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THE GOOD-ENOUGH DISSERTATION: A MODEST PROPOSAL

Sandra P. Thomas, PhD, RN, FAAN

This article addresses the paralysis of perfectionism, a factor in the failure of a doctoral candidate to complete the dissertation. A remedy is proposed.

How is it that a bright and capable doctoral student experiences a strange sort of paralysis during the gestation period of a doctoral dissertation? Despite a prolonged labor, strong contractions, periods of vigorous pushing, and considerable pain and anguish, delivery of a viable dissertation does not take place. My colleagues in obstetric nursing might diagnose uterine inertia. Perhaps there is another cause. Maybe the midwife did too little to facilitate the birth or the support person was not present to serve as cheerleader. Lenz and Hardin¹ noted that the unavailability of faculty advisors is a frequent complaint of doctoral students and a factor that is related to students' failure to complete dissertation requirements.

We might wonder whether the prospective "parent" was properly prepared for the transition to parenthood. Maybe the prospective parent could not envision boldly bringing something new into the world and giving it a name, claiming it as one's own unique creation. Birthing something does take courage. The scrutiny of one's precious brain-child by the scientific community may evoke intense anxiety. Envisioning one's words in a bound volume that is housed for perpetuity on the shelf of the library could be quite intimidating to some doctoral candidates.

In some cases, the cause of the strange paralysis at the time of "delivery" can be traced all the way back to difficulties at the time of conception. Perhaps a skillful sleuth could uncover territorial disputes and personality conflicts among the faculty that influenced the doctoral student's decision to undertake research on a topic that was not freely chosen. When a student has been coerced by faculty to conceive, there may be considerable reluctance to carry the pregnancy to term.

Undoubtedly, the cause of the paralysis is multifactorial. At any rate, the dissertation is stillborn. The potential contribu-

tion of the doctoral candidate's research to nursing theory, research, and practice has been aborted, and the nursing profession has added to its ranks another "ABD," the acronym by which we know those individuals who have completed all of the course work and all of the requirements for the doctoral degree, all *but* the dissertation, of course. Given that nursing is facing a critical shortage of doctorally prepared people, especially to fill faculty roles, we cannot afford to enlarge the cadre of ABDs.² Although acknowledging that many factors (both internal and external) may contribute to the paralysis, I have chosen to address just one: the paralysis of perfectionism. Perfectionism is problematic both for the dissertation committee members and for the self-critical doctoral candidate. In the immaculate perception of a perfectionist, no review of literature is exhaustive; surely, there is still another pertinent study out there somewhere. No draft of the dissertation is good enough to withstand scrutiny by the august body of seasoned scholars.

When perfectionism is an ingrained characteristic of the candidate's personality, the candidate may need a more intensive intervention than we faculty can deliver. I am addressing my remarks to you, my faculty colleagues who supervise dissertations. Surely we can modify our own perfectionism! There is a notion (too commonly perpetuated by faculty members) that the dissertation is an exalted once-in-a-lifetime product that not only demonstrates the candidate's encyclopedic coverage of all extant theoretic and research literature on the topic but also exemplifies the brilliance of Heidegger and the eloquence of a Pulitzer Prize-winning journalist. And, of course, with our multivariate mindset, heaven forbid that an unmeasured variable has been overlooked!

I am proposing an antidote for faculty perfectionism. I am putting forth a modest proposal for the "good-enough" dissertation, borrowing from psychoanalyst Winnicott's³ concept of the "good-enough" mother. In a society that widely propagated the ideal of the perfect mother, ever ready to blame her for any pathologic condition of her children, Winnicott's words were a breath of fresh air. In the 1950s and 1960s, he began to speak and write about the "ordinary devoted mother" or "good-enough mother."³ He sought to diminish the pervasive guilt that mothers feel about their failure to achieve the ideal of the perfect mother. The good-enough mother will make some mistakes along the way, but these mistakes will not have fatal consequences. Winnicott warned professionals about making a

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young mother too self-conscious about the importance of her task. When experts are too directive or critical, she will not trust her own knowledge and intuition. Striving for perfection, she will do the task less well.

I believe there is a lesson here for those of us who mentor doctoral students in the conduct of their dissertation research. Are we holding them to an impossible ideal? Yes, say a number of doctoral students who shared their experiences with me in hallways, coffee shops, conferences, and seminars. Whether male or female, they resonated with the analogy of the prolonged gestation period. They bemoaned the bloated, redundant tomes that are demanded by their dissertation committees. Their words brought to mind some ABDs who simply could not produce the massive tomes. They could not rewrite chapter 2 again, for the umpty-eleventh time. They could not stomach having to stifle their own personal writing style to adopt the “acute, fulminating jargonitis”⁴ that their committee members seemed to like. They could not continue to carry the load when the 9 months of gestation dragged on for more than a year, in some cases for many years. Demoralized and weary, some candidates lost their passion. They opted out.

Have we forgotten that a dissertation is intended to be a positive learning experience? Yes, it should represent a doctoral candidate’s mastery of a particular area. Consistent with standards of graduate schools across the nation, it should make an original contribution to the knowledge of the discipline. And, of course, it should be well written. But let us put the dissertation into proper perspective. It is, after all, a student project. Why should its completion take more than 1 year, when the nursing profession is facing an unparalleled faculty shortage?

Why should faculty members demand a document of 100 pages or more, making its subsequent condensation into a 16-page journal article so difficult? Why should we demand countless revisions, progressively dampening the confidence and enthusiasm of the student?

Perhaps we need to remind ourselves that a dissertation is only the initial step in a researcher’s career trajectory. It is a preliminary investigation of a complex phenomenon that will take a lifetime to thoroughly examine. The good-enough dissertation is not a dissertation of inferior quality. However, it is a piece of research that is feasible within the candidate’s presently available resources of time, energy, expertise, and finances. After the “birth,” the researcher can mount more ambitious and sophisticated investigations, just as the good-enough parent makes a lifelong investment in helping a child grow and develop to maturity. I believe that faculty have a moral obligation to serve as good midwives, who foster the doctoral student’s timely and confident assumption of the “parental” role. The successful research trajectory is launched when we encourage and accept the good-enough dissertation. ■

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