



Challenges and opportunities nurses experienced to turn conference presentations into journal articles

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ABSTRACT

Background: Nurses need to build their professional knowledge base through the publication of research findings in scientific journals. Substantial preparation goes into the preparation of a conference presentation, which could form the basis of a subsequent publication.

Methods: A descriptive single case study design with multiple data types was used to describe the extent to which nurses from Southern Africa convert their conference presentation into journal articles; and to describe the prohibiting or supporting issues they experience in converting their conference presentations into journal articles.

Setting and participants: Nurses in low and middle-income countries form the backbone of health services in for example the Southern African region. Many of those nurses present papers at annual regional nursing conferences.

Data collection: Administrative staff from three reputable nursing organisations sent recruitment and information letters to the members on the databases, requesting them to complete a short questionnaire via SurveyMonkey™. The questionnaire comprised closed and open-ended questions. The software of SurveyMonkey™ automatically performed descriptive analyses of the closed-ended questions. The researchers analysed the narrative data obtained via the open-ended questions through open inductive coding.

Results: The majority of nurses (78,3%) who attended and/or presented papers at an international conference had at least a master's degree and are therefore no strangers to research. However, only 46 individuals reported 70 publications that derived from conference presentations over the last 5 years. Positive feedback from reviewers and receiving incentives were identified, among others, as motivators while common inhibitors were the complexity related to the writing, submitting and reviewing processes as well as the lack of dedicated time.

Conclusions: Contextual factors such as offering parallel programmes, supplementing an insufficient income with consultation work, lack of time and incentives, and lack of mentors to guide novices through the complex process of writing and submitting articles may be more pronounced in low and middle-income countries than in developed countries. A comparison between the north-south rate of converting conference presentations into journal articles may provide further light on this topic.

1. Introduction and background

The nursing profession needs nurses who are prepared for master's and doctoral studies (Benner, Sutphen, Leonard, & Day, 2010) to build the knowledge base for nursing scholarship. However, Thoun (2009) is of the opinion that scholarship is not only demonstrated through published articles, but also through attending and participating in scientific and professional meetings, writing research proposals for funding, curriculum development based on reflective practice resulting in publication in refereed journals, evaluation of educational technologies,

leadership in teaching and administrative practice related to education oriented or health oriented institutions, evaluating papers and grant applications, theory based practice documented through published reports, documentation of knowledge transfer to practice settings, and leadership in practice resulting in development of practice procedures, change in policies and advocacy for nursing practice. Although Stockhausen and Turale (2011) as well as Turale et al. (2010) voiced their concern that publishing in high-impact journals is the only evidence of scholarly activity, the fact remains that research results that are not disseminated cannot contribute to the much-needed body of

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knowledge in the profession.

Annually a three-day nursing conference is held where nurses from Southern Africa present research papers of high quality that were peer-reviewed by established research committees. According to the 27th International Nursing Research Congress 2016 programme book, 700 delegates attended the conference during which 199 posters and 224 oral papers were presented. The number of attendees is proof that institutions and individuals invest money into attending and presenting at conferences, possibly with the expectation that the research outputs generated will contribute positively to subsidy.

Within the South African context, the subsidy regimen allows higher education institutions to receive government subsidy, but only research published in peer-reviewed, accredited journals that appear on the DHET, IBSS, ISI, Scopus, Norwegian and ScieLOSA lists generate subsidy.

The number of oral papers and posters presented during the 2016 conference is evidence that high quality research is being done in Southern Africa, but it will not contribute to the body of knowledge if it is not published. In a study conducted by Botma and Roets (2013), 86% of the participants who attended such a conference in 2011 had completed their master's degree in nursing; a lesser number of these having obtained a PhD, but only 37% of the 86% had ever published an article. Although Thoun (2009) mentions various ways of demonstrating scholarship as indicated above, most of the products still need to be in the public domain for peer review and comment to be acknowledged as research outputs.

