair. My supervisor is still engaged in her phone conversation, apparently dealing with the problems of another student and I consider how I have come to know her. Our one to one meetings have given me insight into her world and her ways of working. She is no longer just another lecturer but a mentor, a guide in this uncharted territory of Honours. I am completely dependent on this relationship, but in turn it is my writing which allows us both to progress along the tortuous path.

“Sorry about that”, she says briskly and then adds more warmly “How are things going?” I reply perhaps rather unconvincingly, that things are going well and as
evidence to support this, produce a copy of my latest piece of writing. She had emailed it to me yesterday, complete with computerised annotations and comments inserted neatly in red text. At first I found it difficult not to be offended by these interjections, perceiving them as critical and a harsh judgment of my work. As I write more and my feelings of insecurity about my writing abate, I know that her critique will nurture my development as a researcher. This reciprocal process of writing and commenting seems to be the mark of our progress on this Honours journey. If I can’t find the time to write because other assignments are due, or if I simply don’t know what to do, there is nothing for her to add but motivation. She can be the cause of delay too, other work competing with my Honours work, for her time.

Her questions re-focus my drifting attention. There is so much else going on in my life but this 45 minute meeting is to discuss Honours, so I force myself to concentrate. “Why did you focus on this topic? What are you trying to express here?” Months ago these questions would have made me freeze, but now I’m able to explain what I intended, in a reasonably articulate fashion. In this space, cocooned by the artefacts of an academic world, my supervisor seduces me into a state of self-belief. As she draws the meeting to a close, we agree on a plan of work for the next two weeks. Her expectations are reasonable as she understands the numerous demands on my time. I write myself notes in the margin of my text, reminders of our discussion. They will serve to focus me and spur me on, when other commitments make it hard to remember why I chose to do Honours. I pick up my bag from the floor and noticing the carpet worn thin in places, imagine all the students who have walked this same path over the years. I push the papers into my bag and say goodbye. She smiles, urges me kindly to keep on working and then turns her attention to work she had previously set aside.

I walk briskly down the corridor and out into the bright sunshine. I only have 15 minutes of the break left now but it’s a small price to pay for the way I feel. Sharing the burden with my supervisor allows me to believe again that I can do this. I’m learning so much about practice and about myself and I know that I can
make a difference. Finding the time for Honours is difficult but when I do, I know that the challenge I’ve set myself is worth it.

The students’ responses to the vignette were fascinating and it was apparent that this piece of writing prompted reflection on elements of the Honours experience, which the student may have neglected to mention, or had forgotten completely. I have attempted to capture the essence of Honours through the use of the students’ individual quotations. In this way I can convey a more personal interpretation of each student’s experience. These quotations vividly portray their reactions to the vignette and provide evidence that most of the students gave me ‘the phenomenological nod’. Very lengthy pieces of narrative have however been edited, to improve the readability of the text.

It just brought back so many memories and honestly I felt like this was me. Like reading it felt exactly of the experience. Even the way like everything that the supervisor was doing … this was it you know! It was it … felt like I was walking in … listening … the phone call and then it was yeah. I just thought wow … this is what I was you know. (Rachel)

I found that my experience was quite similar. I found having Honours on top of other uni work gave you a hectic lifestyle … I didn't spend as much time with family and friends as I would have normally. At times I felt quite overwhelmed with the amount of work, then there was other times where I thought oh you know … it was up and down. I also felt uneasy going to meetings because I knew I hadn't done as much work as we agreed on, but I always felt very motivated after the meetings with supervisors and I was very comfortable with my supervisors as well. I think I was quite dependent on them and I found it really good to have face to face meetings. I was never offended by any of the remarks I was given, I was happy for advice. I thought that I needed all the help I could get so I was very happy to get comments. I always felt like when I was with my supervisors it was like I could do it, but sometimes when you’re at home you think oh no this is too hard. I'm still a little bit unsure if the experience was worth it all. I was very happy to hand it in and as the time goes on I feel more and more happy that I did it. (Sarah)
… especially the bit at the start being in the lecture theatre and all my friends you know
seeming to be carefree and I'm always thinking in my head oh I gotta do this and as I'm
sitting there I'm writing down notes. I've got to finish that part of my thesis or you know
these deadlines that I've put myself and I've got with my supervisors, so I could definitely
relate to that. And yeah just starting off with my supervisor and not knowing her very
well at all and then building that relationship with her and also the male supervisor I had
as well, building that relationship with him. I remember yeah she's on the phone to other
students and trying to organise placements for people and she's doing a PhD as well
and you're sort of sitting there going oh does she have time to even listen to what I've
got to say … all that sort of thing. Sitting there in the chair thinking oh am I ever going to
get this done and then you're going through draft after draft of the thesis. She started off
using red pen but then thought that was a bit mean, so she started using purple and
green too. I think it's quite an accurate sort of description of how you feel when you're
doing Honours. (Nicola)

I thought for most of it, it was very, very accurate of how my life has been except the big
difference … I thought the person sounded very isolated. It kind of sounded like they'd
segregated themselves a bit from the rest of their year and that hasn't really happened to
me, I still feel like I'm very much part of physio and just doing a different subject … it's
not really impacted. I certainly spent quite a bit of time thinking about my Honours in
other lectures and realising that I hadn't been paying attention to anything in class. And
I've certainly grown more comfortable with the supervisors and getting feedback,
because I got written 'so what' after one of my paragraphs and I was thinking that could
really be taken the wrong way. But you get used to it and realise that they're improving
what you're writing, so just take it constructively. Before I probably would have burst into
tears … I just would have assumed that they thought what I'd written was terrible, but
now I can see where they're coming from and I can see what they want me to do to fix it.
(Emma)

… it didn't match up with my Honours experience as such. I didn't feel very different
from other students in feeling that I was different doing Honours. I didn't generally feel
uneasy before meetings with my supervisor … usually meeting up with him to try and
sort it all out. It was probably more looking forward to it to get it all sorted out, than
actually feeling uneasy about it. My supervisor did motivate me but also left a lot of it up
to me. I didn't have so much guidance on what to write. I generally met up with my
supervisors outside of uni, so it wasn't really part of uni time for me as such. I'd still hang
out with my friends at lunch times and breaks and that kind of thing. It was more just
occasionally I might nip off and do some research, look up something, but I mainly did
that at home. It was stressful at times you know having to write something, or sitting at
the computer and words not coming, or not knowing how to write something. I felt it was
just part of what I was doing at uni and I didn't really treat it as being something special
and different. It was more just another subject, a bit different and it required a bit more,
but it wasn't a specific difference. (Lauren)

I suppose the student you were reflecting in the vignette seemed a bit stressed and they
were having trouble almost fitting Honours into their lifestyle, which for my experience
was never really an issue. I was always able to have a good balance in terms of my
other workload, placements, Honours and then my personal life as well, so in that
instance I never felt that I was overly stressed. I never had that feeling that my other
peers had carefree lifestyles compared to me and they had less worries than me.
Everyone has different aspects of their life that they have to worry about and I felt that
Honours was just one part of my life that I sometimes had to look at that they didn't, but
in terms of actually feeling differentiated from them, I didn't quite feel like that. The thing
that I did agree with was the very supportive nature of the supervisor. They do act as
mentors just to guide you through the process over the two years. Obviously
you are going to hit points where you're not quite sure what to do, or are having a bit of trouble
with what to write and they're always there. So I definitely agree with the fact that you get
that constant advice and supervision from them. I suppose that there are points where
you do lack motivation, but it wasn't the fact that the comments my supervisor had made
were the things that were pushing me. I suppose it was just my personal motivation in
wanting to do get things done and get things ready on time. So it wasn't necessarily after
I'd gone to see my supervisor that my motivation was improved. (Holly)

I thought that was funny how she talks about 'my life is more hectic than others'. I
actually appreciated that about Honours. It was a good balance for me but in terms of
comparison to my friend who didn't do Honours, they were a bit lost throughout the year
because they had no direction, whereas I still had due dates and things that needed to
be done. Talking about the supervisor and accessibility, making it easier and comforting.
I know Tomas was always willing to be there and that was very positive for me.
‘Completely dependent on their relationship’….that's true. The thought of doing that by yourself, writing anything without them saying yeah that's OK … just wouldn't even think of it. (Ellie)

… it was more the out of class study that I found difficult. Just to timetable it in and having the brain space to think about all this research and all these themes and everything and then having to shut that off to think about more theory based things. So it was not so much the attention at uni, but afterwards. I'd get home and I've got paper everywhere and my files are all out of order and it feels like your life is in chaos and you don't know what's going to happen or where you're heading with this project, so I think every now and then I had to make half an hour just to organise my files and clean my desk and put things into piles … that sort of settles the anxiety. That feeling of difference between Honours students and students in the regular stream. I think during assessment periods that gap seems to be a lot bigger, because they don't really understand what you're coping with as well as the normal study. It does sometimes feel like a burden especially when the research proposal is due and you have to do assignments and exams. But when I come out with this book of all my findings, it's definitely going to be worth all the hard work. Also, the sense of unease prior to the supervisory meetings … is my writing good enough or have I done enough work? I think it's just not knowing what to expect and what they're expecting of you. Even though you've discussed these things, it's just that underlying feeling that you're not going to be good enough I suppose. I think I've got a greater insight into the role of a researcher and what they do, the stresses they're under and also as a lecturer, having to deal with students and all their different problems as well. I think I have a greater insight and respect for them, having to deal with all of these things and also having to do their own research. And also the fact that our relationship is now closer, that we can talk about things that aren't just related to Honours. I think the main thing is that it'll be all worth it when it's finished … I definitely agree with that. (Jess)

Writing the vignette was very challenging as it had to convey an authentic student experience and evoke an emotional response in the reader. Hence, not only was the choice of words critical, but the context needed to resonate with the Allied Health Honours students. Distilling this ‘experience’ from the experiences of ten individual students required very careful consideration of the possible elements to include and
exclude. Affirmation of my portrayal of the students’ experience helped to confirm the validity of my interpretation of the experience of Honours. When the vignette was discordant with the individual student’s experience this enabled a deeper exploration of issues, and consequently enhanced my understanding of the phenomenon of Honours.

The following sections of this chapter are informed primarily by discussions during the final interviews, but also incorporate items such as ‘relationship with clinical practice’ and ‘talking about Honours’, which were evident in the interview discussions throughout. All of the eight items selected for inclusion in this chapter, featured in the final interview discussions of six or more of the nine participants.

<table>
<thead>
<tr>
<th>Themes</th>
<th>Interview items</th>
</tr>
</thead>
<tbody>
<tr>
<td>New perspectives</td>
<td>Talking about Honours</td>
</tr>
<tr>
<td>New perspectives</td>
<td>New perspectives</td>
</tr>
<tr>
<td>New perspectives</td>
<td>Meaning of Honours</td>
</tr>
<tr>
<td>Research-practice nexus</td>
<td>Relationship of Honours to clinical practice</td>
</tr>
<tr>
<td>Research-practice nexus</td>
<td>Research vs. clinical practice</td>
</tr>
<tr>
<td>Career decision making</td>
<td>Career decision making</td>
</tr>
<tr>
<td>Career decision making</td>
<td>Foundation for research</td>
</tr>
<tr>
<td>Career decision making</td>
<td>Opportunities with Honours</td>
</tr>
</tbody>
</table>

6.2 New Perspectives

6.2.1 Talking About Honours

Research supervisors and Honours peers are the most obvious people with whom the Honours students will be discussing Honours. However, during these interviews with students, the issue of talking about Honours arose and it is an interesting one to explore. Particularly in the early stage, the students seemed to be rather reluctant to discuss Honours for various reasons, and this was often related to how it might be perceived by non-Honours students.
I will never bring it up myself but if other people ask me how’s your Honours going, I’ll just say yeah it’s going pretty well. I will never go into depth because I don’t think they really care to be honest. (Holly)

Some of the students expressed a sensitivity towards non-Honours students who may have contemplated Honours.

There are a few who would have liked to do Honours and didn’t do it and I don’t know if it’s regret or anything, but I think they’re kind of asking to find out if they made the right decision or not. (Sarah)

I think maybe it’s because those few students really wanted this so it’s kind of being put in their faces, this is what you’re missing out on … which is quite sad. And maybe I’m conscious of that and I don’t want to aggravate that situation. That’s why I don’t like to talk about it with them, unless they ask and they’re interested, then it’s fine I will answer their questions. (Rachel)

These examples illustrate once again, the difference that these Honours students feel in relation to their non-Honours peers. At the early and mid stages they are perhaps not confident enough to discuss their Honours work freely, outside of the comfort zone of research supervisors and Honours peers. This sense of being different to other students can be accentuated inadvertently by staff members.

Sometimes it’s a bit awkward. You might see one of the research staff who walks into the clinic and they say ‘Hi how are you’ and have a chat with you when other students are around. So I am quite conscious in that sense that when I am approached by an academic or research staff member in front of other students and they talk to you in a different way … I mean it’s obvious. (Rachel)

This reticence in talking about Honours was also evident in their communication with clinical educators.

I never say that I’m doing Honours because some clinicians are different with you. I noticed that on placement when I told one guy that I was doing Honours and he just said
‘why are you doing that … why are you wasting your time?’ And I just learnt from there, if they don’t ask don’t tell them. (Ellie)

I don’t really tell my supervisors that I’m doing Honours. It might come up, but not as a general rule. (Lauren)

Perception of Honours can be negative and the students tend to avoid situations in which they might be called upon to defend their decision to do Honours. This issue of ‘practitioner marginalisation’ was also noted by Nursing Honours students, when clinical colleagues were suspicious of their perceived academic ability (McInerney & Robinson, 2001, p. 217). If research is considered as something pursued by an individual person, this perceived separation from the clinical team can have a significant impact on the reception of a research practitioner by colleagues (Seymour, et al., 2003, p. 292).

Considering a different perspective on talking about Honours, Jess offered an insight into and a potential explanation for, the negative image of Honours harbored by many Allied Health students:

I suppose the only time we talk about it [Honours] is when we’re stressed out about it and they [other students] get that negative impression. We don’t go into class and say ‘oh, I’ve just had the best feedback from my supervisors’, it’s like ‘oh. I have to get all this done by the weekend’. So I think they don’t get a very good idea of what we’re doing. (Jess)

As the students progressed through Honours their knowledge of the research topic increased and their level of confidence in research improved. It was evident that talking about Honours enabled the students to consolidate their understanding, and develop new perspectives on their research.

I actually feel a lot more confident talking about it now as I find it a lot more interesting. You don’t want to talk about something that you don’t really understand … so it’s been good in that respect. (Cassie)
It makes it clearer in my head about what I’m doing because sometimes if you don’t really get it out loud, you don’t know. I do come up with new ideas after I talk to people. I think it gets me a little more inspired when I’m not feeling so great about it as well. (Jess)

These sentiments were echoed by nurse researchers who were members of a methodological working group. Meeting on a monthly basis, these nurses found they learnt most from presenting their own research ideas and receiving critique. The group was also a safe community of practice in which they could develop ideas for their writing (Giddings & Wood, 2006, p. 19&21). Talking about their Honours research can also facilitate a student’s sense of inclusion in a research community.

They’d ask me about my project and I’d talk to them about theirs and I sort of fitted into the scene and did feel part of the research community. (Lauren)

As a newcomer to this specific research community, Lauren’s willingness to discuss her Honours research demonstrated her identity as an Allied Health professional, and contributed to “the collective wisdom of the group” (Blackler, 1995, p. 1036). Developing the confidence to articulate their research is integral to the Honours experience, and this happens gradually as the student’s ‘being’ changes over time. Barnett (2007) suggests that a student “undergoes a continuing process of becoming” (p. 62) as the student becomes authentic. Ellie’s experience of presenting her Honours research illustrates that she has found her space.

