

PhD, DNSc, ND

The ABCs of Nursing Doctoral Degrees

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Doctorally prepared nurses are the nursing profession's voice for the future. Currently, there is an urgent demand for these advanced nurses to move into positions of leadership in both clinical and nonclinical settings. The purpose of this article is to investigate the various nursing doctoral degrees, including the history of doctoral education in nursing and variances in terminal nursing degrees. Recommendations for choosing a doctoral program are proposed and the vital need for the encouragement and support of nurses interested in pursuing doctoral studies is discussed. Keyword: Doctoral degrees

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It is well documented and advertised that there is a critical shortage of nurses in the United States. This shortage is projected to last well into the 21st century as the population lives longer and requires more healthcare services. A less publicized fact is that of the severe shortage of doctorally prepared nurses. The median age of the doctorally prepared graduate is 46.2 years, and 12% of the graduates are older than 55 years.¹ According to the American Association of Colleges of Nursing (AACN), the average age of doctorally prepared full professors is 56.2 years.² In a recent survey, 42% of nursing programs reported a shortage of faculty that resulted in the turning away of thousands of qualified nursing students.³ In light of the nursing shortage, this is a travesty. The nursing profession needs more doctorally prepared nurses to take the helm and lead our profession into the next century. Doctorally prepared nurses are our leaders, our voice while advancing the body of knowledge we call nursing. They are our future in more ways than just educating the next generation. With the severe shortage of nurses with terminal degrees, there is a critical need for graduate nurses to step forward. However, the experience of choosing a doctoral program and navigating the application process can be daunting and overwhelming. Interested

graduate nurses must be nurtured and encouraged to engage in doctoral studies and supported throughout the journey.

Have you ever considered taking the plunge and going back to school for a doctoral degree? If you have, you may have recognized that the state of terminal nursing degrees can cause even the most advanced practitioner in nursing to question the status of the doctoral degree in nursing. Many nurses today, not to mention, the public and other academicians, are confused about the different degrees in the profession. At the undergraduate level, nursing offers 3 degrees for entry into practice: (1) diploma; (2) associate; and (3) baccalaureate. At the graduate level, the profession also accepts a variety of terminal degrees at the doctoral level. These inconsistencies add to the public's confusion and force the profession to defend its lack of congruency and complacency with varying terminal degrees.⁴⁻¹¹

■ EXAMINING THE ROOTS OF DOCTORAL EDUCATION

To fully appreciate the complexity of the issue, one must first understand the introduction of doctoral

education into the United States. Doctoral education has its roots in Europe and was coupled with the responsibilities of religious clergy. The German university system highly influenced American scholars studying abroad and doctoral education migrated to the United States in the 1860s.¹² American scholars had been traveling to Germany for graduate education and returning home with doctoral degrees since the 1820s. Although, not based on the German graduate education model, Yale University was credited as the first institution of higher learning to confer a doctor of philosophy (PhD) degree in 1861.¹² Johns Hopkins University was the first American institution to create a graduate program based on the German model in 1867. The German practice of a publicly defended dissertation heavily influenced American institutions of higher education.¹²

It was not until after World War I that American universities experienced an increase in the numbers of PhD degrees awarded. It was then that the doctoral degree was perceived as an important component of the education of students in professional fields.¹³ The expansion of the PhD into fields such as agriculture, business, education, and journalism sparked debate over whether doctoral education should be the required preparation for entry into professional fields.¹² The first actual dispute over specific doctoral degrees began with the awarding of a doctorate of education (EdD) by Harvard University in 1920 in addition to their PhD in Education program. To this day, both degrees are conferred at Harvard University and the controversy continues. The pressure on professions such as law, medicine, and theology to maintain their professional significance has fueled the fire on the debate regarding the value of professional degrees over PhD degrees. Yet, because many professions modeled their terminal degrees after the PhD, many professional doctorates are indistinguishable from professional degrees.¹⁴

Nursing Doctoral Education

The first nursing doctorate was established in 1924 at Teachers College, Columbia University. Nurses were awarded the EdD degree in this program that focused on preparation of teachers of nursing and the needs of nursing leaders. New York University offered the first nursing PhD in 1934. In the 1950s, the University of Pittsburgh's nursing PhD program emphasized the importance of clinical research to the advancement of nursing's body of knowledge and the profession of nursing with their PhD program in Maternal and Child Nursing. Boston University's nursing doctoral model, the doctor of nursing science (DNSc),

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was unique in that their degree was the first to focus on the nurse as a professional practitioner in the role of providing nursing care. Some nursing leaders quickly adopted this as the minimal degree for entry into practice, as they did not feel that the traditional 4-year baccalaureate degree adequately prepared nurses for practice at the bedside. By the 1950s, nursing had created 3 unique models for doctoral education. This was the beginning of the controversy surrounding nursing doctoral degrees that continues today.