The assumption underpinning this research is that most of the preparatory work for an article is being done while preparing for an oral or poster presentation at a conference. Daruwalla, Huq, Wong, Nee, and Murphy (2015) support this assumption by stating that a conference presentation should form the basis of a subsequent publication in a peer-reviewed journal. Gibbs (2016) is also of the opinion that the bulk of the reading for an article had been done in preparation for a conference paper. The question that arises is: Why do nurses with master's and doctoral degrees present papers at international conferences, but do not disseminate the results in scientific journals as research output?

2. Aim and research design

A descriptive single case study design with multiple data types was used to explore the (a) extent to which conference presentations are converted into journal articles; and (b) the supporting or prohibiting issues nurses experience in their efforts of converting the conference presentations into articles. The context of this case study is the Southern African region that comprises low and middle-income countries. All these countries have a decentralised primary healthcare service delivery model, with nurses often the only healthcare professionals at these decentralised sites. Despite a severe shortage of nurses, they remain the core of the health services in all the countries in this region. Therefore, dissemination and translation of their research results into practice could contribute to meeting the region's healthcare needs. A pragmatic approach underpins this case study.

3. Data collection method

The researchers compiled a questionnaire that consisted of closed-ended as well as open-ended questions. A thorough literature overview of factors that promote or hinder scholarship development and the publication of results enhanced the face and content validity of the questionnaire. Experts responsible for scholarship development at two universities agreed that the questionnaire provided the information required to answer the research question.

4. Population and sampling

The population consisted of all members of the Sigma Theta Tau International (STTI) Africa Consortium, all nurse educators affiliated with higher education institutions, as published in the booklet compiled by the Forum of University Nursing Deans in South Africa (FUNDISA), as well as all members of the Nursing Education Association (NEA) in South Africa. Nurse educators in Southern Africa may belong to all three prestigious organisations. The accessible population size was 820. Census sampling allowed the entire accessible population to participate in the survey.

5. Pilot study

Colleagues at the two institutions with which the authors are associated, volunteered to complete the questionnaire on SurveyMonkey™ and were asked to indicate if there were any ambiguous questions. The researchers corrected grammatical errors of two questions as per their recommendation. The data from the pilot study were not included in the final data set.

6. Data collection

After the Research Ethics Committee of the Department of Health Studies at the University of South Africa had provided ethics approval (HSHDC/313/2014), the researchers asked permission of the boards of STTI Africa Consortium, FUNDISA and NEA to distribute the recruitment letter to their members. Through the boards, the secretaries of the respective organisations sent the electronic recruitment letter to 820 members. The recruitment letter explained the purpose of the research and requested recipients to voluntarily participate via a SurveyMonkey™ questionnaire. It was clearly stated that respondents consented to participate in the research by completing and submitting the questionnaire online.

Only 57 questionnaire responses were received from SurveyMonkey™ after the gatekeepers had sent out the first recruitment letter. Despite a reminder sent by the gatekeeper on our request, no new questionnaires were received. Due to the poor response, hard copies of the recruitment letter and questionnaire were distributed at the annual regional conference of STTI in 2016. Only a few additional responses were received. As a last resort to increase the number of responses, a research assistant electronically sent the recruitment letter to all members of FUNDISA as their contact details were in the open domain. An additional 63 responses were received.

Of the 820 e-mail requests for participation sent out, only 120 questionnaires were received back for analysis. Due to possible changes in e-mail addresses and membership, it is not possible to express a reliable response rate for this in a percentage.

7. Data analysis

SurveyMonkey™ software automatically performs descriptive analysis of categorical data generated by closed-ended questions. All narrative data generated through open-ended questions were extracted from SurveyMonkey™ as well as from the hard copy questionnaires and inductively analysed by means of open coding according to the eight steps as described by Tesch. The researchers scrutinised the data repeatedly until themes emerged. They independently coded phrases and clustered them to form categories. The researchers reached consensus on the themes and categories through discussion.