We had an Honours presentation and I got up and spoke about everything and finally it all just clicked. You do kinda wander through it all, it can be so overwhelming and people ask you what you are doing and you know you barely understand what you’re talking about. Then by the end I could actually say what I was doing and it was good. It confirmed all the things for me and it was nice to feel that there was a purpose. (Ellie)

Talking about Honours assumed a different significance for the students as they progressed through Honours, shifting the emphasis from reluctance to an understanding that discussion can facilitate insight and crystallise new perspectives.
6.2.2 New Perspectives

As the Honours students became increasingly immersed in their research, and particularly their data collection, changes in perspective began to emerge. Whether insight was facilitated by reading the literature and reflecting on practice, or through relationships with their research participants, the common focus of these new perceptions was clinical practice. Considering the intimate relationship between research and practice for these Allied Health students this is not surprising, but it is pleasing to see that practice and research are mutually informed through Honours.

Honours is not just about going straight to the point. It’s doing all your background research, finding out about all these other factors and then channelling it into your research. Like you’ve got a patient and they’ve got this condition … I’m not going straight to the point all the time, I’m looking for other possibilities. I think it’s taught me to look outside of the square a bit. (Sarah)

I have no interest in working in paediatrics but I think this research project is broadening my horizons. I think in terms of my professional practice it will just help me think outside the square, focus on all facets of the individual instead of just the compensation or remediation that we seem to focus on all of my placements, just because of lack of time and funding and all those sorts of things. (Cassie)

It’s given me more ideas about the way you could go in your clinical work. I quite often think about it when I see kids … you could do some research on that. I probably wouldn’t have thought about that before. (Emma)

The understanding that social experiences shape the consciousness of individuals is fundamental to social constructionism (Blackler, 1995, p. 1035). The development of empathetic relationships with their research participants facilitated new perspectives, as the students gained a deeper insight into the lives of people with end stage renal disease, stroke, diabetes, neurofibromatosis and children with a disability.

It’s probably helped me have a greater understanding of some of the issues they have. You get a better realisation of how hard it is for kids in that situation … I see it more from their perspective as well. (Emma)
You realise there's bigger things than just your normal life. Knowing more about people's experiences of life, being exposed to different coping styles and to different things that people have to deal with, makes you think about things differently. To have your eyes opened a little bit more than you would normally and share their experiences. That was a really nice aspect of the whole Honours process. (Lauren)

Maria's perspective was changed not so much by the children she was researching, but by listening to the experiences of their parents and carers.

I don't know what it's like to have to look at your child and say well I've bestowed this on him. I'm learning a lot from them [mothers]. (Maria)

Dadds (2008) writes about empathetic validity in practitioner research and this resonates with the experience of many of the Honours students. Research that is high in empathetic validity "brings about new personal and interpersonal understanding that touches and changes hearts as well as minds" (p. 280). It is evident from the students' experiences with research participants, that these relationships engender not only a shift in cognition, but have an emotional impact too.

Experience of working with clients during workplace learning certainly affords all undergraduate Allied Health students the opportunity to engage with clients, and to develop a deeper understanding of individual life experience. However, the issue of time warrants further consideration.

Time must be brought to light – and genuinely conceived – as the horizon for all understanding of Being and for any way of interpreting it. (Heidegger, 1962/1927, p. 39)

Honours compels students to make the time and space to explore an area of interest, and to engage with clients as research participants. As this time is protected in the sense that the student is unconcerned with delivering treatment in any sense, the Honours experience has the potential to afford students with the time to talk, the time to reflect, and the time to develop new understandings.
With clinical placements you don’t really have the time with someone and it’s all very clinically based. During Honours I had the opportunity to sit down and talk to them and because they were in their own home, they felt a lot more comfortable and relaxed talking about it. I think time plays a big role because that enables people to relax and there’s no stress of I need to see another ten patients before lunchtime. (Lauren)

Honours has the exciting potential to enable students to broaden their horizons, develop new perspectives on practice and attain new perceptions of life, informed by the experience of their clients. Learning through Honours is multi-faceted comprising the diverse themes of learning about practice, learning about research and learning about self. The meaning of Honours for these Allied Health students is invariably associated with their learning and achievement.

I started to get worried a couple of months ago because I thought is this it … is this the end for me … and now it doesn’t feel like it is. The biggest thing I’ve learnt is that this is only the beginning. (Ellie)

6.2.3 The Meaning of Honours

Honours creates the space and opportunities for students to engage with different experiences. This possibility of developing new perspectives on the familiar will open up new ways of being in the world, but attempting to define the meaning of Honours for Allied Health students is not easy (Dall’Alba & Barnacle, 2007, p. 685). Students more readily acknowledge the academic achievement, but find it much more difficult to articulate the tacit meanings of their experience.

It’s just a learning experience. It’s an opportunity to learn a huge array of different skills, so it’s a tool for doing that. (Emma)

It indicates some sort of academic achievement so I suppose there’s that high academic recognition maybe. (Holly)

The generation of new perspectives was also integrated into the meaning of the Honours experience, and the metaphor of a journey was sometimes used to represent personal growth.
It means achieving something and it’s given me all that insight into research and different people’s experiences. (Lauren)

It’s a bit of a journey and you are always learning right up until the end. Honours for me was a real personal journey in that I’ve learnt a lot about myself and what I’m capable of. Now I realise that I could do research if I wanted to. (Jess)

The best way I can describe it is that it was a really great stepping stone and journey that opened up so many doors for me and taught me so much more about myself and others. It was too good an opportunity to miss out on. (Ellie)

The experience of Honours does change the ‘being’ of individual students in many ways, but articulation of this change is constrained by language. Some students may have a purely pragmatic regard for the Honours experience, whereas others are able to focus the lens of new perception on their own ‘being’.

It’s probably the biggest year of my life and I felt like I achieved so much. There were ups and downs but overall it was a really good year. It wasn’t a year that I started and came out the same. I came out a slightly different person for the better and it was because of Honours, I know that. (Rachel)

The experience of Honours enables students to develop new perspectives which gradually crystallise over time. The students’ growing confidence in discussing their research facilitates these new insights, and the focus of the research-practice nexus is brought to the fore.

6.3 Practice-Research Nexus

6.3.1 Relationship of Honours to Clinical Practice

I must admit before Honours I thought you’d either be a researcher or you’d be a clinical podiatrist. But now that I’ve done both it’s all intertwined. You need to be keeping up with your research so you know what to do clinically. So I’ve had a change of how I view this. (Nicola)
When reflecting on the factors which motivate undergraduate Allied Health students to study Honours, the outstanding influence is the opportunity to explore an interesting area of practice. This is generally an area of clinical practice, but may also be an area of practice more closely aligned to a student’s particular interest outside of university, for example a sporting or social occupation. Research into a specific topic of interest will contribute to the students’ practice knowledge, and this is likely to manifest during workplace learning.

My knowledge of the topic … I’ve found that when I’m in clinic I do need that information at times. I suppose I’ve got above average knowledge, above what you would get taught in the standard course. (Sarah)

Honours is also a means by which students can focus in greater depth on a topic which may be relevant to their career choice.

It’s just increased my understanding of the whole area that I’m studying, which is the area I want to be involved in when I’ve graduated. I’ve got a better understanding of the issues that they [young clients] have … and that’ll probably help with treatment I guess. (Emma)

This enhanced understanding of issues facing their clients adds another dimension to the relevance of Honours to practice. Praxis acknowledges that theory and practice are integrated and “individual practitioners reflect on different perspectives to integrate them into an evolving personal theory” (Kilpatrick, 2008, p. 118).

Hopefully I’ve got a better understanding because even though I may not have had the problems myself, I’ve seen someone else have to deal with it. So hopefully it can bring some insight at least. You can say you understand something but if you’ve got a picture in your mind, it makes it a lot easier. (Lauren)

Honours therefore facilitates a privileged insight into a particular population or client group, and the students learn not only from their personal experience of Honours, but also through their client’s experiences. Honours becomes more than a means to an
end, as it stimulates students to explore practice in greater depth and to develop a more critical perspective.

> It makes you think that little bit deeper into research. You sort of analyse that article a bit deeper and actually think about how you can apply it to your practice. (Holly)

> I think about things I’ve read and think well that’s probably not the best way to teach that, or you probably shouldn’t be doing that at this point in time, they’re too young. (Jess)

The practice-research nexus is intrinsic to Honours study and the students may struggle to find a balance between the priorities of clinical practice and research.

> Sometimes you’re just so focused on the research that you can’t see it, you forget about it [clinical practice] … it’s kinda like you can’t put it aside. Then when I go and do the clinics that I do, it puts it a bit in perspective. It depends on the setting and what I’m doing but I try and keep them together. If I keep in my mind that research is a separate thing and I don’t intertwine it with the clinical side of things, what’s the purpose of doing research? (Rachel)

This is a fascinating insight into the potential tension between clinical practice and research, which is explored in the following section. Honours students have limited clinical experience, but even less research experience, so it is not surprising that they may find it difficult to manage this complex juncture. Through the experience of Honours, changing perspectives allow the students to analyse the relationship between research and practice.

> I think I have a better appreciation of research and how difficult it really is to do it and I think I really believe in evidence based practice from doing Honours. Why are we doing what we’re doing [in clinical practice] and why is that better than doing something else? I think that’s really important. (Nicola)

Honours research has the potential to contribute to the evidence base in Allied Health, and this may be a potent motivation for students to consider undertaking future research.
This research project is broadening my horizons in terms of thinking outside the square. The idea with this research is just to add to the theory and contribute to the profession. (Cassie)

The further I’ve got into Honours the more I think I’d want to do further research later on. I’m quite enjoying it and I think there’s just so much more to learn. There’s not a lot of research done in many areas of our profession. (Sarah)

It’s been really interesting just seeing the [research] process and seeing the results that are coming out of my study. Since I’ve learnt how beneficial it will be to the population that we’re studying and realising all the benefits of my study, it’s sort of blown me away and makes me want to be able to contribute more to research. (Holly)

It is interesting to see the change in the way the students contemplated the research-practice nexus as they reached the end of their Honours experience. Where previously they had viewed the relationship between clinical practice and research in practical and procedural terms, they now experienced this relationship from a much more personal perspective. Although students found it difficult to articulate the meaning of Honours, it was much easier for them to conceive this shift in their ‘being’ in the context of clinical practice.

You just learn so much about reading articles, researching and really analysing. I’m a lot more reflective and I’m always asking why. It’s more trying to understand, which is what I’ve been doing through this whole process of Honours. When I’m talking to patients I’m a lot more succinct and my communication skills have got a lot better. So you’re always learning and gaining new skills even though it’s not specifically taught to you or talked about by your supervisors … you just pick it up yourself. (Jess)

I think it just had a massive impact over the last couple of years. I felt I was much more comfortable locating evidence and applying this to my practice. I think you have a greater appreciation for research after doing it in terms of how it impacts on other clinicians and on the patients and their families as well. It’s definitely made me appreciate the value of research more. (Holly)
This shift of focus over time from the accumulation of research knowledge and skills, to a development of “understanding in and through practice in the form of a professional way of being”, is congruent with contemporary thinking about professional education (Dall’Alba, 2004, p. 690). An emphasis on a change of ‘being’ characterised by qualities such as receptiveness, thoughtfulness and humility, rather than the acquisition of either knowledge or skills, is how Barnett (2004) envisages learning for an unknown future (p. 259).

Opening your eyes to the understanding of where people come from. How their experiences are different, how they view things is different and how they interpret a questionnaire can be very different. So it’s kind of an extra dose of all those understandings. It just brings it all together a lot quicker than I think it would if I hadn’t have done Honours. (Lauren)

Honours demands its own time and space, and affords students with a particular opportunity to reflect on the relationship between practice and research. Time especially may facilitate the emergence of new insights. Being an Honours student does not necessarily infer that a student will become a future practitioner-researcher, but if the experience of Honours does change ‘being’, then these Allied Health practitioners are imbued with the potential to contribute to practice knowledge.

Going out to work now you see a lot of people who don’t really have an interest in research or being up to date with current practice and they are set in their ways. It’s easy to sit in your one clinic room, close the door and not learn anything else. I see it and I turn away from that. I think there’s so much more for me to learn and for the profession to progress forwards. (Ellie)

A fascinating thread emerged during the final interviews with the Honours students, which challenged this perception of the intrinsic relationship of research to practice. Despite the growing awareness of the complex interplay between clinical practice and research through Honours, students also tended to separate out these two entities. This was particularly evident when the students discussed their career plans. Before
considering career decision making, I will further explore the potential for tension between clinical practice and research.

6.3.2 Research vs. Clinical Practice

Evidence based practice is foundational to the education of Allied Health students, and all of the research which these Honours students chose to undertake is absolutely relevant to their clinical practice. Notwithstanding the interdependence of clinical research and practice, it is apparent that the Honours students found this relationship somewhat problematic.

I sort of view the research component and the clinical practice differently. I can see how they do relate in some aspects but I think the theory and being out working are very different at the moment. I see how the research has contributed to my communication and I think it’s enhanced my ability and my willingness to become a research-practitioner. I think I still haven’t quite understood how this research has heightened my understanding of physio practice in the field, but I think with further research and more experience I’d see the link a bit clearer. (Jess)

This is an interesting insight which has been explored in the context of practice development. Clarke (1999) suggests that because the role of research in practice is different to its role in academia, a sense of confusion has been created among practitioners (p. 976).

It is important to remember that these Honours students are undergraduates, and that their experience of clinical practice is limited to workplace learning, necessarily confined within hectic curricula. The Honours research experience for these students has also been additional to their other commitments of academic study and clinical practice, demarcated in the sense that Honours requires its own time and space. If research is equated to the experience of Honours then perhaps it may seem to assume a separate identity, and one which is very demanding.

I think it is probably the amount of time with deadlines and that kind of thing, within Honours and probably in most research as well. It’s all this extra stuff on top of what you
are already doing, so your clinical work and that kind of thing. I need to concentrate on just enjoying life and enjoying physio and getting a handle on physio before actually embarking on something else that’s so time consuming and so much extra thought and work involved. (Lauren)

Perversely then, the Honours experience may not facilitate the integration of practice and research, but may serve to highlight the research domain as distinct and quite separate from clinical practice. The opinions and behaviour of Allied Health professionals, practitioners and academics, may also reinforce this perspective. Bartunek et al (2003) sustain the view that practitioners and academics belong to different communities of practice and have differing concerns about knowledge (p. S2:62). Academic researchers who produce research evidence, and health practitioners who use the evidence, have been conceived as “two relative solitudes” (McDonald & Viehbeck, 2007, p. 140). This is a difficult place in which the Honours students reside as they are both novice Allied Health practitioners and inexperienced researchers.

Sometimes I get this feeling that those who are only focused on research only know about that and don’t know about anything else and those that are only focused on the clinical side don’t tap into research. I get this sense that they just separate them completely and if someone was to comment on the research side who didn’t have experience, it’s like they’re not worth listening to because they don’t know. Maybe it’s because those around me have influenced me that way, but I don’t want to feel that’s the case. (Rachel)

Podiatrists look at the academics and they just don’t have any respect for people that haven’t had any [clinical] experience and I might be making huge generalisations, but I know that’s the general gist of it. If you haven’t gone out and had clinical experience, people read your papers and just go ‘what do you know?’ And I reckon I’d be just as guilty of it myself too because I think you don’t learn anything from just reading, you’ve got to do and that’s important. I think there needs to be more done about bridging that gap. You’re not just an academic and you’re not just a practitioner. (Ellie)

This tension between clinical practice and research is tangible for these Allied Health students, and seems to centre on feelings about their general lack of clinical
experience. This tension between research and practice is mirrored to some extent in the context of Nursing academics. Nurses moving from clinical practice into an academic position, with the associated research requirement, perceived this as leading to a loss of clinical credibility (Kenny et al., 2004 as cited in Andrew, et al., 2009, p. 608).

