

Canadian Association of Schools of Nursing Association canadienne des

## écoles de sciences infirmières

# Position Statement Doctoral Education in Nursing in Canada

### Context

The continued development of doctoral education in Canada is necessary to prepare the next generation of nurses across the full range of practice domains and to generate knowledge to support nursing practice and high quality health care. As the cohort of doctorally prepared nurses in the country continues to grow, so too will our national capacity for research supervision to meet the increasing demands for doctorally prepared professors, clinicians and nurse leaders. Since 1991, a small but growing number of Canadian universities has produced excellent PhD graduates from nursing doctoral programs characterized by research-intensiveness, core disciplinary knowledge, and expertise within a substantive field. Until numbers of graduates from Canadian programs build, however, there will be a shortfall in supervision capacity for doctoral education in the country. Given the limited human resources available nationally, it is important to focus the priorities for doctoral education for the next 5 years to continue to build the faculty base of PhD prepared professoriate across the country.

#### Position

#### Quality Standards for Canadian Doctoral Education in Nursing

In all fields of scholarship quality doctoral education relies on a critical mass of active researchers and appropriate infrastructure to support research and education. Diversity among programs is important to capture the breadth of Canadian approaches to education and research and to respond to the needs and career aspirations of students. This diversity, however, must be underpinned by quality standards. Among the criteria required for excellence in PhD programs in nursing are the following:

- Academic nursing units, housed within universities with well-established graduate program infrastructure and access to high quality interdisciplinary interactions.
- A critical mass of active faculty researchers capable of supporting the mentorship, research training and socialization required to engage in the full complement of roles associated with success in the competitive Canadian health research context.
- The ability to provide students with diverse intellectual perspectives (eg analytical and leadership strategies for dealing with social, ethical, cultural, economic and political issues related to nursing, health care and research).

- Learning experiences related to at least four core components: 1) research training, 2) core disciplinary knowledge related to the history, practice context, and theoretical underpinnings of nursing, 3) knowledge of the current state of science and scholarship within a substantive field within the discipline, and 4) opportunities for interdisciplinary and collaborative learning and research.
- A combination of a modest amount of coursework and completion of a dissertation. It is expected that doctoral programs will reflect the diverse institutional cultures with a wide range of emphases in coursework and research foci consistent with the philosophy and mission of the parent institution and nursing program. For instance, a research intensive university may have a strong emphasis on didactic research training, others on community engagement or practice partnerships.
- Opportunities for active engagement by students in a scholarly learning environment and recognition of the contribution of doctoral students to the creation of new knowledge.
- Supervision arrangements and examination procedures should be based upon an articulated framework of accountability, shared responsibility and transparent governance.
- Evidence of a rigorous external evaluation benchmarking research effectiveness and productivity, infrastructure and resources, and outcomes.

The critical attributes of graduates of Canadian programs include the capacity for:

- Obtaining competitive research funding.
- Conducting research that is both rigorous and original to address a problem of concern to the discipline.
- Articulating and establishing a program of research that builds the discipline and furthers practice.
- Communicating effectively through peer-reviewed journal publication, presentation at scholarly meetings, and in professional and scientific interactions.
- Effective engagement with practice community for knowledge translation and exchange, and dissemination of findings.

CASN expects that established university quality assurance/improvement mechanisms will reference these criteria in their considerations of individual programs. CASN plays a critical role in supporting excellence in education and enabling educators to develop best practice in their programs to support doctoral student learning, career development and timely completions.

#### Professional or Practice Doctorates

CASN recognizes that future consideration of profession- or practice-based doctoral programs for the Canadian context will require thoughtful and strategic national consultation with relevant stakeholder groups, including governments and employers.

#### **Going Forward**

The critical priority for Doctoral Education in Nursing in Canada remains to build the numbers of PhD graduates to:

- provide the faculty base to allow expansion of nursing education across the country to meet national human health resource needs;
- provide faculty to replace the retiring professoriate;

- build research capacity that serves the diverse needs of communities and practice domains;
- advance knowledge in the discipline through high quality research training, disciplinespecific and interdisciplinary knowledge and substantive content expertise
- build the discipline to improve nursing practice and to improve health care delivery and the health of Canadians.