Trustworthiness of narrative data from the open-ended questions was enhanced by having a data trial and using a co-coder that confirmed the truth value of the study. Furthermore, direct quotations from the respondents enhance the truth value of the data. The research is relevant because Africa has a very high burden of disease and it is believed that research from Africa itself should offer solutions to the

challenges. The dense descriptions of the narrative data and findings promote transferability of the results. The researchers were diligent and meticulous during the whole research process.

8. Ethics

Ethics approval was obtained from an institutional review board (HSHDC/313/2014). Participants could opt to click “yes” or “no” after reading through the recruitment letter. The recruitment letter, attached to the e-mail invitations as well as the hard copies, provided information regarding voluntary participation, informed consent, the opportunity to opt out without adverse consequences, as well as the confidentiality of the data gathered. If they had chosen “no”, they would not have been allowed access to the questionnaire and were routed out of the study. Those who clicked “yes” could then complete the questionnaire with no fears of being identified, as no identifiable information had been included in the questionnaire. Results obtained via SurveyMonkey™ are in an aggregate format. In the case of the paper copies, respondents deposited their completed copies in a sealed box at a central location at the conference venue.

9. Findings

9.1. Demographic information

Table 1 depicts the demographic data of the respondents. The data reveal that the sample consisted of nurses between the ages of 25 and 74. Of these, 68% are 45 years or older. The majority (78%) has a master’s or a doctoral degree.

9.2. Research outputs

Of the 120 respondents, 33 indicated that they intermittently attend conferences, but had never presented a paper. Seventy-nine had attended 1–5 conferences, 4 attended 6–10 and 4 attended 11–15 in the last five years.

The 120 respondents who attended conferences and presented papers had collectively submitted 70 manuscripts for publication. Of these, 62 had been published and two were being corrected at the time of data gathering. What is of concern is that all the published papers were from only 46 individuals, all of who presented papers at conferences. Two themes emerged from these facts, namely motivators and inhibitors.

9.3. Motivators/inhibitors

Positive feedback, specific time to write, recognition by peers and supervisors, and receiving support were the factors that motivated nurses to write for publication. The six categories of inhibiting factors

Table 1
Age and qualification distribution of respondents (N = 120).

| Age | f | % |
|-----------------------------|----|------|
| 25–34 | 12 | 10 |
| 35–44 | 26 | 21,6 |
| 45–54 | 39 | 32,5 |
| 55–64 | 37 | 30,9 |
| 65–74 | 6 | 5 |
| Qualification | | |
| Basic nursing diploma | 1 | 0,8 |
| Advanced diploma in nursing | 2 | 1,7 |
| Bachelors’ degree | 23 | 19,2 |
| Master’s degree | 53 | 44,2 |
| Doctorate | 10 | 8,3 |
| PhD | 31 | 25,8 |

identified are: negative feedback from reviewers or subjective reviewers, the long turnaround time for feedback, time constraints, lack of support and resources, strenuous submission processes, and contextual requirements.

10. Discussion of the findings

More than half of the respondents (63%) fall within the age group of 45–64 years. This finding aligns with the global trend of an aging healthcare workforce. It may also be that mature people are more readily afforded the opportunity to attend conferences. Min, Abdullah, and Mohamed (2013) found a strong correlation between seniority and publication productivity in Australia, but less so in developing countries like China where young academics have to secure a tenure that is based on research outputs.

Only 26 of the 120 respondents did not have a master’s or doctoral degree. This indicates that the majority of the respondents have previously done independent research. Seventy (58%) respondents had submitted manuscripts; this rate is higher than the 35,8% observed in the study by Daruwalla et al. (2015). However, the publication rates from various countries’ national conferences ranged between 26,6% and 58,1%. Daruwalla et al. (2015) concluded that international presenters and those who presented oral papers are more likely to publish than local presenters and those who had poster presentations. Furthermore, those outside of the academia may not feel the pressure to publish as much as those working at universities and institutes (Van Dalen & Henkens, 2012). Contrary to the statement by Dalen and Henkens, Kooker, Latimer, and Mark (2015) found that many bedside nurses are compelled to publish evidence-based practice outcomes. However, many nurses do not see the benefits to publish when they are in a clinical position (Paliadelis, Parker, Parmenter, & Maple, 2014). Not seeing the advantage may also be true for academics in developing countries where publications do not contribute to subsidy or where they do not receive any incentives towards publication. Due to poor salaries, many academics in under-resourced countries augment their salaries via consultations that take up the time that could have been spent on academic writing (Kilonzo & Magak, 2013).