It is important to understand the students’ perspective on the practice-research nexus, as this is fundamental to determining their early career decision making.

6.4 Career Decision Making

6.4.1 Career Decision Making Related to Honours

I got offered a scholarship to do a PhD this year but I rejected it because obviously I wanted to have the clinical experience to know what I was doing in my study. It [Honours] has opened a lot of doors for me and it’s very hard to say no. I want to be a clinical podiatrist as well as a research podiatrist, so I’ll put if off for a few years I think. (Nicola)

The desire to graduate and work as a clinical practitioner was universal for this group of ten Allied Health students. Despite the fact that several of the students had been invited to consider doctoral research, none of them decided to choose this path in the near future. The students were clear in their belief that they needed to further develop their clinical knowledge and skills, prior to considering any research opportunities.

I just want to practice for a few years, get comfortable in practice, get my knowledge up and then maybe go on and do something else. (Sarah)

I feel that if I went straight into research I might lose a few of my clinical skills, especially practical skills. I think at the moment trying to juggle research and working in the next year would be just too much for me. (Jess)

I don’t think I’d want to not do any clinical work for three years because at my age I can work and people expect me to need help and they expect to be giving me guidance. But if I take three years off and then come back [to clinical practice], people are going to
expect me to know more and in fact I’ll probably be worse off than when I graduated, because I’ll have forgotten lots. (Emma)

For other students for whom Honours is offered as an ‘end-on year’ of full time study, there is a similar dilemma. Humanities students shared the same concerns about lack of workplace experience and their perceived marketability, and this factor reduced the numbers of students choosing to study Honours (Freegard, 2008, p. 9).

It is apparent that the Allied Health Honours students perceive their early career opportunities as very much either/or, clinical practice/research. They feel strongly that their clinical knowledge is limited and want to develop their skills as an Allied Health practitioner, by focusing on clinical practice without distraction. In turn, further research is often conceptualised as a full time PhD. Whilst enrolment in a doctoral program was not an immediate draw for these students, the possibility of accepting a peripheral role in research was potentially appealing.

Before I undertake any major research in terms of a PhD, if I was to consider something like that down the track, I’m quite keen to just get out and consolidate my skills first. I know that some hospitals do offer research opportunities for new graduates, whether it be doing your own systematic review or helping out on other research studies, so I could certainly see myself doing something like that over the next couple of years. I’d take that up if I could but I certainly wouldn’t be taking time out specifically to undertake research. (Holly)

These feelings of inexperience with regard to clinical practice are integral to the students’ perception of their authenticity as Allied Health professionals. Fear of constraining their clinical skills was one reason for deferring the prospect of doctoral research, but additionally students were concerned about their validity as researchers with limited clinical experience.

I really enjoyed the challenge of Honours and a PhD is a big step further, but I think I could do with having that clinical knowledge and then researching something that I’m truly interested in. You could be writing about something in a PhD but if you haven’t gone out and experienced it ... you’ve never seen it clinically so how can you comment
on it in a PhD? I want to be clinically competent and further on I can always go back. (Nicola)

I was aiming to get into the PhD and really looking at that and then went oh do I really want to do this without any clinical experience? I’m supposed to be an expert on something but I haven’t been out in the real world and had any clinical experience. I just felt like a phony….no experience and doing it the cheap way. I’ve got a lot to gain and that will add to me as a researcher. I’d like a couple of years and then it’s some time to find out what field I want to go into. Four or five years is a long time to do something that you’re not passionate about. (Ellie)

This presents an interesting dichotomy of the Honours experience. Starting with scant clinical knowledge as second or third year undergraduate Allied Health students, it is clear that Honours enables insight into a specific area of clinical practice, through which new perspectives emerge. Motivation for undertaking Honours is very likely to be the desire to explore an issue of clinical interest, in order to enhance knowledge. However, at the end of Honours this perceived lack of clinical knowledge has the opposite effect. Rather than spurring the students on to further research, it highlights their deficit in the light of the professional community and makes them question their validity as Allied Health practitioners. The experience of Honours does provide a foundation for research, and most of the Honours students considered this as a potential opportunity for their future career as an Allied Health professional. Outcomes from a study of American undergraduate medical students who undertook an integrated research program, serve as a comparison to these Allied Health Honours students. Although the research experience of the medical students engendered a positive attitude towards the integration of research into practice, only a small minority of the students chose to become research scientists (Rosenblatt, et al., 2006, p. 880). Cusick (2001) highlights the need for novice practitioners to be socialised into the role of the researcher, with a shift of focus from “clinicians ‘doing’ research to clinicians ‘becoming’ clinician-researchers” (p. 16).

I sit somewhere in the middle wanting the best of both worlds, wishing that I could have done a PhD full time and worked and got the clinical experience full time. That’s what I
hated too but I could have only worked one day a week, it wasn’t going to be enough.
(Ellie)

6.4.2 Foundation for Research

If research is viewed in the broadest terms, the Honours experience should at the minimum instil a sense of curiosity in the student, and should enhance their critical view of clinical practice. The idea of Honours being a foundation for research must not be limited purely to the vision of preparing students for transition to formalised research programs.

I’ll obviously always be researching because I’ll always be updating myself and doing continuing professional development. But I won’t be doing anything for a little while that’s structured and organised. (Sarah)

The Honours experience does foster a sense of community for the students, and this is very important to ensure that students feel that they have continuing support for research.

My supervisors especially. If I ever want to get back into research they would be the people I would contact again. I’d be happy talking to them and also other people who I’ve been working with. You sort of build up contacts and if I was interested in their type of research I’d have a network. I’d be able to go and say ‘Hi, I’m interested in doing this now’. (Lauren)

In the last few weeks it’s just all clicked and I understand the research process. I don’t know that I’m quite ready to go straight into further research but I feel if I had a good supervisor and support from that research community in the university, I’d be able to do it with a bit of guidance. (Jess)

Although the experience of Honours develops core skills such as appraisal of the literature, writing and data analysis, it is apparent that the students still feel inexperienced in terms of research. Guidance and support from the research community would also need to focus on the further development of research skills.
That helping hand, that knowledge behind you to say yeah that's OK, you're on the right path. Definitely if I was to start a project this year or to do a PhD I know, OK this is how you write an introduction but I'd still need someone there to watch. (Ellie)

I still feel like I've got a huge amount to learn. I expect I'd be better at analysing the literature in terms of outcome measures and looking at the value a bit more easily. I think I would struggle without supervision to do another project, particularly the writing up part of it. It's fine when I've had the experience of writing one bit up, like I could do another literature review or another method because I've written it up a couple of times now. But I haven't for the results or discussion so I still think I need more guidance with those. (Emma)

I think in terms of being a researcher, Honours gives you a great start to give you those basic research skills. I feel confident in how you'd approach doing a systematic review and the processes of writing a thesis, but in terms of calculations I don't think our knowledge is necessarily great. Honours gives you a nice insight into what research entails and it's given me the basic research skills that I can take with me into practice and also if I choose to do research in the future. (Holly)

Once again, the students are considering the research skills which they have acquired, in the context of clinical practice. Research is fundamental to clinical practice, so the tension between practice and research in this context can only be said to be pertinent to the students' early career decision making. Successful completion of Honours can boost the students’ confidence and provide a firm foundation for future research. However, the insight gained into research through the Honours experience can also be a potential deterrent. Research into the experience of Science undergraduates who had undertaken a summer research program indicated that 91% of the students were interested in progressing to a Masters, PhD or other degree, and 4.7% changed their plans away from postgraduate education as a consequence of the research experience (Lopatto, 2004, p. 272).

I've learnt a lot really about how to get my point across and in confidence as well … confidence in what I believe and what I'm doing. I think academically as well I've grown a lot, just in being able to write quite a good thesis. It did give me confidence that I can do
things like that, so I might consider doing a PhD a little bit later because I think I can do it. (Rachel)

It’s [Honours] made me think I don’t really want to do it any time soon. It hasn’t really inspired me to pursue that career just because it’s so much effort. It was such a lot of hard work to get it through ethics for starters, that was really very difficult. That was very frustrating and kind of made me not want to have to go through the process again and I guess it’s just been a lot of hard work for the rest of the time as well. (Emma)

This extensive personal investment is also a challenging element of practice development activity, with practitioners experiencing this work as far more than the technical process of data collection (Clarke, 1999, p. 978).

Honours as a foundation for PhD research is an explicit outcome of Honours programs in Australia, and is promoted as such within institutions to encourage students to study Honours. In the Allied Health professions however, progression directly from Honours to PhD is very unusual and the average age of a PhD student in Allied Health is 34.47 years (Pearson, Cumming, Evans, Macauley, & Ryland, 2008b, pp. 92-116). It is relevant to recall that the students’ motivations for undertaking Honours focused primarily on clinical practice, professional career and employment opportunities, rather than them viewing Honours as a stepping stone to a PhD. This factor influencing Honours decision making has not changed with time. As long as twenty years ago, Australian Economics students considered that Honours offered better career prospects (Powles & Patrick, 1991, p. 55). Honours and non-Honours graduates from a Canadian Bachelor of Science Nursing degree were similarly career-oriented in their choice of undergraduate study. Students choosing to undertake Honours did so with consideration of a future academic career, whereas the non-Honours students elected other study options as more appropriate preparation for clinical practice roles (Gillis, 2007, pp. 87-88). When researching outcomes of an elective research year for American orthopaedic residents, Segal et al (2006) found that the research residents were no more likely to enter postgraduate fellowships than the clinical residents. A positive trend was noted however for the research residents toward academic careers (p, 92).
The opportunities that Honours affords these Allied Health students seem to match the students’ early motivations for undertaking Honours: clinical practice, professional career and employment opportunities.

6.4.3 Opportunities with Honours

In the beginning, these Allied Health students could only postulate the advantages of undertaking Honours. Their knowledge with regard to opportunities was necessarily second hand. At the end of their Honours journey these opportunities were realised. I have discussed the Honours experience and have explored many of the opportunities in relation to: enriched clinical practice, development of research skills, professional learning, self-actualisation and participation in communities of practice. There are three specific opportunities which did not fit readily into any of the other sections, but which are worthy of mention to ensure that my representation of the students’ experience of Honours is complete. These are: the opportunity to build on and extend Honours research, the opportunity to disseminate Honours research, and the opportunity to gain employment.

I’ve considered continuing my research into injury by extending it out to a lot of schools across NSW and not just looking at it from their [the students’] perspective, but also including the teachers and the people who run the schools. There’s scope there and a need for that research. (Jess)

I felt like I accomplished something because it has actually opened doors for me already. I’m going to be presenting my study at the Australian Wound Management conference in Perth. It also significantly helped me get the job that I’m in now. He was obviously impressed with how I did in my Honours and it does help a lot if you’ve researched in the area that is mainly focused on in that job. (Nicola)

These ten Allied Health Honours students initially seeking a challenge, were aware that Honours would not be easy. Nevertheless they decided to open themselves to this new experience. Chapters 4,5 & 6 have illuminated Honours through an exploration of the students’ experiences. Interviewing the students three times at the early, mid and late stages of Honours, ensured that the experience of being an Allied Health Honours
student was captured as the student’s perspective changed over time. The nine major themes are not confined to any one specific stage of the Honours experience, but are structured in this way to represent the main focus of the students’ experience at different times. The ordering of themes around the circle, charts the students’ journey from the initial stage of accepting the challenge and enrolling in Honours, to the final stage of completion of Honours, career decision making and entry into the Allied Health workforce. The circle may also be viewed as a continuous cycle, because the decisions which the students make in regard to their career choice will lead them to new challenges and a new way of ‘being’. As they become members of new communities of practice they will develop new perspectives on practice and research, and hopefully will become practitioner-researchers, able to make a contribution to practice knowledge and influence change.

Figure 4: Thematic representation of the Honours experience

Chapter 6 has illuminated the experiences of these Allied Health Honours students as they progress towards the late stage of Honours, through an exploration of: ‘new perspectives’, ‘practice-research nexus’ and ‘career decision making’. Towards the end
of their Honours journey, the students have developed a much clearer understanding of
their study and the relevance of their findings to practice. However, clinical practice vs.
research is a persistent source of tension for these students, and the students’ thoughts
about further research are diverse. The nine major themes which emerged from this
study map fairly closely onto the three stages of Honours, in that they are representative
of the main issues concerning the students at these different times. There is a great
synergy between these nine themes, and I have used Chapter 7 to synthesis deeper
meaning from the inter-relationships between themes. In order to envisage my
interpretation of the students’ experience of Honours, I designed a model which
encapsulated these major themes. This model builds through Chapter 7, providing a
visual image to aid the reader’s insight into the phenomenon of Honours in Allied
Health.
Chapter 7: Synthesis and Recommendations

Phenomenology not only finds its starting point in wonder, it must also induce wonder. For a phenomenological text to “lead” the way to human understanding it must lead the reader to wonder. (Van Manen, 2005, p. 5)

My wondering about Honours led me to undertake this study to illuminate the experience of Allied Health Honours students. I chose a phenomenological methodology because phenomenology calls into question what is taken for granted, and Honours is “so taken-for-granted that there is little need to articulate its place in the system” (Zeegers & Barron, 2009, p. 570). Using a phenomenological methodology to research Honours does not enable me to provide a pure description of the phenomenon of Honours, but rather I can generate “a reinterpretation, reconstruction and a remaking of sense” (Crotty, 1998, p. 168). I have critiqued the experience of these ten Allied Health Honours students and have reinterpreted their experiences to enable new meanings. In order to depict my understanding of the emergent themes and the relationships between these themes, I developed a model to illustrate the phenomenon of Honours in Allied Health. This model will be developed through the following sections of this chapter. The model does not describe the students’ experience. Its purpose is to stimulate reflection and to make the reader wonder about my interpretation of Honours.

7.1 Being and Becoming an Honours Student

Through exploring the experience of Allied Health Honours students, this study illuminates both the ‘internal’ and the ‘external’ student. It focuses the two images of the student to achieve a clear insight into the student’s ‘being’. The preceding chapters have explored themes which emerged as the students progressed through Honours, and which characterise the experience of Honours. These themes are diverse and reflect the changing experience of the students as they begin to understand what it means to be Honours students, the ways in which Honours influences their learning, and how Honours informs their ‘being’. As the undergraduate students become Honours
students, their ways of knowing shift from an externally directed view to one that is internally directed. In this way, the Honours students gradually shape not only their professional knowledge and knowledge of research, but also knowledge of themselves.

