

FEATURE ARTICLE

Who Am I and Where Am I as a Researcher?

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Introduction

Asking “Who am I and where am I as a researcher?” requires more than a chronological recounting of one’s academic and professional milestones. It calls for reflexivity, an active process of examining how my identity, context, and positionality influence the way I conduct research (Berger, 2015; McIntosh, 2023; Yip, 2024). Reflexivity allows me to interrogate how my three-decade career as a military nurse, with its structured competencies of patient care, deployment, and leadership, has shaped not only my professional identity but also my evolving research self.

Unlike civilian nurses, military nurses are constantly reassigned and must adapt to diverse roles depending on rank and mission requirements. Such mobility has afforded me wide-ranging experiences, but it also limited my continuous engagement in research. My trajectory reflects Benner’s (1984) Novice to Expert framework, in which clinical expertise develops progressively through practice. Similarly, my research identity has advanced unevenly across stages of exposure, training, and reflection (Day, 2012; Birnbaum, 2025).

This paper critically reflects on my journey as a military nurse-scholar, tracing how patient care, leadership, and formal academic training intersected with my evolving understanding of research. I acknowledge both strengths and gaps, and I situate myself within a lifelong learning continuum that integrates military nursing expertise with evidence-based inquiry (Sibbald et al., 2024).

Building Competence in Patient Care and Leadership

My earliest years as a commissioned officer began with the Basic Medical Service Officer Course, which initiated me into military customs and traditions, soldiering skills, and the dual role as a professional nurse and a military officer. As a young nurse assigned to the Post-Anesthesia Care Unit (PACU), I focused primarily on patient care. Training as a nurse anesthetist under

anesthesiologists deepened my technical competence, and for years I honed my skills in the operating room.

A major transition came with my reassignment to the Presidential Security Group Hospital (PSGH), where I carried multiple roles: charge nurse, anesthesia provider, administrative officer, supply officer, mess officer and medical security team member. This experience crystallized the dual expectations of military nursing: clinical excellence and operational leadership. During this time, research had no place in my daily practice; my professional identity was anchored in service and mission readiness.

Looking back reflexively, I recognize how this shaped my orientation to research. In military culture, immediate operational needs often take precedence over scholarly inquiry. Nursing care was evaluated in terms of efficiency and mission success rather than research outcomes. This illustrates how institutional culture influences researcher identity (Finlay, 2002; Sibbald et al., 2024). While I was developing as a leader and clinician, my research identity remained dormant.

First Encounters with Research

My first serious engagement with research came not in the clinical arena but through formal academic training. At the Technical Service Officer Advance Course (TSOAC), I was introduced to research under the guidance of Lt. Col. Carfredda Dumlao NC. Scoring 96/100 in what was considered a “killer subject” gave me newfound confidence: perhaps I could be a researcher after all.

This turning point resonates with Kolb’s (1984) experiential learning theory, which emphasizes reflection on experience as a source of growth. Until then, research felt distant and abstract. The positive learning experience reframed it as a skill I could cultivate, not a gatekeeping tool designed to exclude.

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Years later, as a Major, I pursued a Master of Arts in Nursing (MAN) at the University of the Philippines College of Nursing (UPCN), Manila. Choosing the Administration track, I was required to design research proposals and complete a thesis. My quasi-experimental study on infection control training for Navy nurses exemplified quantitative rigor, emphasizing measurement, comparison, and statistical testing. While still a “beginner,” this phase expanded my understanding of research as not merely academic compliance but as a tool for improving systems and impacting lives. Education at UPCN reinforced that research carries a social responsibility—to generate knowledge that advances health equity and national development (Polit & Beck, 2020; Creswell & Creswell, 2018).

Research in the Context of Military Leadership

Upon promotion to Lieutenant Colonel, I joined the Command and General Staff Course (CGSC), where a research paper requirement is in the form of a Commandant's Paper. My study, *Enhanced Informed Infection Control Program Among AFP Medical Center Nursing Personnel's Levels of Awareness, Compliance, and Self-Efficacy*, highlighted the link between nursing competence and the prevention of blood-borne diseases.

This work revealed the tension between research priorities and institutional leadership concerns. While my paper was among the nominated for “Best Paper,” the award went to a study on financial benefits for AFP personnel. Reflexively, I saw how organizational priorities shape what kinds of knowledge are valued. Within the military, financial and logistical issues are often privileged over healthcare innovations. Yet, my conviction remains that health security is foundational to operational readiness — compromised health ultimately undermines military effectiveness (Mbalinda et al., 2024).

Though I did not publish extensively in peer-reviewed outlets during service, I contributed to military and nursing journals, disseminating health advisories and highlighting the role of military nurses. These modest publications underscore the pragmatic orientation of military research: aimed less at theory-building and more at immediate dissemination to improve practice. Reflexivity helps me see that while such contributions may not count as “formal” research in academic metrics, they represent meaningful engagements with knowledge translation (Sibbald et al., 2024).

Pursuing Research and Lifelong Learning

Transitioning into academe at UPCN expanded my opportunities to integrate research into professional life. I was

able to publish in the *Philippine Journal of Nursing* as part of my tenure requirements—a milestone that I deeply value. However, balancing teaching, service, and administrative roles made sustained research engagement difficult.

My enrollment in the PhD program rekindled my appreciation for research, particularly qualitative methodologies. Courses in grounded theory, phenomenology, and reflexivity shifted my perspective. Whereas quantitative approaches had provided me with structure, qualitative inquiry invited me to listen deeply to lived experiences, including those within military nursing. For the first time, I saw research not just as measurement but as meaning-making (Creswell & Poth, 2018; Denzin & Lincoln, 2018).

Guided by professors whose storytelling and mentorship humanized research, I am now curious about how qualitative methods can bridge the worlds I inhabit: military culture, nursing practice, and academic scholarship. Berger (2015) emphasizes that reflexivity allows researchers to acknowledge their positionalities and turn these into strengths. As a military nurse, I carry insider knowledge of discipline, resilience, and mission orientation. Reflexively, I can now ask: how can these values enrich qualitative inquiry rather than limit it? (Yip, 2024; McIntosh, 2023).

Who Am I and Where Am I as a Researcher?

Looking back, I see my identity as a researcher as one in progress:

As a military nurse, I was shaped by patient care, operational leadership, and the discipline of service. These honed my adaptability and resilience, but sometimes constrained research engagement.

As a graduate student, I discovered the rigor of quantitative research, strengthening my diligence and capacity for structured inquiry.

As a faculty member and doctoral student, I am learning to embrace qualitative research, allowing vulnerability, openness, and reflexivity to guide my growth (Birnbauer, 2025; Sibbald et al., 2024).

Thus, I situate myself as a practitioner-researcher, navigating between practice, leadership, and scholarship. My positionality as a retired officer, academic, and lifelong learner allows me to frame research questions that integrate military nursing expertise with broader health concerns (Mbalinda et al., 2024).

Conclusion

Reflexivity reveals that my research journey has been nonlinear, shaped by institutional culture, shifting priorities, and evolving responsibilities. From the operating room to the halls of academe, I have encountered research as both challenge and opportunity. I recognize that I am still at the stage of developing researcher identity, not yet an expert but no longer a novice.

Moving forward, I aspire to conduct qualitative studies that capture the voices of military nurses, bridging their experiences with evidence-based practice and policy. My ultimate goal is to honor the “nurse-way of doing things” while advancing scholarship that improves both patient care and military readiness (Sibbald et al., 2024; McIntosh, 2023).

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*“In every act of inquiry lies
the promise of a more equitable
future for those we serve.”*