10.1. Motivators

Four factors motivate people to publish, namely positive feedback, specific time allocation to write, recognition, and support. Van Dalen and Henkens (2012) support the notion that constructive feedback, seeing the article published, and citations serve as intrinsic motivators. In this study, respondents mentioned, “constructive feedback is so helpful”.

The respondents mentioned that writing retreats created specific time slots for them to write which they found beneficial. Typically, writing retreats provide protected and inspired time where a mentor/editor/consultant guide and support authors in preparing and finalising their manuscripts in a non-threatening manner (Kazer, 2013). Other successful strategies closely linked to writing retreats are writing groups, coaching, collaborative writing and academic writing courses (Kooker et al., 2015).

Respondents stated: “to have my article cited” and “seeing my article published is one of my biggest rewards as an academic”. Recognition by peers or the management of the institution is an important motivator. Acknowledgement of authors could be done by displaying their names together with those of nurses who had received additional certification. Alternatively publication outputs could become a performance criterion in both academic and clinical practice (Tyndall & Caswell, 2017). However, monetary incentives remain one of the strongest motivators in countries where academics receive lower salaries than clinicians.

Support by supervisors and peers were highlighted by participants as factors that had a motivational impact: “my supervisors’

encouragement and support motivated me”; “positive mentors that encouraged me”; the support that I received from my colleagues motivated me”; and “a workshop by an experienced nurse researcher helped me”. Study supervisors and mentors provide much needed support, but they may benefit even more than their students. Kilonzo and Magak (2013) found that professors do not have time to conduct and publish their own research and that they were dependent on their postgraduate students for their latest publications. The downside of this situation is that the authors do not gain research experience and do not really meet the criteria of scholarship. Support from published authors makes writing for publication less daunting because it minimises the fear of rejection and uncertainty regarding the publishing process (Dwyer, Friel, McAllister, Searl, & Rossi, 2015; Gibbs, 2016; Kooker et al., 2015; Paliadelis et al., 2014; Tyndall & Caswell, 2017).

10.2. Inhibitors

Respondents in this study identified negative feedback/subjective reviewers, the long waiting time for feedback, lack of support/resources, strenuous submission processes and contextual requirements as factors that demotivated them from publishing. A high teaching and administrative workload is mentioned most frequently as the cause for not publishing. Kilonzo and Magak (2013) concluded in their study that it becomes nearly impossible for scholars at public universities in developing countries to publish in high impact journals. Some of the reasons they cited for this situation are parallel programmes, often run at different campuses and which require traveling time, a preoccupation with consultation services to augment poor salaries, and the exorbitant publication fees of the so-called internationally recognised journals. According to Paliadelis et al. (2014), clinicians have to disengage from their tasks of caring for patients in order to write for publication. This predicament rings true for nurse educators as well, because they are so focused on their teaching responsibilities and the accompaniment of students in clinical practice that writing for publication becomes an add-on instead of a core task. The heavy workload does not allow time for disengagement from the academic, administrative and clinical responsibilities and therefore effectively precludes writing for publication.

In addition, novice or unpublished authors find the publishing process strenuous and daunting as evidenced by the following quotes: “all this red tape to get something submitted”, and “it is difficult to upload your manuscript”. This finding supports the conclusion by Alvarez, Bonnet, and Kahn (2014) that novice authors are unsure where to begin and that they are unfamiliar with the publication process (Tyndall & Caswell, 2017). Respondents confirmed this sentiment with supportive evidence, indicating that “all manuscripts have different author guidelines” and “it is just too much of a hassle”.