It is very important to consider that although an undergraduate student becomes an Honours student with a simple change in enrolment status, they can have no awareness of what it means to be an Honours student, beyond that of the second hand experience of senior Honours students and research supervisors. Therefore, although we may consider these new recruits as Honours students from the outset, it is vital to understand that time and experience is intrinsic to enabling a different way of being in the world, as these individuals become Honours students. In fact, this process of being and becoming suffuses Honours for its duration, as experience is dynamic. Successive challenges precipitate changes, not only in the students’ knowledge, but in their relationships with others and in their perception of the Honours experience. In acknowledgement of the fundamental importance of being and becoming, I have illustrated this as an emerging spiral to represent the centrality of this concept to the Honours experience. The spiral imagery may be considered to represent the hermeneutic spiral. The process of interpretation is continuous and dynamic, as I switch the lens between my perspective and the students’ perspective of Honours. My understanding and interpretation of the students’ ‘being’ has changed over time, and each new projection brings new understanding. The spiral is open ended because the sense making process is potentially infinite.
7.2 Being and Becoming an Allied Health Professional

Understanding the ‘being and becoming’ of an Honours student is only part of the story for these undergraduate Allied Health students. These students undertake Honours as an ‘embedded’ program, and thus experience the challenge of Honours in tandem with the complexity of other academic study and clinical placement. These new Honours students are novice practitioners, and this is particularly evident for those enrolling in Honours at the end of their second year of undergraduate study. These students are continuing to learn what it means to be an Allied Health practitioner, and unlike the finite experience of Honours, being and becoming an Allied Health professional is a lifelong experience. Their motivation for enrolling in Honours, the knowledge informing their choice of research topic, and their understanding of practice epistemology, is inspired by a very brief experience of the Allied Health profession to which they belong. It is therefore incumbent on research supervisors, academic staff and clinical educators, to appreciate this mutually informing relationship between Honours and professional practice. Ideally, research and clinical education are synergistic. Structuring the Honours experience to enable students to understand what it means to be an Allied
Health practitioner engaged in research, acknowledges the complex practice-research nexus for these students. The representation of ‘being and becoming’ at the heart of the model suggests that the experience of Honours cannot be separated out from the experience of being a novice Allied Health professional. Being and becoming an Allied Health professional informs Honours, just as the experience of Honours imbues the students’ professional practice.

7.3 Challenging Self

The broadening spiral of ‘being and becoming’ depicts growth and development of the Allied Health students as they progress through Honours. A student’s motivation to study Honours is influenced by past experience and expectations for the future, but commonly these undergraduate students are seeking a challenge. Honours is perceived as offering something different to the standard undergraduate program and the challenge may be the opportunity for independent study, the freedom to explore a topic of interest, or the chance to work closely with a research supervisor. Perhaps Honours is about a student taking some degree of control over their ‘being’, so that their ‘becoming’ is more of their making. The idea of challenge is often associated with a
student’s perception of their writing ability, and Honours is considered to offer an opportunity for developing this skill. Honours is a challenge waiting to be accepted, but the experience of Honours also presents the students with an ongoing series of challenges. Students come to realise that through accepting an offer to study Honours, they have differentiated themselves from their undergraduate peers. This degree of separation is not evident for all Honours students, or necessarily problematic, but it is sufficient to suppress discussion of Honours in the presence of non-Honours students.

The commonly held belief that Honours students are more academically capable is not congruent with the students’ own perception of their ability, and they clearly do not want to be considered as special in any way. Academic staff and clinical educators can also be guilty of spotlighting Honours students, and this may perpetuate the stereotype that Honours is only for ‘brainy’ students.

The Honours experience is characterised by changing relationships, not only between the Honours students and their peers, but more significantly between the students and the academic staff who become their research supervisors. Honours is the first opportunity that an undergraduate student has to work closely with an academic member of staff, and this novel relationship is also challenging. Allied Health Honours students are generally young, inexperienced in terms of research skills and professional practice, and naïve to the complexity of the supervisory relationship. Vital to this transition in ‘being’ from undergraduate to Honours student, is a stable, caring and mutually respectful relationship with a research supervisor. An Honours student needs to be given the permission to be proactive in negotiating this relationship, as the task of challenging an academic tutor or senior practitioner can be extremely awkward for a new Honours student. Students may know the requirements of Honours, but have no understanding of how to undertake tasks such as writing a literature review or data collection. As novice research students their dependence on the supervisory relationship is therefore much greater than for Masters or doctoral students. Each stage of Honours brings new expectations and fresh challenges, and learning through Honours is diverse: extending professional knowledge; developing clinical practice; exploring occupational practice; learning about writing; learning about research; learning
to work with a research supervisor; learning about the research community of practice; and learning about self. Honours has been conceived merely as a means for a student to extend their professional knowledge base and to develop new skills, but most importantly it is a path of self-development. Honours is a high-risk enterprise as it allows students intellectual space, practical space and space for being. But space is associated with epistemological risk, practical risk and ontological risk. The challenge of Honours is in occupying these spaces and accepting the risks. It is only through meeting the challenges and coping with uncertainty that a student is able to transform their being, to become an Honours student.

7.4 Coping

Coping with Honours is a particularly prominent issue for Allied Health students because Honours is embedded within the undergraduate course. Honours study requires a new way of working as students have greater freedom to determine their area of study, and become increasingly self-directed in their research journey. Whilst this is an attraction of the Honours experience, students take some time to feel at ease with this responsibility and to develop self-confidence in their ability to cope with
Honours. Good time management quickly becomes a prominent issue. The demands of other subjects impinge on the time available for Honours study and students have to learn how to manage not only their time, but that of their research supervisors too. As novice researchers requiring fairly intensive care, these students do not have the necessary experience to be able to cope with poor supervisory practice. This high level of dependence makes them more vulnerable to self-doubt and increased stress if the supervisory relationship is dysfunctional. Honours is typically considered to be a stressful experience, and for students on an 'embedded' program the academic workload plus Honours is an obvious source of stress. Importantly for these Allied Health students there is the additional stress of coping with workplace learning, and this is most obvious for final year students who may be working away from university and home. In order to cope, Honours students rely heavily on the support of their research supervisors, other Honours students and their friends and family. Support from these different sources is quite clearly delineated for the Honours students. Research supervisors are a source of academic support, professional knowledge and a repository of research skills. Honours peers are primarily the providers of social and emotional support, however senior Honours students can also be a source of academic support. Friends and family are a very important source of emotional support for these Allied Health Honours students, and this may be particularly so considering their relatively young age.
7.5 Self-actualisation

Coping with the demands of Honours is a factor which is evident for the students throughout the program. As new challenges emerge at the different stages of the research process, so the students have to change. This change in ‘being’ is precipitated not only by changing circumstances, but also by the students’ developing knowledge. Their evolving knowledge informs their ‘becoming’ as Honours students and they develop new understandings of themselves. This process of self-actualisation is evident as a growing self-confidence and self-belief. Over time the Honours students are able to become more confident in their writing, better able to negotiate their position with research supervisors, and more comfortable in articulating their research. Enhanced self-belief enables a student to value their contribution to a research team, and a heightened self-confidence can also extend beyond Honours, to affect other areas of their lives such as relationships with employers. The commitments and unpredictability of daily life certainly colour the experience of Honours and in turn, Honours impacts often significantly on the life of students. But just as the student’s ‘being’ informs their experience of Honours, so too does the experience of Honours change their ‘being’.
7.6 New Perspectives

This process of self-actualisation facilitates new perspectives for the Honours students. Although their self-development is evident to others and enables a different way of ‘being’, this knowledge is tacit and difficult for the students to articulate. In contrast, students are able to discuss confidently the ways in which research has elicited new perspectives on practice. Despite being novice Allied Health professionals their research is grounded in practice and they have a greater knowledge of practice than of research. Although Honours study requires a great investment of time, it does ironically allow the students time to reflect on practice. The process of research from the development of a research question through to data collection and dissertation write up, demands that the students focus very closely on an area of practice. This forced reflection enables a questioning of practice and the development of new perspectives. Research which requires the participation of people is a potent trigger for reflection on practice, and the challenging of previously held beliefs. Hence the research process and the Honours students’ experience of research, is critical to enabling new perspectives on practice. This is worthy of closer inspection, particularly when the purpose of
Honours is commonly conceived as a series of outcomes arising from completion of an undergraduate research study.

7.7 Becoming a Practitioner-Researcher

As the students progress through honours and develop their research study they develop new insights about practice, not only from their own perspective, but also from the perspective of others. Discussing their research with honours peers, research supervisors, colleagues in a research team, or with research participants themselves, enables the students to develop new understandings about practice. This new knowledge extends beyond each student’s research study, as the Honours students are aware that their learning influences their practice more broadly. The concept of the practice-research nexus is however rather elusive. Whilst the students acknowledge the interrelationship between practice and research, they still tend to separate practice from research. This becomes very apparent when students discuss their career plans. It is tempting to consider that these Allied Health Honours students are practitioner-researchers, but this is really not the case. As undergraduate students they are novice practitioners with an interest in researching an area of practice, in order to extend their
knowledge. The Honours experience provides a good foundation for future research through the development of research skills to support inquiry. These students should therefore be able to transition more smoothly and with greater confidence to a practitioner-researcher role, and Honours may be the trigger for a student to progress to a research higher degree. However, there are many possible futures for these Allied Health students, and the Honours experience may be so consuming that it takes some time to recover from. The best I can hope is that the experience of Honours enables a change of ‘being’ in undergraduate Allied Health students, and affords the opportunity for a student to develop the necessary attributes and attitude to integrate research into practice. The process of engaging in research allows the students to develop new knowledge and skills, enhanced self-confidence, an understanding of the practice-research nexus, and new perspectives on practice. Yet regardless of how well the outcome of self-actualisation positions an Honours student to become a practitioner-researcher, it is only the seed for this ‘becoming’ that is sown in Honours.
7.8 Career Decision Making

It is interesting to consider that although an undergraduate Allied Health student will choose to study Honours because it broadens opportunity, a very clear tension still exists for these students when considering career opportunities. The overriding perception is that credibility as an Allied Health professional is dependent on clinical experience. This view is reinforced for these Honours students by their non-Honours peers, and also by the Allied Health practitioners who the students work with in clinical practice. The belief that researchers are academics who do not engage in practice, and who undertake research that is not relevant to practice, also serves to fracture the practice-research nexus. Whilst Honours students have developed insight to question and hopefully dismiss this belief, they are nonetheless vulnerable to the opinion of the larger community of Allied Health practitioners. This issue of gaining credibility as an Allied Health professional is a major motivation for Honours students choosing to work as a clinical practitioner on graduation. The possibility of transitioning directly from Honours to full time PhD study is also associated with a concern; several years out of clinical practice would be extremely detrimental to a novice practitioner, and would therefore compromise future employment opportunities. However, Honours students by definition have an interest in research. Progression to clinical practice enables the development of professional knowledge and the consolidation of skills, and this is considered to be the best foundation on which to develop future research. This aspect of career decision making clearly illustrates the students’ understanding of the practice-research nexus. Research is likely to feature in the professional career of these Honours students, but later, rather than sooner.
7.9 Communities of Practice

The nine major themes emerging from this study are: ‘challenging self’; ‘a different way of being’; ‘coping’; ‘communities of practice’; ‘self-actualisation’; ‘becoming a practitioner-researcher’; ‘new perspectives’; ‘practice-research nexus’; and ‘career decision making’. This model represents ‘being and becoming’ as central to the Honours experience with six of the other themes distributed around the emerging spiral. As it is an impersonal concept, I have integrated discussion of the ‘practice-research nexus’ into the themes of ‘becoming a practitioner-researcher’ and ‘career decision making’. The one remaining theme is ‘communities of practice’ and I have chosen to illustrate this as three elements embracing all of the other themes. This conveys the sense that the students’ experience of Honours and their learning is informed by the communities within which they study. This is consistent with a social constructionist perspective, which suggests that experience is shaped by social interaction and language, within a culture or community of practice. The three communities I identified for these Honours students are: the Honours community of practice, the research
community of practice and the professional community of practice. These communities are relevant to the students to varying degrees, depending on their level of engagement with their Honours peers, their research supervisors, the nature of their research, and whether they are working as part of a research team. The model depicts the communities of practice as overlapping, suggesting that the Honours students can be members of several communities, and that the communities are not mutually exclusive.

Considering that these Honours students are undergraduate Allied Health students, it is logical to focus on the professional community of practice in the first instance. These students choose Honours at either the end of their second or third year of undergraduate study. Despite the fact that they are novice practitioners at this very early stage of their professional life, they will have gradually become encultured to their professional discipline. The knowledge and skills they have acquired will be grounded in, and informed by, the practice knowledge of their discipline. Prior to Honours these students are undifferentiated from their peers, and share the common language and traditions of their professional community of practice. However, once enrolled in the
Honours program these students become differentiated from their peers, even if this is unintentional on their part. Although still members of their professional community of practice they now have the opportunity to help form, and become a member of, an Honours community of practice. This requires closer consideration because it is often the case that there is no existing Honours community of practice for these students to join. For Allied Health students studying Honours as a one year ‘embedded’ program during their final year, there are no senior Honours students remaining in their undergraduate course. For the students studying Honours as a two year ‘embedded’ program, the senior Honours students are very likely to be undertaking clinical placement away from the university. The time-consuming nature of clinical placement, and the physical separation of these students during their final year, is not conducive to a functional Honours community of practice. Therefore, the development of a community of practice by new Honours students from different Allied Health disciplines, is perhaps rather a precarious venture. Whilst in theory there should be an Honours community of practice because there are a number of Honours students within a particular School, in practice the Honours students seek social and emotional support from Honours peers within their own professional community of practice. They therefore rely on the strength of previous friendships to support them through Honours, rather than developing new relationships with Honours students from other disciplines. This may work for some of the students, but this arrangement is obviously detrimental to an Honours student who is the sole representative of their professional group. Similarly, Honours students who do not have any friends studying Honours may be isolated in terms of peer support.

As with the other two communities, Honours students are not necessarily aware of the research community of practice. To complicate matters, the interpretation of a research community of practice in the context of Honours will vary. The relevance of membership of a research community will be different for each of the Honours students depending on several factors. For an Honours student working on a pre-defined study, as part of a larger research project, the sense of being a member of a research community will be evident from the outset. A sense of common purpose and full participation in this
community, ensures that the Honours student feels valued as a member of the community. An Honours student working on a self-initiated study, with a research supervisor who is an active member of a visible research community, will be able to gain access to that community by means of their supervisor. This may also be the case for collaborative research projects with organisations outside of the university. This can lead to legitimate peripheral participation in a research community and a sense of valued membership. Honours students may work on different studies but have a common supervisory team, and this team may constitute the research community of practice to which the students belong. In the case of an Honours student working with two internal supervisors, the student may have little sense of being part of a larger research community within a School. The importance of this sense of belonging to a larger research community is not likely to be evident to an Honours student as a novice researcher. Additionally, further differentiation of themselves in comparison to their non-Honours peers, may be something that a student wishes to avoid. However, if Honours is conceived as a foundation for the development of future practitioner-researchers, the importance of membership in a research community of practice should be emphasised for Honours students.

Finally, it is vital to acknowledge that the experience of Honours students within a discipline is informed not only by School and Faculty policy, but more broadly by the historico-socio-political and cultural influences of institutional practice and reification. The style of Honours as ‘embedded’ or ‘end-on year’ may be the same between institutions, but the different pathways and the varying intentions of Honours programs, ensure that the purpose of Honours is still open to interpretation for different groups of students. I designed this model to illustrate the themes which define the experience of Honours for Allied Health students at Charles Sturt University and La Trobe University. This model should have good resonance not only for other groups of Allied Health Honours students, but also for students undertaking an ‘embedded’ Honours program within a different vocational undergraduate course, such as Education. Additionally, it is likely that the themes represented will be familiar to ‘end-on year’ Honours students,
and the model may help to articulate the experience of Honours for more diverse groups of students.

7.10 Implications of This Study

The synthesis of a model to illustrate the interrelationships between emergent themes, aids in clarification of the implications arising from this study, and enables me to make recommendations regarding Honours in the School of Community Health. It is clear that the purpose of Honours in Allied Health needs to be explored in depth, to enable a shared understanding between academic staff, Allied Health practitioners and Honours students. If the purpose of Honours is intelligible and is articulated in terms of a student’s career trajectory, prospective Honours students could see the real value of Honours and its relevance to self-development, professional practice and further learning. An agreement about the desired attributes of an Honours student would also assist in elucidating the purpose of Honours in Allied Health, and could facilitate prospective employment opportunities for these students. It is also imperative to focus
on the mechanism for the identification and recruitment of prospective Allied Health Honours students, and to reflect carefully on the use of the grade point average (GPA) as the principal indicator of a student’s capacity to be successful in Honours. Perhaps the very meaning of ‘success’ in Honours should be reviewed. If the purpose of Honours in Allied Health is not primarily to prepare students for transition to a PhD, why should success be determined according to the student’s research capability alone?