In the 1960s, there were 4 options for nurses considering doctoral education: (a) the EdD, which focused on the preparation of nursing educators and was the most common degree held by nurses; (b) the DNSc, the only professional degree for nursing which focused on the preparation of the nurse practitioner; (c) the PhD in nursing; and (d) the generic PhD, the terminal degree in a discipline other than nursing. Instead of differentiation of these distinct nursing doctoral degrees over the upcoming years, the opposite occurred.¹⁵ Nursing doctoral programs patterned themselves after the others, resulting in an overwhelming similarity of program preparation and degrees. Commonalities of all the nursing programs included a focus on research, theory, and integrative science.¹⁵ In the early years, most nurses were awarded the EdD, and were considered functional specialists. They were prepared as educators of nurses. A shift in the 1960s saw nurses becoming educated with terminal degrees in the scientific disciplines complementary to nursing such as anthropology, psychology, or sociology. This increased the numbers of doctorally prepared nurses and opened up options for nurses in many other areas of study. Nurses educated in these natural sciences had extensive experience with the rigors of research and the development of a discipline's body of knowledge. In most recent years, the scientific research focus has become integrated into nursing's professional development and most degrees concentrate on the unique discipline of nursing. This integration confirmed the profession's struggle with the basic premise of nursing degrees based in research or in the field of professional clinical practice.

Unlike other scientific disciplines that begin with general studies in the baccalaureate level and move toward specialization throughout graduate studies, the

nursing profession requires a generalist perspective in doctoral studies.¹⁵ While education at the baccalaureate level prepares the graduate nurse as a generalist, and master's-level preparation focuses on specialization in a clinical area, doctoral studies require graduates to achieve a generalist overview of nursing before moving toward specialization in the area of dissertation studies. This expectation forced doctoral programs to incorporate broadly based overview courses in order for graduates to integrate the common knowledge strands into doctoral education before specialization with the dissertation topic. This movement toward a common understanding of the discipline of nursing has assisted in the proliferation of similarities of programs. In addition, the effort to mold all programs after the scientific-degreed programs in research preparation has resulted in programs steeped in the research process.

As this pattern continues, it is clear that nursing doctoral education is at a crossroads. The nursing profession needs to decide on one preferred terminal degree for the profession, or recognize, accept, and appreciate all established nursing doctoral degrees without preferential judgment and bias. Before an informed decision can be made, an understanding of the historical development, similarities, and differences between nursing programs must be realized.

The Doctor of Education in Nursing

Pioneer nurses of doctoral education studied in schools of education and were awarded an EdD degree.¹² Teachers College at Columbia University offered the first program in the early 1900s. Focus was placed on educational issues and the pedagogy of teaching as the major emphasis was on education and leadership as opposed to clinical practice. Research conducted at this time demonstrated the focus of these nursing leaders. Areas pertaining to education and management were popular research topics. Research was not clinically based. Teachers College has continued to offer the EdD degree in Nursing and is currently the only program doing so. True to the original mission, the EdD degree in Nursing prepares nursing leaders to become expert educators and specialists in curricular change.¹⁶ A research component is maintained and students conduct research in their area of interest.

The Doctor of Nursing Science

The DNS degree was originated with an emphasis on advanced clinical practice. Many DNS programs were originally affiliated with medical centers and university programs. The fact exists that several programs were developed as an alternative to PhD programs because

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of restrictions on the awarding of specific degrees based on institutional criteria. However, the major reason for the development of this program was an effort to move nursing onto equal grounds with other healthcare professional disciplines. Referencing medical and pharmacology professional degrees, the DNS degree was an effort to increase public awareness of nursing and gain the recognition of nursing as commensurate with other scientific medical professions. The DNS degree is grounded in clinical competence and proficiency. Although the nursing profession embraces the idea of doctoral degrees grounded in clinical practice, there are only a handful of DNS or DNSc programs conferring this degree in the United States.