Inexperienced reviewers demotivate potential authors, as mentioned by two respondents: “reviewers’ feedback clearly indicate that they are novices” and “negative feedback from a reviewer with no background is demotivating”. According to the respondents, reviewers are subjective when they consider the content and not the content because “reviewers are not positively inclined towards manuscripts from SA” and “the USA is according to reviewers the only pinnacle of all nursing activities”. Contradictory feedback from reviewers, and cases where editors “do not make a call on contradictory review reports” demotivate the respondents from attempting to publish.

One respondent stated, “My only paper accepted was when I published with a doctor”. This perception concurs with Van Dalen and Henkens (2012, p.1283) “that it no longer matters what you write, but only how often, where and with whom you write”. In order to prevent bias, Erren, Shaw, and Morfeld (2016) state that blind reviews will afford the lesser-known researcher a better chance of becoming published. Although the peer review process has evolved over the years, Doyle and Cuthill (2015) are concerned about the mounting criticism of the unreliability of this process and that the “old-boys network” may

still be in effect.

Accessibility to a language and technical editor, as well as affordable page fees were cited by respondents in this survey as additional but essential resources that they lack. Participants in Tyndall and Caswell’s study (2017) also mentioned lack of resources as a stumbling block to publishing. However, many renowned journals offer language editing services. It is also true that the page fees of high impact journals are sometimes exorbitant and that some predatory online journals publish manuscripts for a minimal fee. Cash-strapped individuals will then select the cheaper solution, to their detriment.

Universities in South Africa compel their academics to publish only in journals accredited by the Department of Education and on the ISI list. Some universities no longer offer incentives for publications in South African journals. The accredited international journals provide a wide spectrum to choose from, but in certain cases may limit the exposure or may not include the journals where the experts or renowned researchers in a specific field predominantly publish.

11. Conclusion

An electronic survey was done among conference attendees to determine how many of them had published their oral or poster presentations, what were the motivational and inhibiting factors that influenced their decision to publish or not to publish their conference presentations. Although most of the respondents had done independent research through advanced studies, only 46 were published authors. There is general agreement that most of the reading and preparation had been done while preparing for an oral or poster presentation at a conference. It should require minimal effort to convert the conference presentation into a journal article. However, successful conversion of conference papers into published articles vary between 26% and 58%. This survey indicates that positive feedback from peers and reviewers, having dedicated time to write, being recognised, and receiving support from peers and supervisors motivate people to write for publication.

Time constraints and the complexity of the writing and publishing processes were mentioned as inhibiting factors. Many comments were made about the subjectivity of the review process, namely that it is not important what you publish but with whom you publish, that reviewers are not necessarily knowledgeable enough to review the manuscript, and that editors should make be decisive when reviewers have contradictory reports. In addition, limited access to resources such as editors and the unaffordability of exorbitant page fees were listed as discouraging factors. Contextual conditions such as prescriptive rules regarding the selection of a possible journal in which to publish also hinder publication success.

Strategies such as writing retreats combined with writing workshops, coaching, support and mentoring have been successful in increasing the research outputs at a number of institutions.

12. Limitations

The biggest limitation of the study is the sampling method and the poor response rate, despite all efforts to increase it. Recruiting respondents from FUNDISA’s list of nurse educators unfairly inclined the responses towards South Africa and may not be representative of the other Southern African countries. Furthermore, the information is contextual and cannot be generalised.

13. Recommendations

In order to create an enabling environment that will enhance publication, designated time to write, a support system for authors, and positive motivation and feedback are essential. The current review processes followed by journals need to be scrutinised as many authors experienced bias in feedback when manuscripts are rejected. The exorbitant page fees have to be negotiated and made affordable to authors

from low and middle-income countries.

This descriptive single case study could be replicated in the various countries comprising regions for comparative purposes. A comparison between the north-south rates of converting conference presentations to journal articles could also prove illuminating, as many respondents blamed editors and reviewers of preferential treatment towards authors from certain countries.

Conflict of Interest

The authors declare that they do not have conflict of interest.

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Ethical approval details

Research Ethics Committee of the Department of Health Studies at the University of South Africa provided ethics approval.

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Appendix A. Supplementary data

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