The outcomes of this study also have implications for the ways in which we care for Honours students. The active integration of prospective Honours students into a visible Honours community of practice is important to achieve at an early stage. Ensuring the connectedness of students to the Honours community of practice, and to the research community of practice, requires consistent energy and commitment from research supervisors and academic staff. Attention must be directed at facilitating the transition of undergraduate students to enable their ‘becoming’ as Honours students, with a clear understanding that a student cannot know what it means to be an Honours student before they have lived and worked as an Honours student. At a much broader faculty and institutional level, the implications of this study serve to highlight the experience of students enrolled in an ‘embedded’ Honours program. These Honours students are often not considered in the same light as ‘end-on year’ Honours students, purely because they are not as likely to transition directly to a research higher degree. In terms of the university’s imperative to increase the number of research higher degree students, ‘embedded’ Honours students do not receive the same focus of attention. An important implication of this study therefore is to engender debate about the purpose of Honours, between different disciplines and schools within the Faculty of Science. This debate should also extend beyond Charles Sturt University, to help inform the purpose of Honours in Allied Health, across a broader spectrum of higher education institutions in Australia.

The purpose of Honours is also important to bear in mind when considering current changes occurring in Higher Education. Institutions in Australia such as Macquarie University are introducing the ‘Bologna model’ degree structure, comprising a three-year Bachelors degree, a two year Masters degree and a three year PhD (3+2+3 model).
Within this model, an Honours degree does not exist. An inherent risk of adopting the 3+2+3 model is that the benefits of the Honours degree experience are lost. A worthy implication of this study is to ensure that the strengths of an Honours degree experience, with its powerful transformative potential for the student, is clearly articulated across the Higher Education sector. Whilst a model which ‘fast tracks’ undergraduate students to PhD might be appealing in increasing the number of PhD students, these students may be much the poorer for not having experienced the benefits of Honours study.

7.11 Recommendations Arising From This Study

The recommendations I make based on the outcomes of this study, focus on three principle areas: policy, people and communities.

Policy

Recommendation 1: To debate the purpose of Honours in Allied Health, in order to derive a common understanding across the different disciplines.

It is apparent that the majority of Allied Health Honours students do not progress directly to PhD study, and this is evidenced by the mean age of 34.47 years for health doctoral students in Australia. Additionally, the Australian Qualifications Framework (2011) states that:

The purpose of the Bachelor Honours Degree qualification type is to qualify individuals who apply a body of knowledge in a specific context to undertake professional work and as pathway for research and further learning. (Australian Qualifications Framework Council, 2011, p. 39)

The role of Honours as a ‘pathway for research’ is acknowledged, but the purpose of Honours is articulated more broadly as enabling professional practice and continuing professional education. This emphasis on professional work is important in the context of Allied Health, as the opportunity to explore an area of clinical interest is an important motivation for prospective Honours students. Therefore, the dichotomy between Honours as a mechanism to prepare students for transition to a research higher degree,
and Honours as a means to enable the development of future practitioner-researchers, needs to be explored in more depth. This debate should include representatives of all the Allied Health professions to ensure that it is relevant to all disciplines. Additionally, input should be sought not just from academic staff, but from all stakeholders including Allied Health practitioners, Honours students and employers. A broad range of perspectives informing this debate will help to guard against the potential bias of higher education institutions and professional associations, in developing a common understanding about the purpose of Honours in Allied Health.

**Recommendation 2: To explore the practice-research nexus within the different Allied Health professions, to enable insight into practitioners’ views about the role of Honours in the development of future practitioner-researchers.**

The Allied Health professions comprise a diverse group of disciplines, each having a professional history which influences the development of practice knowledge, and which determines the value of research within that discipline. Each of these disciplines is composed of a heterogenous group of practitioners, with individual perspectives on practice knowledge, informed by personal experience of practice and research. Conceptions of practice and of research will therefore be very different, both within and between the different Allied Health disciplines. The practice-research nexus is a very challenging concept to explore because of the potential for a rich diversity of personal and professional views. Nevertheless, a clearer understanding is fundamental to informing the debate on the role of Honours across the Allied Health professions. It is important to know how Honours is perceived by practitioners in the different disciplines, and to understand the value which is ascribed to Honours as an undergraduate research experience. A focus on the transformative potential of Honours as a mechanism to enable the development of future practitioner-researchers, is quite a different perspective to that of Honours as a means to produce a publishable research paper.

This knowledge would help to inform the desirable attributes for a graduating Honours student, and thus assist in the development of assessment criteria for Honours
dissertations. The traditional emphasis for the assessment of Honours is on the acquisition of research skills and the production of a dissertation. However, a shift of focus towards a more encompassing view of personal and professional growth through Honours, would help to crystallise the qualities of an emergent practitioner-researcher. These characteristics would no doubt be very attractive to future employers, and relating Honours more clearly to employment and career progression may positively influence the recruitment of Honours students in Allied Health.

People

Recommendation 3: To target the recruitment of Honours students to identify those who have an interest in research and research capability, and to nurture these prospective Honours students prior to enrolment.

Current practice for the selection of Honours students at Charles Sturt University is to screen prospective students according to their GPA. A minimum GPA of 5 is used as the cut-off point for entry into an Honours program. The rationale for this is that GPA is a good predictor of the final Honours grade. For example in the Faculty of Science, data analysis revealed a statistically significant difference between the mean entry GPA for students gaining Class 1 (mean entry GPA = 5.55) and Class 2A Honours (mean entry GPA = 5.17). The use of GPA to determine entry to Honours is perhaps not as clear as it may appear. For students who enrol in an ‘end-on year’ Honours program, the GPA will be representative of a minimum of three years undergraduate study. However for Allied Health students and other undergraduate students undertaking ‘embedded’ Honours, the GPA used to determine access to Honours represents only the first 18 months to two years of the student’s undergraduate study. Reliance on GPA alone to identify prospective Allied Health Honours students will therefore exclude students who take time to adjust to undergraduate life, and who do not perform well during their first year at university. GPA scores are indicative of a student’s analytic intelligence, but there is evidence that both creative and practical intelligence are valued in research. Currently, this over-reliance on analytic intelligence produces an apparent devaluation of creative and practical intelligence. Prospective students who may have great research potential are either not considered for the Honours program or are deterred
from applying for Honours. The marketing of Honours to prospective students, and the selection of students into Honours, needs much deeper consideration.

Not only should Honours be considered as an option by more undergraduate Allied Health students, but it is very important that these prospective Honours students are carefully nurtured. An undergraduate research experience is an exciting but very challenging prospect for students, and it is vital that these prospective Honours students are made to feel welcome in the Honours community. Inclusion of these students in interdisciplinary seminars in which they can associate with senior Honours students and academic staff, will help to facilitate cross-discipline collaboration and the sharing of research ideas. This experience may bolster a student’s self-confidence, and might help to reduce the loss of prospective Honours students who doubt their capability to complete Honours.

**Recommendation 4: To shift the focus from the traditional outcomes of Honours study, to capture both the ontological and epistemological relevance of the Honours experience.**

A traditional focus on Honours is informed by the external world of the student, for example: research, objective knowledge, institutional culture, competencies, degrees and awards. If the purpose of Honours is merely to prepare a student for transition to a research higher degree, then this epistemological view is relevant. The current mechanism for awarding PhD scholarships is predicated on the class of an Honours award. This focus is not inherently wrong, but it is flawed, as it does not consider the transformation or change in ‘being’ which is intrinsic to the Honours experience. In contrast to this epistemological perspective, an ontological lens informs our understanding of the student’s internal world, for example: self, personal project, meaning, values, inner strength and ‘becoming’. This study has contributed to the understanding of the experience of Allied Health Honours students, and central to this experience is a change in ‘being’ and a sense of ‘becoming’. Further study needs to be undertaken to explore the phenomenon of Honours with students from other disciplines, and students enrolled in Honours programs with a different pathway. Honours is a much more complex experience for undergraduate students than is currently conveyed by the
standard outcomes measures. Undertaking Honours in Allied Health must be understood as learning ways of ‘being’ that are appropriate to research within Allied Health.

An explicit integration of the ontological and epistemological relevance of Honours will help to inform the debate about the purpose of Honours in Allied Health. This dual perspective will also provide a much clearer insight for prospective Honours students. It will enable them to make a more informed choice about the personal relevance of Honours, in terms of their progression, professional development and career planning. This way of thinking also stimulates reflection on the meaning of success in Honours. Currently success is determined by research capability alone, in terms of preparation for transition to further research. If the ontological relevance of Honours is also valued, then success in Honours may be judged additionally by the student’s ability to demonstrate their personal and professional development. This is particularly pertinent for the Allied Health professions if Honours is considered to be important in the development of practitioner-researchers.

**Recommendation 5:** To structure the experience of Honours for students much more carefully, with due consideration that these students are unaware at the outset of what it means to be an Honours student.

The transition from being an undergraduate student to being an undergraduate Honours student is an issue which receives scant attention. Prospective Honours students are selected, offered a place on the program, change their course registration details and then wait to commence Honours. The time taken for this process may be around two - three months. At the start of session one the Allied Health Honours students have a brief induction to Honours and then plunge straight into the session, with a one-hour weekly Honours tutorial squeezed into a busy timetable. The reduction of semester length to allow only 12 weeks of teaching means that students are under great pressure to get started with their Honours work from day one. Students are required to submit their literature review within six weeks of the start of session, and Honours work must be undertaken in tandem with study for other subjects. Inevitably the curriculum leaves
little time for reflection on the purpose of Honours, or on what it means to be an Honours student.

Despite there being little time, it is however vital that new Honours students do have the opportunity to reflect on what it means to be an Honours student. The relative estrangement from their peers by virtue of being an Honours student, and the new relationships they need to develop with their Honours peers and research supervisors, are challenges which they must cope with. Issues of time management and the potential for self-doubt contribute to the stress of being a new Honours student. It is imperative that research supervisors care for these undergraduate students and nurture them to become Honours students. The modeling and scaffolding of behaviours and thought processes is necessary to facilitate the transition from undergraduate student to Honours student. Whilst it is not possible to specifically prepare a student for the transformative potential of the Honours experience, supervisors should have a heightened awareness of this in terms of each individual student’s development. It is important to remember that these new Honours students are still learning how to be Allied Health professionals, in addition to learning about research. Research supervisors therefore have a responsibility to acknowledge the complex practice-research nexus, and enable students to understand what it means to be an Allied Health practitioner engaged in research. This important responsibility has implications for academic workload planning and a more accurate consideration of the time that Honours supervision requires.

Communities

**Recommendation 6: To introduce prospective Honours students to the Honours community of practice.**

The development and ongoing maintenance of an Honours community of practice is vital to the health of an Honours program. The differentiation of Honours students from their undergraduate peers is a potential source of tension for Allied Health Honours students. The importance of a well functioning Honours community therefore enables students to offer and receive emotional and social support from students who are
experiencing the same phenomenon. Whilst third year students are working mainly on campus, the fourth year Allied Health students may spend some considerable time working away from home, at external placement sites. The curriculum therefore presents a barrier to the fluid continuity of the Honours community between years three and four. Whilst students can maintain contact via social networking sites, typically students from the different Honours cohorts do not associate with each other. Peer support is evident between Honours students from the same discipline, and this may mitigate to some degree the geographical separation of the third and fourth year Honours students.

In practice it seems that a new Honours community has to be established every year with each new cohort of Honours students. A mechanism to address this issue would be to welcome prospective Honours students into the community whilst they are still second year students. The establishment of a group of prospective Honours students during session two would enable these undergraduate students to meet with third year Honours students. The sharing of ideas, the discussion of potential research opportunities and the chance to gain an insight into being an Honours student, would enable participation of newcomers in this community through ‘generational encounters’. Facilitating interdisciplinary networks between students in different cohorts who are interested in research, would enhance the potential for collaboration. Introduction to the Honours community as a second year student would also maximise the support for these prospective Honours students, and may decrease the potential for loss of students during the early stage of Honours in year three.

**Recommendation 7: To ensure that Honours students are welcomed into a research community of practice early on in their course of study.**

The experience of Honours is very personal. The research an Honours student undertakes may have more personal relevance, rather than being of great significance to the professional community. Honours students may work closely with only one or two research supervisors, and this relative isolation can exacerbate the sense of research as a lonely occupation. It is important that Honours students appreciate from the outset that they are members of a much larger research community. This realisation not only
enables a student to consider that their contribution to practice knowledge is valid, but also that they are respected as a novice researcher within their discipline. The research community for an Honours student may be an existing team of researchers and senior research students with whom they work regularly. Similarly, an Honours student may automatically become a member of a research community by virtue of their supervisor’s associations, or through collaboration with an external research team. For Honours students working with one or two research supervisors, the larger research community is likely to be invisible. In this case, it is the responsibility of the research supervisors to raise the student’s awareness, in order to foster a sense of inclusion for the student.

Honours students may choose to engage with a research community to a greater or lesser degree. This will be highly dependent on the student’s field of research, and also on their collaboration with internal and external research supervisors. An Honours student may decide to be an active member of a research community, a legitimate peripheral participant, or may choose non-participation. The level of participation is not of importance, but the sense of inclusion is relevant to whether the student feels valued as a novice practitioner. If an Honours student has a good experience of research, they are much more likely to consider further research. A positive early research experience is key to facilitating the development of future practitioner-researchers, and this is vital to the continuing generation of practice knowledge in Allied Health.

**Recommendation 8: To use the outcomes of this study to inform the institutional perspective on ‘embedded’ Honours programs.**

The two most common Honours pathways are ‘embedded’ and ‘end-on year’. Students enrolled in ‘end-on year’ Honours programs are more likely to transition directly to a research higher degree than students undertaking ‘embedded’ Honours. Therefore, if the institutional imperative is to increase the number of research higher degree students, the focus on Honours will necessarily prioritise ‘end-on year’ Honours programs. Although national and institutional statements about the purpose of Honours reflect a focus on professional development and research, there is no consideration of an ontological perspective.
Table 7: National and institutional statements about the purpose of Honours

<table>
<thead>
<tr>
<th>Australian Qualifications Framework Council, 2011</th>
<th>CSU Faculty of Science, 2011</th>
<th>Kiley et al, 2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Qualify individuals who apply a body of knowledge in a specific context to undertake professional work.</td>
<td>Develop an advanced level of knowledge in the area of specialisation.</td>
<td>Advanced disciplinary knowledge.</td>
</tr>
<tr>
<td>As a pathway for research and further learning.</td>
<td>Provide knowledge, skills and attitudes relevant to the conduct of research, especially for entry into higher degree courses. Further develop verbal and written skills relevant to advanced studies and research.</td>
<td>Research training.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Substantial independent research thesis/project.</td>
</tr>
</tbody>
</table>

This table portrays a pragmatic and rather reductionist view of the purpose of Honours, conceived from an epistemological perspective in terms of the external world of the student. What is obviously missing from these statements about the purpose of Honours is any reference to the individual student’s ‘being’, and the transformation of the student through the experience of Honours. Outcomes from this study can be used to inform debate about the purpose of Honours from the students’ perspective. This discussion would facilitate comparison between ‘embedded’ and ‘end-on year’ Honours programs, despite the perceived differences in the purpose of Honours for students on these different Honours pathways. If the purpose of Honours can be framed with the student experience at the fore, prospective Honours students could see the personal relevance of Honours more readily. A clearer understanding of Honours, and illumination of the relevance of Honours to undergraduate study and career progression, may encourage more Allied Health students to consider Honours. This raised awareness of Honours as something more than a means to explore practice and
produce a dissertation, would also enhance the standing of ‘embedded’ Honours programs, both within professional communities and within the institution.