The Doctor of Philosophy Degree

There is no question that the purpose of the PhD degree is to advance the science of the discipline of nursing through research. Graduates are trained in the rigors of research so as to contribute to the body of knowledge unique to nursing. The PhD degree has been recognized as the highest distinction in scholarship and academic achievement across all disciplines. Students are prepared in the process of intellectual inquiry and expected to accept positions of leadership in their fields. The trend in nursing has been toward increased numbers of PhD programs. With the PhD as the most recognized advanced degree in various fields, the value of the PhD in Nursing is clear. Many nursing leaders, who ascribe to the recognizability and general acceptance of the PhD as the forerunner in graduate education, avidly support the elimination of other professional degrees in place of the nursing PhD as the sole nursing doctoral degree. It is argued by some that the research preparation of the PhD should be required for all leaders of a profession, nursing notwithstanding. Opponents cite the omission of a clinical component in the graduate education of a clinical profession as a major caveat and support the clinically based degrees. Others propose the combination of the PhD and DNS degrees to include a practice-based approach, but carry the title of PhD for credibility. In reality, the nature of the PhD degree is such that a professional license should not be required of the graduate. This would allow nonnurses to receive a PhD in nursing. The AACN differentiates the PhD graduate as the professional who specializes in the development of new knowledge and the DNSc graduate as the professional who specializes in the application of the new knowledge.¹⁷

The Doctor of Nursing

The doctor of nursing (ND) degree was the vision of Rozella M. Schlotfeldt, former dean of Case Western University.⁴ The ND is a clinical graduate degree whose purpose is to prepare nurse scholars who are clinically based rather than research-focused. This degree was designed as entry-level preparation similar to the doctor of medicine (MD) degree.¹⁸ Schlotfeldt proposed the ND as a method for nursing to reestablish its position in the preparation of clinical experts in the practice of nursing and achieve equal footing with other professional doctoral degrees. She cited difficulties with baccalaureate nursing education and inconsistencies in the foundational education of entry-level practitioners. Specifying the ND as a preservice degree, the ND is based on the core belief that “mastery of subject matter had to come before practice.”¹² While the ND has not achieved the status and acceptance the founder originally intended, several programs currently offer the ND including Case Western University, Rush University, and University of South Carolina.⁴

Doctor of Nursing Practice

Columbia University has introduced a new program that focuses on advanced clinical expertise. The doctor of nursing practice (DrNP) is a graduate degree geared toward nurse practitioners. The purpose of this degree is to prepare NPs for independent direct primary care roles in a variety of settings.¹⁹ There is little outcome evidence related to this degree, but advanced practitioners are expressing much interest in the option.

Doctorate in Nursing Practice

Several programs throughout the United States are currently offering the Doctorate in Nursing Practice (DNP) an advanced degree that concentrates on direct care, specifically research utilization for improved delivery of care, patient outcomes, and clinical systems management.¹⁹ These programs focus on administration, research, teaching, and public policy analysis.²⁰ The graduates of the DrNP and DNP programs are presumed to be expert clinicians with the intent of the advancement of the profession as specialized clinical practitioners.²⁰

ISSUES IN DOCTORAL EDUCATION

The controversy continues as the nursing profession creates new terminal nursing degrees. Some experts call for a shift in the attention toward the individual who is achieving the degree, instead of on the particular degree.¹⁵ Discussion should be focused more on the personality and career preferences of the doctoral nurse

instead of the degree that the graduate received. Making a distinction between expert practitioners who tend to approach matters in a holistic manner and expert researchers who rely on pure intellectual inquiry and rigor to attack problems, it appears that there is a place in nursing for both.¹⁵ Both practitioners are highly valued for their contributions to the field, and there should not be the expectation that every nurse needs to be everything to the profession. In fact, it would be irresponsible to believe or expect that nurses should be both expert clinicians and expert researchers.¹⁵ Given this frame of reference, Grace made an argument for nurses to be specially prepared with substantive content for the careers in which they chose to pursue, be it clinical practice, or research.¹⁵ To address the diverse needs of the profession, she advised 3 models for nursing doctorates: the research doctorate, the clinical or applied doctorate, and the professional doctorate. In addition to the specialized research and clinical practice degree, Grace proposed the professional doctorate as comparable to the current degree offered by some institutions as a postbaccalaureate degree or first professional nursing degree.¹⁵

Most doctoral programs are similar in nature and because of this similarity, the profession may be doing itself a disservice, as it is not able to provide students the specialty content required to create experts in their field, research or clinical practice.¹⁵ A focus on too much general content and not enough specific content material will create a dearth of specialists. Nurses should choose their career paths depending on their interests and personality characteristics, as well as have a right to adequate resources to prepare expert nurses in whichever specialty area they choose. Grace admonished nurses for establishing a marketplace that devalues the clinical doctorate in favor of the research degree.