#### Bibliography

Acorn, S., Lamarche, K., & Edwards, M. (2009). Practice doctorates in nursing: Developing nursing leaders. *Nursing Leadership, 22,* 85 6 91.

American Association of Colleges of Nursing, (2001). *Indicators of quality in research-intensive doctoral programs in nursing*. Washington, DC: American Association of Colleges of Nursing.

Austin, A. and McDaniels, M. (2006). Using Doctoral Education to Prepare Faculty to Work within Boyerøs Four Domains of Scholarship. *New Directions for Institutional Research*, 129, 51-65.

Brar, K., Boschma, G., McCuaig, F. (2010). The development of nurse practitioner preparation beyond the master level: What is the debate about? *International Journal of Nursing Education Scholarship*, *7*(1), Article 9.

Brown-Benedict, D.J. (2007). The doctor of nursing practice degree: Lessons from the history of the other professional doctorate in other health disciplines. *Journal of Nursing Education*, 47, 448 ó 457.

Canadian Association of Graduate Studies, (2008). *Guidelines for Graduate Student Supervision*. Ottawa, ON: Canadian Association of Graduate Studies.

Canadian Association of Schools of Nursing, (2006). *CASN Position Statement Doctoral Education in Nursing in Canada*. Ottawa, ON: Canadian Association of Schools of Nursing.

Canadian Association of Schools of Nursing, (2010). *Environmental Scan on Doctoral Programs Summary Report*. Ottawa, ON: Canadian Association of Schools of Nursing.

Canadian Association of Schools of Nursing and Canadian Nurses Association, (2010). *Nursing Education in Canada Statistics 2008-2009 Registered Nurse Workforce, Canadian Production: Potential New Supply.* Ottawa, ON: Canadian Nurses Association.

European University Association, (2005). *Doctoral programmes for the European Knowledge Society. Report on the EUA Doctoral Programmes Project 2004-2005*. Brussels: European University Association.

Joachim, G. (2008). The practice doctorate: Where do Canadian nursing leaders stand? *Nursing Leadership*, 21, 42-59.

Ketefian, S., & McKenna, H. (2004). Doctoral education in nursing: International perspectives. London: Routledge.

Ketefian, S., Davidson, P., Daly, J., Chang, E., & Srisuphan, W. (2005). Issues and challenges in international doctoral education in nursing. *Nursing and Health Sciences*, 7 (3), 150 ó 156.

Kirkman, S., Thompson, D.R., Watson, R. & Stewa4rt, S. (2006). Are all doctorates equal or are some õmore equal than othersö? An examination of which ones should be offered by schools of nursing. *Nurse Education in Practice*, 7, 61 ó 66.

McEwen, M., & Bechtel, G.A. (2000). Characteristics of nursing doctoral programs in the United States. *Journal of Professional Nursing*, 16, 282-292.

Nelson, S. (2008), Commentary: Yet Another Fork in the Road? Nursing Doctoral Education in Canada. *Nursing Leadership*, 21(4): 52-55.

Waldspurger Robb, W.J. PhD, DNSc, ND: The ABCs of nursing doctoral degrees. *Dimensions of Critical Care Nursing*, 24, 89 6 96.

Walker, G.E, (2008). *The Formation of Scholars: Rethinking doctoral education for the 21<sup>st</sup> Century*. Carnegie Foundation, San Francisco: Jossey Bass.

Webber P.B. (2008). The doctor of nursing practice degree and research: Are we making an epistemological mistake? *Journal of Nursing Education*, *47*, 466 6 472.

Wood, M.J, Giovanetti, P, & Ross-Kerr, JC. (2004). The Canadian Phd in Nursing: a Discussion Paper. Ottawa: Canadian Association of Schools of Nursing.

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