7.12 Limitations of This Study

It is important to acknowledge that the recommendations arising from this study are founded on research conducted on a small study population. The student participants were all Allied Health students enrolled at Charles Sturt University (CSU) or La Trobe University (LTU). The research outcomes are contextualised for one regional university in NSW and one metropolitan university in Victoria, and may or may not transfer to other institutions, for example research intensive universities. The ten participants are all female students who offered to participate in this study. A convenience sampling technique cannot predict or control participant recruitment, and it was chance alone which determined the exclusively female participant group. A major factor which may have been influential is the fact that I am a female researcher, and any male Honours students may have felt less comfortable talking to me. However, in undergraduate Allied Health courses the number of female students tends to be greater than that of male students. This is particularly so in speech pathology and to a lesser degree in occupational therapy and podiatry. Physiotherapy is the course in which the number of female and male students is more likely to be equal. Therefore, it is important to consider that the views offered by these Honours students are from an entirely female perspective, and the experience of women as Honours students may be different in some respects to that of men. Gender related issues did arise with a couple of the students and these would be very interesting to explore further, but for the purpose of this study I did not take account of gender issues in my data analysis or discussion. The distribution of students across the four Allied Health professions was not equal and this was a consequence of the scheduling of Honours in the undergraduate curricula, and also the convenience sampling technique. The five CSU students represented Occupational therapy (1), Physiotherapy (2), Podiatry (1) and Speech Pathology (1). The five LTU students represented Podiatry (3) and Physiotherapy (2). Although there were differences between the students’ professional knowledge and their research
topics, it was not apparent at any stage of the study that their discipline *per se* influenced their experience of Honours.

I hope that this thesis enables awareness of the experience of Honours students undertaking an 'embedded' Honours program. The study focuses exclusively on Allied Health students, but the reader may gain insight into the experience of Honours students from other disciplines on similar programs, for example Education. The transferability and applicability of these research findings to other students, from different disciplines and in other institutions, is left to the interpretation of the reader.

### 7.13 Areas for Future Research

This study has thoroughly engaged me and has stimulated my interest in possible areas of related research. My knowledge of Honours in Allied Health positions me well to extend my research to other groups of Honours students. The outcomes from this study could inform the development of a survey tool, for use with Allied Health students at other Australian universities. I would also be interested to explore the experience of Honours students undertaking ‘embedded’ Honours in other disciplines such as Education. Cross-disciplinary research could also elucidate the role of ‘embedded’ and ‘end-on year’ Honours programs, to inform the debate about the future of Honours in Australia. The development of practitioner-researchers in Allied Health is another possible area for future research, particularly with the increasing development of graduate entry masters courses and professional doctorates in Australia. What is the experience of Allied Health Honours students in the first ten years of practice? Do Honours students become practitioner-researchers in Allied Health? Additionally, the issue of the practice-research nexus, which proved difficult for the Honours students to grapple with, would be an excellent focus for research. Conceptions of research in Allied Health, and the influence of practitioners’ experience on the integration of research into practice, would be fascinating to explore. Illumination of the practice-research nexus would help to promote discussion within the Allied Health disciplines, regarding the role of practitioners in the continuing development of practice knowledge. My interest in ‘being’ and ‘becoming’ has developed during the process of writing this
thesis. What does it mean to be a podiatrist? Even after 29 years of practice this question would take some time to answer. Thus research into ‘being’ an Allied Health practitioner would facilitate articulation of tacit professional knowledge, and may also help to illuminate the complex relationship between practice and research.

7.14 Reflective Summary

Coming to the end of this work is a strange feeling. It is climactic because it has taken five years to get here, but also an anti-climax in some ways because my PhD journey is nearly over. My writing is from deep within me so I leave part of myself on these pages. My thesis is a tangible part of me. I have read, re-read and edited this writing so many times, that I know every word and punctuation mark. But at the same time I read my words and wonder when I had the time, and how I had the knowledge to write all of this. I started on this journey five years ago almost to the day, with a sure but unformed idea that I wanted to understand more about Honours in Allied Health. Why were there not many Allied Health students choosing to study Honours? My previous research experience was limited to quantitative studies: research into the effects of local anaesthetics on cutaneous vasculature and investigation of post-operative outcomes following surgery to correct hallux limitus (a deformity affecting the first toe). Similarly, my supervision of undergraduate and postgraduate research students had focused on quantitative studies. Hence my knowledge of qualitative research was negligible and I knew that I wanted to challenge myself with this PhD.

Looking back over the past five years I realise that my ‘being’ is now very different. I was a lecturer in podiatry with many years of clinical and teaching experience, but on reflection my knowledge of research was woefully inadequate. In terms of research, I practiced what I had experienced, and my experience was extremely narrow in focus. Through this study I have learned how to be a PhD student with all that it entails, just as the undergraduate students in this study had to learn to be Honours students. I have become a researcher and one that is much more confident in her ability to critique her research skills and writing. As my writing is the external evidence of my development, it is easy for me to see my changing style and improved ability over time. I had to learn to
write in a way that is appropriate for qualitative research, and this has been my steepest learning curve. The process of writing has enabled me to unlock knowledge of which I was unaware and has allowed me to express a creativity which is not expected in quantitative research. I know that as a consequence of this experience my confidence in my research skills and my writing has improved enormously. I am confident to be my own critic and am less reliant on external feedback. The similarities between my experience of being a PhD student and the experience of the Honours students are many, but one that resonates powerfully with me is the collateral impact of increased self-confidence. An increased confidence and success in one area of life, impacts positively on other areas. However, as with anything in life, the more you learn the more you realise you don’t know. I reflect back on my experience of being a research supervisor to Honours and masters students in the past, and realise how much I didn’t know at the time. The experience of being a research student myself, is invaluable in terms of supervising the research students I have now.

I chose hermeneutic phenomenology as a research methodology because I wanted to understand the students’ experience of Honours. Heidegger’s hermeneutic circle is a “circle of understanding” (Crotty, 1998, p. 98), and I am confident that this phenomenological approach has enabled me to understand the experience of Allied Health Honours students. My own journey and the parallels I draw between my experience and that of the Honours students, is further evidence that this approach is valid. I came to this study with a knowledge of ‘human being’ and my own pre-understanding of ‘being’ for an Honours student, which Heidegger refers to as ‘forestructure’ (ibid). So I had an understanding of my own experience and my pre-conceptions of what it was like to be an Honours student. Through the process of interviewing Honours students I was able to gain an understanding of their 'being': “granted to us in an experience’, that is the focus lies with the experience of the phenomenon, rather than the outcome” (Crotty, 1998, p. 98). As I immersed myself in the students’ experience and reflected on their discussions with me, the phenomenon that is Honours began to emerge. It took a long time to assemble all of the pieces and
make sense of the phenomenon as a whole, and perhaps that’s why the metaphor of the papier-mâché vase resonated so well for me.

Just as I have changed through my experience of research, so too did the Honours students. The three interviews I conducted with each of the students provided them with an opportunity to reflect on their experience of Honours, and their development as reflective practitioners became increasingly apparent over time. Their increasing self-confidence in their study and the relevance of their research to practice is most memorable. As they discussed their work, they articulated new perspectives on practice and acknowledged the value of Honours in terms of developing research skills. Honours provided them with the space and time to reflect on practice and enabled them to understand the potential of research. I don’t know how many of these students will continue with research in the future, but this experience of Honours will be one which stays with them forever.

I started to get worried a couple of months ago because I thought is this it … is this the end for me … and now it doesn’t feel like it is. The biggest thing I’ve learnt is that this is only the beginning. (Ellie)
## Bachelor Honours degree qualification descriptor

<table>
<thead>
<tr>
<th>Purpose</th>
<th>The Bachelor Honours Degree qualifies individuals who apply a body of knowledge in a specific context to undertake professional work and as a pathway for research and further learning.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledge</td>
<td>Graduates of a Bachelor Honours Degree will have coherent and advanced knowledge of the underlying principles and concepts in one or more disciplines and knowledge of research principles and methods</td>
</tr>
<tr>
<td>Skills</td>
<td>Graduates of a Bachelor Honours Degree will have:</td>
</tr>
<tr>
<td></td>
<td>• cognitive skills to review, analyse, consolidate and synthesise knowledge to identify and provide solutions to complex problems with intellectual independence</td>
</tr>
<tr>
<td></td>
<td>• cognitive and technical skills to demonstrate a broad understanding of a body of knowledge and theoretical concepts with advanced understanding in some areas</td>
</tr>
<tr>
<td></td>
<td>• cognitive skills to exercise critical thinking and judgement in developing new understanding</td>
</tr>
<tr>
<td></td>
<td>• technical skills to design and use research in a project</td>
</tr>
<tr>
<td></td>
<td>• communication skills to present a clear and coherent exposition of knowledge and ideas to a variety of audiences</td>
</tr>
<tr>
<td>Application of knowledge and skills</td>
<td>Graduates of a Bachelor Honours Degree will demonstrate the application of knowledge and skills:</td>
</tr>
<tr>
<td></td>
<td>• with initiative and judgement in professional practice and/or scholarship</td>
</tr>
<tr>
<td></td>
<td>• to adapt knowledge and skills in diverse contexts</td>
</tr>
<tr>
<td></td>
<td>• with responsibility and accountability for own learning and practice in collaboration with others within broad parameters</td>
</tr>
<tr>
<td></td>
<td>• to plan and execute project work and/or a piece of research and scholarship with some independence</td>
</tr>
<tr>
<td>Volume of learning</td>
<td>The volume of learning of a Bachelor Honours Degree is typically 1 year following a Bachelor Degree. A Bachelor Honours Degree may also be embedded in a Bachelor Degree, typically as an additional year</td>
</tr>
</tbody>
</table>

(Australian Qualifications Framework Council, 2011, p. 49)
Appendix B: Study information sheet

Information sheet

‘Illuminating Honours; exploring perspectives of undergraduate allied health students using a phenomenological approach.

This research project is being undertaken by Caroline Robinson, a PhD student at Charles Sturt University. Caroline’s contact details are phone: 02-6051-6972; email: corobinson@csu.edu.au

The study will be completed by the end of 2011 and forms the basis of my doctoral research. My research aims to find out more about the students’ experience of honours, both as an individual and as a member of the honours community of practice. Literature focussing on the student experience of honours is sparse and the experience of allied health honours students is under-researched. This study will illuminate the influence of honours on personal and professional learning, career pathways and the development of practitioner-researchers in allied health.

During 2009_10 I will carry out focus groups and interviews with allied health honours students at Charles Sturt University and La Trobe University.

If you decide to take part in my research, I will ask you to agree to be involved in a maximum of three separate interviews of 45-60 minutes, over an 18 month period. I will also ask you to attend two focus groups of one hour, to discuss your experience of honours with other allied health students at your university. Focus groups and interviews will be taped, with the permission of all participants. I will not use your name when I write up the research and our discussions within focus groups and interviews will remain confidential. Publications arising from this research will not identify any individual by name.

If you are interested in the study results I will be pleased to provide you with a final summary document.

If you don’t want to take part you are free to refuse and you can withdraw from the project at any time, without providing a reason and without prejudice. I will make sure all notes relating to your interviews and focus groups are stored securely in a locked office and destroyed after a period of five years from the end of the research.
NOTE: Charles Sturt University’s Human Research and Ethics Committee has approved this project (2006/323). If you have any complaints or reservations about the ethical conduct of this project, you may contact the Committee through the Executive Officer:

The Executive Officer
Ethics in Human Research Committee
The Secretariat
Charles Sturt University
Bathurst NSW 2795
Tel: (02) 6338 4628
Fax: (02) 6338 4194

Any issues you raise will be treated in confidence and investigated fully and you will be informed of the outcome.

If you agree to take part in the research please sign the consent form provided.

Thank you very much for your help. It is much appreciated.
Appendix C: Consent form

CONSENT FORM

Title of research project  
‘Illuminating Honours; exploring perspectives of undergraduate allied health students using a phenomenological approach.

Contact details of principal researcher  
Caroline Robinson  
School of Community Health  
Charles Sturt University  
02 6051 6972  
corobinson@csu.edu.au

Charles Sturt University’s Ethics in Human Research Committee has approved this study (2006/323).

- The purpose of the research has been explained to me;
- I understand that I am free to withdraw my participation in this study at any time, without providing a reason and without prejudice;
- I understand that if I withdraw from the study, it will not be possible to remove any data I have contributed;
- I agree to the taping of interviews and focus groups in which I am taking part;
- I understand that any information or personal details gathered in the course of this research about me are confidential and that neither my name nor any other identifying information will be used or published without my written permission.

Name……………………………………………………………………………………

Signature…………………………………………………………………………………

Contact email address………………………………………………………………
Appendix D: Interview guide for the early interviews

- I am interested in your personal experience of honours and would like to hear your story.
- Can you start by telling me when you first thought that you might study honours?
- What was it that made you think about doing honours? Was there any specific event/trigger for you?
- Did anything put you off the idea of doing honours?
- Why is it important for you to study honours?
- In what ways is honours a challenge to you?
- What is your experience of honours so far? Can you give me any specific examples?
- How are you feeling about honours at the moment?
- What is the relationship between honours and your clinical practice?
- It has been said that ‘honours opens up a lot of doors’. What does honours mean to you?
- What have you learned by doing honours eg. about yourself; about your learning? Can you give me any specific examples?
- What effect has honours had on the way you view professional practice/research/professional knowledge?
Appendix E: Interview guide for the mid interviews

- How’s it all going?
- How are you feeling about honours at the moment?
- How is honours impacting on your life?
- How is honours fitting in with your other studies?
- Have you found that it’s easy to let the honours work slip?
- How is honours different to your previous study experiences?
- Can you identify the most significant sources of support for you in terms of honours?
  - supervisors; research group; honours group; academic staff; peers; family and friends
- How are you treated as an honours student?
- Can you compare yourself as an honours students to your non-honours peers?
- Do you see that honours is enabling you in any way?
- What do you see as the relationship between honours and your professional practice?
- What is the ‘value added’ that honours gives you in terms of professional practice?
- Can you think of a metaphor to describe how you experience honours?
- What is the relationship of honours with your life?
- Are you enjoying the experience of honours?
- Can you tell me what you are good at in terms of honours?
- What have you learned from the experience so far?
- Who are the important role models in your life?
Appendix F: Interview guide for the final interviews

- Reflection on transcript from the mid-interview.
- Reflection on the vignette.
- Recalling significant moments of honours; positive and negative incidences
- As an honours student, have you felt part of a research community?
- What is the meaning of honours for you?
- How has honours helped you to develop as a practitioner-researcher?
- Where will you go from here?
Appendix G: Emergent issues from the early interviews