The nursing profession has approached a crossroads. The time has come for nursing to address the hard questions and come to a consensus on appropriate terminal degree(s) for the profession. There are perceived differences in the type of program degrees awarded within the profession. Nursing professionals are unclear about the existence of multiple types of degrees. It would seem apparent that a professional and clinically based degree could meet the needs of the profession. If, however, the nursing community agrees to acknowledge the DNS, DrNP, and DNP degree as a clinical degree for those students whose career pathways lead them in this direction, the profession must accept and embrace these degrees as fully comparable to the currently revered PhD. The nursing profession must take control over the marketplace and command the value of the clinical doctoral degrees so as to control our own destiny. The current system of multiple entries

to practice degrees is an additional critical issue that if not addressed, only further muddies the water.

■ SO YOU WANT TO EARN A DOCTORATE: SELECTING A PROGRAM

Once the decision is made to pursue doctoral education, how does a potential student select the right program? The most important goal when selecting a program is to find an appropriate match between the program of study and the student. Institutions tend to have very comprehensive Web sites and much information can be accessed online. Several authors have published a practical step-by-step process for the student shopping for doctoral programs so as to ensure a good fit.^{19,21,22}

Financing

There are many items that need to be considered when choosing a program, the first of which is financing. How will you finance your doctoral education? Doctoral programs are expensive and associated charges must also be considered in addition to tuition fees. These include transportation costs, parking, gas, an updated computer, printer, ink cartridges, and textbooks, just to name a few. Make an inquiry to determine if your employer offers tuition reimbursement. Obtain the details and determine how much out-of-pocket expense you will incur. You may need to consider federal student loans. Information regarding eligibility, rates, and pay back can be found through links on the institution's financial aid Web site. In light of the current faculty shortage, some programs may offer special incentives to complete the program and stay on in the area as a faculty member. This might include free tuition and sign-on bonuses for faculty, stipends as teaching assistants, or third-party grants. Do not go into the process blindly. Know your limits and have a financial plan ready with available options identified.

Prerequisites

Are all your prerequisites satisfied? In addition to a valid nursing license and a master's degree in nursing from an accredited program, most doctoral programs require a graduate-level statistics course and a course in nursing conceptual models. If you did not take these courses in your master's program, you will need to take them to fulfill the prerequisite prior to acceptance and matriculation. If you are unsure of a particular course and its applicability to the prerequisites, obtain a copy of the course description and ask the dean of the intended program to review the description to determine if it meets the requirement. Do not assume the course will meet program requirements. Avoiding surprises will make the process easier and less stressful.

TABLE 1 The ABCs of Choosing a Doctoral Program

Steps	
A	Perform an introspective review of self-identity personal preferences and goals
B	Develop a well-circumscribed research plan incorporating your area of interest for dissertation
C	Investigate the faculty of programs you are interested in for those with research experience in your topic of concentration
D	Visit the campus, paying special attention to the library and computer services, parking, accommodations, and accessibility
E	Meet with the faculty, particularly those with expertise in your area of interest who may serve as a mentor throughout your research
F	Compare the prospective program to the American Association of Colleges of Nursing (AACN) Quality Indicators
G	Choose the "best fit," based on your personal goals

Introspective Review of Self

One of the initial steps in the process for potential students is to perform an introspective review to determine personal goals. Doctoral education can be accomplished through online programs or traditional programs. This is a big decision. Students should evaluate their abilities and personal goals to determine which type of program will best meet their needs. Before deciding on an online program, it would be wise to take one online course to evaluate its effectiveness and your comfort level with the process. Envision yourself taking an entire program in the same format. Does it work for you? If not, the traditional program may be a better fit. Envision yourself navigating traffic and looking for parking during the bad weather. Maybe you like the face-to-face interaction with colleagues and teachers. Which type of program do you think will facilitate your success? To help you with the decision, solicit opinions and comments from other doctoral students from both types of programs. Listen to their experiences and advice. Determine how you can best utilize their words of wisdom to help you succeed. Most important, do not rush the decision. Doctoral school is a huge investment of time, money, and effort. As a student, you want the experience to be meaningful. So weigh all the options and choose the program that is best for YOU (Table 1).