<table>
<thead>
<tr>
<th>Issues arising during early interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>10 participants</strong></td>
</tr>
<tr>
<td>Relationship with clinical practice</td>
</tr>
<tr>
<td>(Sarah; Jess; Cassie; Emma; Maria;</td>
</tr>
<tr>
<td>Lauren; Holly; Nicola; Ellie; Rachel)</td>
</tr>
<tr>
<td>Honours decision making</td>
</tr>
<tr>
<td>(Sarah; Jess; Cassie; Emma; Maria;</td>
</tr>
<tr>
<td>Lauren; Holly; Nicola; Ellie; Rachel)</td>
</tr>
<tr>
<td>Feelings about honours</td>
</tr>
<tr>
<td>(Sarah; Jess; Cassie; Emma; Maria;</td>
</tr>
<tr>
<td>Lauren; Holly; Nicola; Ellie; Rachel)</td>
</tr>
<tr>
<td>Managing workload</td>
</tr>
<tr>
<td>(Sarah; Jess; Cassie; Emma; Maria;</td>
</tr>
<tr>
<td>Lauren; Holly; Nicola; Ellie; Rachel)</td>
</tr>
<tr>
<td><strong>9 participants</strong></td>
</tr>
<tr>
<td>Motivation</td>
</tr>
<tr>
<td>(Sarah; Jess; Cassie; Emma; Maria;</td>
</tr>
<tr>
<td>Lauren; Nicola; Ellie; Rachel)</td>
</tr>
<tr>
<td>Challenges</td>
</tr>
<tr>
<td>(Sarah; Jess; Cassie; Emma; Maria;</td>
</tr>
<tr>
<td>Lauren; Holly; Nicola; Ellie)</td>
</tr>
<tr>
<td>Learning through honours</td>
</tr>
<tr>
<td>(Sarah; Jess; Cassie; Emma; Lauren;</td>
</tr>
<tr>
<td>Holly; Nicola; Ellie; Rachel)</td>
</tr>
<tr>
<td>Academic ability</td>
</tr>
<tr>
<td>(Sarah; Jess; Cassie; Emma; Maria;</td>
</tr>
<tr>
<td>Holly; Nicola; Ellie; Rachel)</td>
</tr>
<tr>
<td>Contributing to professional knowledge</td>
</tr>
<tr>
<td>(Sarah; Jess; Cassie; Emma; Maria;</td>
</tr>
<tr>
<td>Lauren; Nicola; Ellie; Rachel)</td>
</tr>
<tr>
<td><strong>8 participants</strong></td>
</tr>
<tr>
<td>Positive influences</td>
</tr>
<tr>
<td>(Sarah; Jess; Cassie; Emma; Lauren;</td>
</tr>
<tr>
<td>Holly; Nicola; Ellie; Rachel)</td>
</tr>
<tr>
<td>Foundation for research</td>
</tr>
<tr>
<td>(Sarah; Jess; Emma; Maria; Lauren;</td>
</tr>
<tr>
<td>Holly; Nicola; Ellie; Rachel)</td>
</tr>
<tr>
<td>Entry to PhD</td>
</tr>
<tr>
<td>(Sarah; Jess; Emma; Maria; Lauren;</td>
</tr>
<tr>
<td>Holly; Nicola; Ellie; Rachel)</td>
</tr>
<tr>
<td>Research supervisors</td>
</tr>
<tr>
<td>(Jess; Cassie; Emma; Maria; Lauren;</td>
</tr>
<tr>
<td>Holly; Nicola; Ellie; Rachel)</td>
</tr>
<tr>
<td>Honours peer support</td>
</tr>
<tr>
<td>(Jess; Cassie; Emma; Maria; Lauren;</td>
</tr>
<tr>
<td>Holly; Nicola; Ellie; Rachel)</td>
</tr>
<tr>
<td>Honours group</td>
</tr>
<tr>
<td>(Jess; Cassie; Emma; Maria; Lauren;</td>
</tr>
<tr>
<td>Holly; Nicola; Ellie; Rachel)</td>
</tr>
<tr>
<td><strong>7 participants</strong></td>
</tr>
<tr>
<td>Perception of honours</td>
</tr>
<tr>
<td>(Sarah; Jess; Cassie; Emma; Holly;</td>
</tr>
<tr>
<td>Nicola; Ellie; Rachel)</td>
</tr>
<tr>
<td>Coping</td>
</tr>
<tr>
<td>(Sarah; Jess; Cassie; Emma; Maria;</td>
</tr>
<tr>
<td>Nicola; Ellie; Rachel)</td>
</tr>
<tr>
<td>Negative influences</td>
</tr>
<tr>
<td>(Sarah; Jess; Cassie; Emma; Holly;</td>
</tr>
<tr>
<td>Nicola; Ellie; Rachel)</td>
</tr>
<tr>
<td>Career decision making</td>
</tr>
<tr>
<td>(Sarah; Jess; Cassie; Emma; Lauren;</td>
</tr>
<tr>
<td>Holly; Nicola; Ellie)</td>
</tr>
<tr>
<td><strong>6 participants</strong></td>
</tr>
<tr>
<td>Extending personal knowledge</td>
</tr>
<tr>
<td>(Sarah; Jess; Cassie; Emma; Maria;</td>
</tr>
<tr>
<td>Lauren; Holly)</td>
</tr>
<tr>
<td>Self-discipline</td>
</tr>
<tr>
<td>(Sarah; Jess; Cassie; Emma; Maria;</td>
</tr>
<tr>
<td>Nicola; Ellie)</td>
</tr>
<tr>
<td>Writing for research</td>
</tr>
<tr>
<td>(Sarah; Jess; Cassie; Emma; Lauren;</td>
</tr>
<tr>
<td>Ellie; Rachel)</td>
</tr>
<tr>
<td>Self-belief</td>
</tr>
<tr>
<td>(Jess; Cassie; Emma; Maria; Holly;</td>
</tr>
<tr>
<td>Nicola; Ellie)</td>
</tr>
<tr>
<td>Opportunities with honours</td>
</tr>
<tr>
<td>(Jess; Cassie; Emma; Lauren; Nicola;</td>
</tr>
<tr>
<td>Ellie; Rachel)</td>
</tr>
<tr>
<td><strong>5 participants</strong></td>
</tr>
<tr>
<td>Seeking a challenge</td>
</tr>
<tr>
<td>(Sarah; Cassie; Emma; Holly; Ellie;</td>
</tr>
<tr>
<td>Rachel)</td>
</tr>
<tr>
<td>Different way of learning and working</td>
</tr>
<tr>
<td>(Sarah; Cassie; Emma; Maria; Ellie;</td>
</tr>
<tr>
<td>Rachel)</td>
</tr>
<tr>
<td>Support for research</td>
</tr>
<tr>
<td>(Emma; Lauren; Holly; Nicola; Ellie;</td>
</tr>
<tr>
<td>Rachel)</td>
</tr>
<tr>
<td><strong>4 participants</strong></td>
</tr>
<tr>
<td>Value of honours</td>
</tr>
<tr>
<td>(Sarah; Jess; Emma; Maria; Lauren)</td>
</tr>
<tr>
<td>Sense of direction</td>
</tr>
<tr>
<td>(Jess; Cassie; Maria; Nicola; Ellie)</td>
</tr>
<tr>
<td>Benefits for other areas of academic</td>
</tr>
<tr>
<td>study (Sarah; Jess; Emma; Maria;</td>
</tr>
<tr>
<td>Lauren)</td>
</tr>
</tbody>
</table>
Postgraduate opportunities (Sarah; Jess; Nicola; Ellie; Rachel)
Relationships with academic staff (Cassie; Emma; Ellie; Rachel; Lauren)
Self-development (Sarah; Jess; Cassie; Ellie; Sarah)

4 participants
Engagement (Sarah; Jess; Cassie; Maria)
Structured experience (Jess; Cassie; Emma; Ellie)
Stress (Jess; Emma; Lauren; Holly)
Finding a balance (Jess; Cassie; Maria; Holly)
New perceptions (Cassie; Emma; Lauren; Ellie)
Impact on life (Cassie; Maria; Nicola; Ellie)
Research skills (Maria; Lauren; Holly; Ellie)
Personal attributes (Jess; Cassie; Nicola; Maria)

3 participants
Imposing a structure (Sarah; Cassie; Lauren)
Not with the pack (Jess; Cassie; Ellie)
Research community of practice (Emma; Lauren; Ellie)
Choices (Jess; Lauren; Holly)
Personal support (Cassie; Lauren; Holly)
Wanting something different (Emma; Nicola; Ellie)

2 participants
Impact on self (Sarah; Jess)
Meaning of honours (Maria; Nicola)
Impact on self (Nicola; Ellie)
Testing out research (Nicola; Ellie)
Finding your place (Cassie; Ellie)

Informing occupational practice
A fresh start
Understanding research

<table>
<thead>
<tr>
<th>Items coded from early interviews</th>
<th>Emergent themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Honours decision making (10)</td>
<td>Accepting the challenge</td>
</tr>
<tr>
<td>Feelings about honours (10)</td>
<td></td>
</tr>
<tr>
<td>Motivation (9)</td>
<td></td>
</tr>
<tr>
<td>Academic ability (9)</td>
<td></td>
</tr>
<tr>
<td>Entry to PhD (9)</td>
<td></td>
</tr>
<tr>
<td>Challenges (9)</td>
<td></td>
</tr>
<tr>
<td>Perception of honours (8)</td>
<td></td>
</tr>
<tr>
<td>Career decision making (8)</td>
<td></td>
</tr>
<tr>
<td>Opportunities with honours (7)</td>
<td></td>
</tr>
<tr>
<td>Seeking a challenge (6)</td>
<td></td>
</tr>
<tr>
<td>Value of honours (5)</td>
<td></td>
</tr>
<tr>
<td>Sense of direction (5)</td>
<td></td>
</tr>
<tr>
<td>Postgraduate opportunities (5)</td>
<td></td>
</tr>
<tr>
<td>Choices (3)</td>
<td></td>
</tr>
<tr>
<td>Wanting something different (3)</td>
<td></td>
</tr>
<tr>
<td>Meanings of honours (2)</td>
<td>Becoming an honours student</td>
</tr>
<tr>
<td>------------------------</td>
<td>-----------------------------</td>
</tr>
<tr>
<td>Testing out research (2)</td>
<td></td>
</tr>
<tr>
<td>A fresh start (1)</td>
<td></td>
</tr>
<tr>
<td>Managing workload (10)</td>
<td></td>
</tr>
<tr>
<td>Learning through honours (9)</td>
<td></td>
</tr>
<tr>
<td>Coping (8)</td>
<td></td>
</tr>
<tr>
<td>Self-discipline (7)</td>
<td></td>
</tr>
<tr>
<td>Different way of learning (6)</td>
<td></td>
</tr>
<tr>
<td>Support for research (6)</td>
<td></td>
</tr>
<tr>
<td>Engagement (4)</td>
<td></td>
</tr>
<tr>
<td>Research skills (4)</td>
<td></td>
</tr>
<tr>
<td>Structured experience (4)</td>
<td></td>
</tr>
<tr>
<td>Stress (4)</td>
<td></td>
</tr>
<tr>
<td>Finding a balance (4)</td>
<td></td>
</tr>
<tr>
<td>Impact on life (4)</td>
<td></td>
</tr>
<tr>
<td>Imposing a structure (3)</td>
<td></td>
</tr>
<tr>
<td>Personal support (3)</td>
<td></td>
</tr>
<tr>
<td>Contributing to professional knowledge (9)</td>
<td>Establishing identity</td>
</tr>
<tr>
<td>Foundation for research (9)</td>
<td></td>
</tr>
<tr>
<td>Positive influences (9)</td>
<td></td>
</tr>
<tr>
<td>Negative influences (8)</td>
<td></td>
</tr>
<tr>
<td>Extending personal knowledge (7)</td>
<td></td>
</tr>
<tr>
<td>Writing for research (7)</td>
<td></td>
</tr>
<tr>
<td>Self-belief (7)</td>
<td></td>
</tr>
<tr>
<td>Self-development (5)</td>
<td></td>
</tr>
<tr>
<td>Personal attributes (4)</td>
<td></td>
</tr>
<tr>
<td>Finding your place (2)</td>
<td></td>
</tr>
<tr>
<td>Impact on self (2)</td>
<td></td>
</tr>
<tr>
<td>Understanding research (1)</td>
<td></td>
</tr>
<tr>
<td>Relationship of honours to clinical practice (10)</td>
<td>Changing relationships</td>
</tr>
<tr>
<td>Research supervisors (9)</td>
<td></td>
</tr>
<tr>
<td>Honours peer support (9)</td>
<td></td>
</tr>
<tr>
<td>Honours group (9)</td>
<td></td>
</tr>
<tr>
<td>Relationships with academic staff (5)</td>
<td></td>
</tr>
<tr>
<td>Benefits for other areas of academic study (5)</td>
<td></td>
</tr>
<tr>
<td>New perceptions (4)</td>
<td></td>
</tr>
<tr>
<td>Not with the pack (3)</td>
<td></td>
</tr>
<tr>
<td>Research community of practice (3)</td>
<td></td>
</tr>
<tr>
<td>Informing occupational practice (1)</td>
<td></td>
</tr>
</tbody>
</table>
Appendix H: Emergent issues from the mid interviews

<table>
<thead>
<tr>
<th>Issues arising during mid interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>10 participants</strong></td>
</tr>
<tr>
<td>Coping with other work/managing workload (Holly; Lauren; Emma; Jess; Maria; Sarah; Cassie; Ellie; Rachel; Nicola)</td>
</tr>
<tr>
<td>Support networks (Holly; Lauren; Emma; Jess; Maria; Sarah; Cassie; Ellie; Rachel; Nicola)</td>
</tr>
<tr>
<td>Relationship of honours to clinical practice (Holly; Lauren; Emma; Jess; Maria; Sarah; Cassie; Ellie; Rachel; Nicola)</td>
</tr>
<tr>
<td>Role models (Holly; Lauren; Emma; Jess; Maria; Sarah; Cassie; Ellie; Rachel; Nicola)</td>
</tr>
<tr>
<td><strong>9 participants</strong></td>
</tr>
<tr>
<td>Research supervisors (Holly; Lauren; Emma; Jess; Sarah; Cassie; Ellie; Rachel; Nicola)</td>
</tr>
<tr>
<td>Honours as a different way of working (Holly; Lauren; Emma; Maria; Sarah; Cassie; Ellie; Rachel; Nicola)</td>
</tr>
<tr>
<td>Motivation (Holly; Emma; Jess; Maria; Sarah; Cassie; Ellie; Rachel; Nicola)</td>
</tr>
<tr>
<td><strong>8 participants</strong></td>
</tr>
<tr>
<td>Value of honours (Holly; Lauren; Emma; Jess; Maria; Cassie; Ellie; Nicholson)</td>
</tr>
<tr>
<td>New perspectives/perceptions (Lauren; Emma; Jess; Maria; Sarah; Cassie; Ellie; Nicholson)</td>
</tr>
<tr>
<td>Impact of honours on life (Holly; Lauren; Emma; Jess; Maria; Sarah; Rachel; Nicola)</td>
</tr>
<tr>
<td>Honours peer support (Lauren; Emma; Jess; Maria; Sarah; Cassie; Rachel; Nicola)</td>
</tr>
<tr>
<td>Talking about honours (Holly; Lauren; Jess; Sarah; Cassie; Ellie; Rachel; Nicola)</td>
</tr>
<tr>
<td>Research community of practice (Holly; Lauren; Jess; Maria; Sarah; Ellie; Rachel; Nicola)</td>
</tr>
<tr>
<td>Honours as a different way of learning (Lauren; Emma; Jess; Sarah; Cassie; Ellie; Rachel; Nicola)</td>
</tr>
<tr>
<td>Research skills (Holly; Emma; Jess; Maria; Sarah; Ellie; Rachel; Nicola)</td>
</tr>
<tr>
<td>Development of writing skills (Holly; Emma; Jess; Sarah; Cassie; Ellie; Rachel; Nicola)</td>
</tr>
<tr>
<td>Becoming independent (Lauren; Jess; Maria; Sarah; Cassie; Ellie; Rachel; Nicola)</td>
</tr>
<tr>
<td><strong>7 participants</strong></td>
</tr>
<tr>
<td>Learning about self (Holly; Lauren; Emma; Jess; Cassie; Ellie; Nicholson)</td>
</tr>
<tr>
<td>Communication skills (Lauren; Emma; Jess; Maria; Cassie; Rachel; Nicola)</td>
</tr>
<tr>
<td>Feelings about honours (Jess; Maria; Sarah; Cassie; Ellie; Rachel; Nicola)</td>
</tr>
<tr>
<td>Coping (Jess; Maria; Sarah; Cassie; Ellie; Rachel; Nicola)</td>
</tr>
<tr>
<td><strong>6 participants</strong></td>
</tr>
<tr>
<td>Structuring honours /imposing a structure(Lauren; Emma; Jess; Maria; Sarah; Cassie)</td>
</tr>
<tr>
<td>Metaphor for honours (Holly; Lauren; Jess; Maria; Cassie; Ellie)</td>
</tr>
<tr>
<td>Understanding research (Holly; Lauren; Emma; Jess; Ellie; Nicola)</td>
</tr>
<tr>
<td>Self-belief (Jess; Maria; Cassie; Ellie; Rachel; Nicola)</td>
</tr>
<tr>
<td>Self-discipline (Maria; Sarah; Cassie; Ellie; Rachel; Nicola)</td>
</tr>
<tr>
<td>Perception of honours (Maria; Sarah; Cassie; Ellie; Rachel; Nicola)</td>
</tr>
<tr>
<td>Stress (Holly; Jess; Maria; Ellie; Rachel; Nicola)</td>
</tr>
<tr>
<td>Impact on self/self development (Maria; Sarah; Cassie; Ellie; Rachel; Nicola)</td>
</tr>
<tr>
<td>Organisation skills and time management (Holly; Lauren; Emma; Jess; Ellie; Nicola)</td>
</tr>
<tr>
<td>Attitudes towards honours students (Holly; Lauren; Emma; Jess; Ellie; Rachel)</td>
</tr>
</tbody>
</table>
5 participants
Choice (Emma; Jess; Maria; Sarah; Cassie)
Making a contribution/Contributing to professional knowledge (Holly; Maria; Sarah; Cassie; Nicola)
Postgraduate opportunities (Jess; Maria; Sarah; Ellie; Nicola)
Engagement (Maria; Sarah; Cassie; Ellie; Rachel)
Honours group (Maria; Sarah; Cassie; Ellie; Nicola)
Extending personal knowledge (Maria; Sarah; Cassie; Ellie; Nicola)
Positive influences (Maria; Sarah; Ellie; Rachel; Nicola)
Challenges (Emma; Cassie; Ellie; Rachel; Nicola)
Support for research (Sarah; Cassie; Ellie; Rachel; Nicola)