Articulation of a Research Idea

After an introspective review of the self, the student is encouraged to identify an area of interest that will serve as a basis for the dissertation and continue as a research phenomenon after graduation. The actual program will

determine the extent of the formulation. Some simply require an essay describing your research interests, or verbal articulation in the interview process. Others require a complete written proposal of your intended research plan. One of the objectives is for you to “hit the ground running” once you enter the program. Students are encouraged to focus all studies in this general area of concentration throughout the program. Concept analyses and other scholarly investigations help to add to a body of knowledge and prepare you for the dissertation process. For these reasons, you need to have at least a general idea of your area of interest. In addition, it is necessary to define your interest so as to match faculty expertise with your concentration.

Search for Faculty Interest and Expertise

Upon clarification of a well-circumscribed research idea, the student is advised to investigate the research history and interests of various faculty members from different schools in the hopes of finding a faculty member with similar research interests and experience that could support and mentor the student. Web sites are a primary source of information, as most schools will post faculty research history in the faculty biography page. Look for the topical area of interest as well as type of research methodology. Investigate recent publications, professional activities, and funding of the faculty. Obtain and read current publications of those faculty members you think might match your interest. It is in the best interest of the school and the student to have faculty available that can mentor the student in the area of interest. Even if a student is a qualified candidate for admission, acceptance into the program may be denied if there is not a faculty member on the staff who has expertise and the ability to mentor in the student’s area of concentration. This identification of potential faculty resources and a good program match can mean the difference between a successful, satisfied experience and those that are less than successful.

Visit the Campus

Visits to the campus and meetings with faculty members either in person or on the phone can assist an indecisive student in selecting the right school. Important questions that students should remember to ask when meeting with the nursing representative include information related to curricular options, faculty preparation, financial aid, class size, library and computer resources, the longevity and reputation of the program, and information related to the campus facilities such as security, transportation, and parking.²² Additional inquiries include student and faculty diversity, alumni achievements, research funding, all but dissertation

(ABD) rates, and opportunities for interdisciplinary collaboration.²¹ Students can gain insightful information from specific questions about the above issues. Other students are intuitive about selecting the best institution and a simple visit to the campus reveals to them if it is a good match.

Meet the Faculty

Students are encouraged to meet the faculty from the program of interest. This can occur via e-mail, the phone, or in person. You should particularly speak with the faculty person with whom you have similar research interests. Read their recent publications and ask them questions about it. Ask the dean to introduce you to several faculty members when you visit the campus.

AACN Quality Indicators

The AACN published indicators of quality in doctoral programs in nursing.¹⁷ It is important for students to be cognizant of the indicators of quality, specifically related to faculty, programs of study, resources, students, research, and evaluation. These indicators are directed at areas such as the diversity of the faculty and students, the percentage of faculty that hold a terminal degree, the congruence of the mission of the institution and the program, completion rates of students, ethical standards, comprehensive feedback from students and alumni, and much more. Potential students are encouraged to review the quality indicators and use them as a guide when evaluating prospective institutions. Evaluating potential schools against the quality indicators is helpful and can assist students make more informed choices.

Find the “Best Fit”

As the capstone of the student’s academic career, it is imperative that students take the time to adequately go through each of these discussed steps. The nursing program with the best fit or match will increase the likelihood of successful completion for the student. Jones and Lutz believe that the selection of the best school is highly subjective and individual.²¹ There is no right or wrong answer; this decision is a personal choice that will take time. Students should be cautioned not to rush their decision.

■ APPLICATION PROCESS

So you have decided on a particular nursing program, or at least narrowed the choices down to a few (Table 2). Most admission processes for doctoral programs are very similar. Application fees are usually between \$50 and \$100 per application and students may apply to more than one school. The key to success at this stage is organization! Buy a plastic organizing file case and

TABLE 2 Getting Into Your Preferred Nursing Doctoral Program

Steps	
A	Ensure all prerequisite courses are completed
B	Obtain an application packet from all the programs of interest
C	Take the Graduate Record Examination (GRE)
D	Request an official copy of your transcript from attended institutions
E	Solicit letters of recommendation from previous employer and/or educator
F	Participate in an interview with a representative from the graduate nursing program
G	Provide evidence of scholarly work as a testimonial to your writing style and ability

keep every piece of information under divided tabbed sections. Allow plenty of time for deadlines. Some schools only review applications at specified times of the year, others operate on a rolling admissions procedure. Be aware of deadlines so you are not left behind. Follow all the directions carefully. The applications are very detailed. They explain exactly what the applicant is to do. You need to follow these directions to the letter. The first sign of a questionable doctoral student is one who is incapable of following directions. It is advisable to send all pieces of the application in one packet, as opposed to individually sent parts. In addition, students can include a self-addressed postcard that institutions can send ensuring they have received the packet.

The Graduate Record Examination

The admission application process usually includes satisfactory scores on the Graduate Record Examination (GRE). Just the thought of taking GREs can scare some students into never even considering graduate education. While the exam can be intimidating to some, with adequate preparation, students can feel much more confident going into the exam. The GRE is a 4-hour standard, computerized exam that is administered at certified testing centers at a cost of approximately \$115. The exam has several sections that include verbal, analytical, and quantitative reasoning, as well as an essay component. While scores can range up to 1600, nursing doctoral schools frequently require a score greater than 1500 for admission. The GRE Web site²³ (www.gre.org) offers comprehensive information about the exam as well as computerized practice exams. Students may benefit from a course or study book designed to assist with preparation for the GRE. At a minimum, it is recommended that you visit the Web site and practice a few questions, so you know what to anticipate when you

take the actual exam. Unofficial scores are available to students immediately upon completion of the exam.

Letters of Recommendation

Institutions may require letters of recommendation to be completed on a specific form that is provided in the application packet. Some require that the form be sealed in an envelope with the signature of the author across the back. It is preferred that you provide a letter of reference from a recent employer and a previous educator who can speak to your ability as a student. Remember to allow plenty of time for the person to complete the forms. To submit a completed packet, you must allow for adequate time to retrieve your form from the person writing the reference. Ask your reference to send you an unofficial copy of the letter so that you can see what they wrote and keep it for your files.

Transcripts

Transcripts are the official record of all your academic work. You must provide an official transcript from all the institutions you have attended. An official transcript is one that is sent by the Registrar with an official signature across the back of the envelope. Requests of the institution for your transcript must be made in writing and usually cost between \$3 and \$5 per copy. Have the transcript sent to your home so you can send it with the other forms in the application packet. Also request an unofficial copy for your own records, so you know what is being sent! Allow at least 2 weeks from the time of request to receive your transcripts.

Interview

Your admission interview is crucial to the process and should be a 2-way conversation. Usually, the dean of graduate nursing studies, or an available faculty member, will be the person to conduct the interview. Interviews can occur in person or over the phone. If you are interviewing over the phone, be sure to set aside ample time in your schedule when you can be left undisturbed. Put up a sign up on your office door or at home, send the kids outside to play. Throughout the interview, speak while you are looking into a mirror. When a person is smiling, the voice intonations change and sound friendlier. Prepare your answers to anticipated questions beforehand. The interview is also an opportunity to pose the list of questions you have prepared prior to the interview. Being prepared can reduce the anxiety you may be feeling.

Evidence of Scholarly Work

Most applications require evidence of your scholarly abilities. The institution wants to be sure that you can write fairly well so as to be a successful student. You

may be asked to answer essay questions related to your personal reasons for attending graduate school. Previously published works or other examples of your writing style are also appropriate to share. This may include a patient educational packet, or teaching program, or article in your employer's newsletter. The work should be representative of your writing style and ability.

Good Fit Increases Success

When choosing a nursing doctoral program, there is no right or wrong answer, just the one that is right for you. You are interested in finding the best fit, the choice that is the most comfortable and feels right. If you choose a program that meets your personal goals and fits your lifestyle, you will be more likely to succeed in reaching your ultimate goal!

CONCLUSION

Doctoral education is a personal choice that should match the individual student's unique goals and aspirations for future career choices. Acceptance of differences in career paths and individual personality characteristics acknowledge the specialty focus of programs and encourage nursing to capitalize on their differences versus penalize them for their diversity. The nursing profession must take advantage of the experts in their specialized fields.

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