4 participants
Honours vs. clinical work (Holly; Lauren; Emma; Maria)
PhD preparation (Holly; Lauren; Ellie; Nicola)
Foundation for research (Maria; Sarah; Ellie; Nicola)
Negative influences (Maria; Cassie; Ellie; Rachel)
Sense of direction (Jess; Ellie; Rachel; Nicola)
Keeping a balance (Holly; Ellie; Rachel; Nicola)

3 participants
Informing occupational practice (Emma; Jess; Cassie)
Impact on life (Sarah; Cassie; Ellie)
Development of the practitioner-researcher (Holly; Lauren; Ellie)
Career planning (Holly; Lauren; Rachel)
Honours decision making (Ellie; Rachel; Nicola)
Personal attributes (Maria; Rachel; Nicola)
Not with the pack (Ellie; Rachel; Nicola)
Relationships with academic staff (Ellie; Rachel; Nicola)

2 participants
Benefits for other areas of academic study (Jess; Sarah)
Academic ability (Maria; Cassie)
Impact of honours on other academic/clinical work (Emma; Ellie)
Finding your place (Jess; Ellie)
Taking ownership (Jess; Rachel)
Gender issues (Ellie; Rachel)
Opportunities with honours (Rachel; Nicola)

Meaning of honours

<table>
<thead>
<tr>
<th>Items coded from mid interviews</th>
<th>Emergent themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support networks (10)</td>
<td>A different way of working and learning</td>
</tr>
<tr>
<td>Research supervisors (9)</td>
<td></td>
</tr>
<tr>
<td>Honours as a different way of working (9)</td>
<td></td>
</tr>
<tr>
<td>Honours as a different way of learning (8)</td>
<td></td>
</tr>
<tr>
<td>Honours peer support (8)</td>
<td></td>
</tr>
<tr>
<td>Talking about honours (8)</td>
<td>Feelings about honours (7)</td>
</tr>
<tr>
<td>--------------------------</td>
<td>---------------------------</td>
</tr>
<tr>
<td>Stress (6)</td>
<td>Perception of honours (6)</td>
</tr>
<tr>
<td>Attitudes towards</td>
<td></td>
</tr>
<tr>
<td>honours students (6)</td>
<td>Choice (5)</td>
</tr>
<tr>
<td>Honours group (5)</td>
<td>Challenges (5)</td>
</tr>
<tr>
<td>Support for research (5)</td>
<td>Honours decision making (3)</td>
</tr>
<tr>
<td>Not with the pack (3)</td>
<td></td>
</tr>
<tr>
<td>Impact of honours on life</td>
<td></td>
</tr>
<tr>
<td>Relationships with</td>
<td></td>
</tr>
<tr>
<td>academic staff (3)</td>
<td></td>
</tr>
<tr>
<td>Personal attributes (3)</td>
<td></td>
</tr>
<tr>
<td>Academic ability (2)</td>
<td></td>
</tr>
<tr>
<td>Benefits for other areas</td>
<td></td>
</tr>
<tr>
<td>of academic study (2)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Coping with other work/</th>
<th>Managing workload (10)</th>
<th>Role models (10)</th>
<th>Motivation (9)</th>
</tr>
</thead>
<tbody>
<tr>
<td>work/Managing work</td>
<td>Research community of</td>
<td></td>
<td></td>
</tr>
<tr>
<td>workload (10)</td>
<td>practice (8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Role models (10)</td>
<td>Motivation (9)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Motivation (9)</td>
<td>Research community of</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Practice (8)</td>
<td>Coping (7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coping (7)</td>
<td>Self-discipline (6)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Structuring honours/imposing a structure</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td>Keeping a balance (4)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Impact of honours on other academic/clinical work (2)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Impact of honours on life (8)</th>
<th>Development of writing skills (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Development of writing skills (8)</td>
<td>Research skills (8)</td>
</tr>
<tr>
<td>Research skills (8)</td>
<td>Becoming independent (8)</td>
</tr>
<tr>
<td>Becoming independent (8)</td>
<td>Communication skills (7)</td>
</tr>
<tr>
<td>Communication skills (7)</td>
<td>Organisation skills and time management (6)</td>
</tr>
<tr>
<td>Organisation skills and time management (6)</td>
<td>Understanding research (6)</td>
</tr>
<tr>
<td>Understanding research (6)</td>
<td>Self-belief (6)</td>
</tr>
<tr>
<td>Self-belief (6)</td>
<td>Positive influences (5)</td>
</tr>
<tr>
<td>Positive influences (5)</td>
<td>Entry to PhD (4)</td>
</tr>
<tr>
<td>Entry to PhD (4)</td>
<td>Negative influences (4)</td>
</tr>
<tr>
<td>Negative influences (4)</td>
<td>Taking ownership (2)</td>
</tr>
<tr>
<td>Taking ownership (2)</td>
<td>Finding your place (2)</td>
</tr>
</tbody>
</table>

**Structuring the honours experience**

**Developing skills**
<table>
<thead>
<tr>
<th>Relationship of honours to clinical practice (10)</th>
<th>Exploring professional and occupational practice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Value of honours (8)</td>
<td></td>
</tr>
<tr>
<td>New perspectives/perceptions (8)</td>
<td></td>
</tr>
<tr>
<td>Impact on self/self-development (6)</td>
<td></td>
</tr>
<tr>
<td>Engagement (5)</td>
<td></td>
</tr>
<tr>
<td>Extending personal knowledge (5)</td>
<td></td>
</tr>
<tr>
<td>Making a contribution/ Contributing to professional knowledge (5)</td>
<td></td>
</tr>
<tr>
<td>Postgraduate opportunities (5)</td>
<td></td>
</tr>
<tr>
<td>Foundation for research (4)</td>
<td></td>
</tr>
<tr>
<td>Sense of direction (4)</td>
<td></td>
</tr>
<tr>
<td>Honours vs. clinical work (4)</td>
<td></td>
</tr>
<tr>
<td>Development of the practitioner-researcher (3)</td>
<td></td>
</tr>
<tr>
<td>Informing occupational practice (3)</td>
<td></td>
</tr>
<tr>
<td>Career planning (3)</td>
<td></td>
</tr>
<tr>
<td>Opportunities with honours (2)</td>
<td></td>
</tr>
<tr>
<td>Meaning of honours (1)</td>
<td></td>
</tr>
</tbody>
</table>
## Appendix I: Emergent issues from the final interviews

### Issues arising during final interview

<table>
<thead>
<tr>
<th>Participants</th>
<th>Issues</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 participants</td>
<td><strong>Research vs. clinical practice</strong> (Rachel; Ellie; Nicola; Emma; Jess; Holly; Sarah; Lauren; Maria)</td>
</tr>
<tr>
<td></td>
<td><strong>Relationship with clinical practice</strong> (Rachel; Ellie; Nicola; Emma; Jess; Holly; Sarah; Lauren; Maria)</td>
</tr>
<tr>
<td></td>
<td><strong>Research supervisors</strong> (Rachel; Ellie; Nicola; Emma; Jess; Holly; Sarah; Lauren; Maria)</td>
</tr>
<tr>
<td></td>
<td><strong>Writing for research</strong> (Rachel; Ellie; Nicola; Emma; Jess; Holly; Sarah; Lauren; Maria)</td>
</tr>
<tr>
<td>8 participants</td>
<td><strong>Entry to PhD</strong> (Rachel; Ellie; Nicola; Emma; Jess; Holly; Lauren; Maria)</td>
</tr>
<tr>
<td></td>
<td><strong>Novice researcher</strong> (Rachel; Ellie; Nicola; Emma; Jess; Holly; Lauren; Maria)</td>
</tr>
<tr>
<td></td>
<td><strong>Negative influences</strong> (Rachel; Ellie; Emma; Jess; Holly; Sarah; Lauren; Maria)</td>
</tr>
<tr>
<td></td>
<td><strong>Research community of practice</strong> (Rachel; Ellie; Emma; Jess; Holly; Sarah; Lauren; Maria)</td>
</tr>
<tr>
<td></td>
<td><strong>Positive influences</strong> (Rachel; Ellie; Emma; Jess; Holly; Sarah; Lauren; Maria)</td>
</tr>
<tr>
<td></td>
<td><strong>Managing workload</strong> (Rachel; Nicola; Emma; Jess; Holly; Sarah; Lauren; Maria)</td>
</tr>
<tr>
<td>7 participants</td>
<td><strong>Meaning of honours</strong> (Rachel; Ellie; Emma; Jess; Holly; Lauren; Maria)</td>
</tr>
<tr>
<td></td>
<td><strong>Feelings about honours</strong> (Rachel; Nicola; Emma; Jess; Holly; Sarah, Maria)</td>
</tr>
<tr>
<td></td>
<td><strong>Career decision making</strong> (Rachel; Ellie; Jess; Holly; Sarah; Lauren, Maria)</td>
</tr>
<tr>
<td></td>
<td><strong>Self-belief</strong> (Rachel; Ellie; Jess; Sarah; Lauren; Maria)</td>
</tr>
<tr>
<td></td>
<td><strong>Value of honours</strong> (Rachel; Nicola; Jess; Holly, Sarah; Lauren; Maria)</td>
</tr>
<tr>
<td>6 participants</td>
<td><strong>Engagement</strong> (Rachel; Ellie; Nicola; Emma; Jess; Maria)</td>
</tr>
<tr>
<td></td>
<td><strong>Opportunities with honours</strong> (Ellie; Nicola; Emma; Jess; Holly; Maria)</td>
</tr>
<tr>
<td></td>
<td><strong>Self-development</strong> (Rachel; Ellie; Nicola; Emma; Jess; Maria)</td>
</tr>
<tr>
<td></td>
<td><strong>Learning through honours</strong> (Rachel; Ellie; Nicola; Emma; Jess; Maria)</td>
</tr>
<tr>
<td></td>
<td><strong>Talking about honours</strong> (Rachel; Ellie; Nicola; Jess; Lauren; Maria)</td>
</tr>
<tr>
<td></td>
<td><strong>New perceptions</strong> (Nicola; Emma; Holly; Sarah; Lauren; Maria)</td>
</tr>
<tr>
<td></td>
<td><strong>Foundation for research</strong> (Rachel; Ellie; Holly; Sarah; Lauren; Maria)</td>
</tr>
<tr>
<td>4 participants</td>
<td><strong>Not with the pack</strong> (Rachel; Nicola; Emma; Jess)</td>
</tr>
<tr>
<td></td>
<td><strong>Research skills</strong> (Ellie; Emma; Holly; Sarah)</td>
</tr>
<tr>
<td></td>
<td><strong>Finding a balance</strong> (Rachel; Ellie; Jess; Maria)</td>
</tr>
<tr>
<td>3 participants</td>
<td><strong>Personal support</strong> (Rachel; Ellie; Jess)</td>
</tr>
<tr>
<td></td>
<td><strong>Personal attributes</strong> (Jess; Holly; Sarah)</td>
</tr>
<tr>
<td></td>
<td><strong>Honours peer support</strong> (Rachel; Holly; Sarah)</td>
</tr>
<tr>
<td></td>
<td><strong>Impact on life</strong> (Holly; Sarah; Maria)</td>
</tr>
<tr>
<td>2 participants</td>
<td><strong>Perception of honours</strong> (Ellie; Jess)</td>
</tr>
<tr>
<td></td>
<td><strong>Understanding research</strong> (Emma; Jess)</td>
</tr>
<tr>
<td></td>
<td><strong>Finding your place</strong> (Rachel; Ellie)</td>
</tr>
</tbody>
</table>
### Items coded from late interviews

<table>
<thead>
<tr>
<th>Vignette (9)</th>
<th>Research supervisors (9)</th>
<th>Managing workload (8)</th>
<th>Positive influences (8)</th>
<th>Negative influences (8)</th>
<th>Feelings about honours (7)</th>
<th>Talking about honours (6)</th>
<th>Finding a balance (4)</th>
<th>Not with the pack (4)</th>
<th>Personal support (3)</th>
<th>Honours peer support (3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Motivation (2)</td>
<td>Seeking a challenge (2)</td>
<td>Finding your place (2)</td>
<td>Experience of research (1)</td>
<td>Role models (1)</td>
<td>Research vs. clinical practice (9)</td>
<td>Relationship with clinical practice (9)</td>
<td>Career decision making (7)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Emergent themes

| Reviewing the honours experience | New insights | Developing the novice researcher | Clinical practice vs. research |
References


Balster, N., Pfund, C., Rediske, R., & Branchaw, J. (2010). A course that creates community and structure for beginning undergraduate researchers in the STEM...


Freegard, P. (2008). *The take-up of honours in the school of humanities*: University of Western Australia.

Frishman, W. H. (2001). Student research projects and theses: should they be a requirement for medical school graduation? *Heart Disease, 3*, 140-144.


Lempp, H. (2005). Qualitative research in understanding the transformation from medical student to doctor. Education for Primary Care, 16(6), 648-654.


Shaw, K. (2010). *Student experience of fourth year undergraduate research projects: how prepared are they for further research?* Paper presented at the Quality in Postgraduate Research Conference.


