

DOCTOR OF NURSING PRACTICE: REFLECTIONS ON DOCTORAL EDUCATION IN NURSING

DOCTOR OF NURSING PRACTICE: REFLEXÕES SOBRE EDUCAÇÃO DOUTORAL EM ENFERMAGEM

DOCTOR OF NURSING PRACTICE: CONSIDERACIONES SOBRE EL PROGRAMA DOCTORAL CURRICULAR DE ENFERMERÍA

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ABSTRACT

The *Doctor of Nursing Practice* is a proposal for doctoral training of nurses inserted in the job market. The program is a reality of the international scenario, since in the national literature publications are scarce and the program has not yet been implemented. The objective was to reflect on the *Doctor of Nursing Practice*, exploring the strengths and weaknesses of the program. This is a reflective study based on publications indexed in the following electronic databases: Scielo, BDNF, SCOPUS, MEDLINE and Web of Science. A combined search was performed using the controlled keywords *nursing* and *advanced practice nursing* and the uncontrolled descriptor *doctor of nursing practice*. The reflections that emerged are the aspects related to the historical context and to the characteristics of the program, the strengths and weaknesses of this proposal and its insertion in the international scenario. This study presents an overview on the subject, so as to support the reflection and discussion about a potential doctoral training in the national scenario.

Keywords: Education, Nursing; Nursing; Education, Nursing, Graduate.

RESUMO

O *Doctor of Nursing Practice* apresenta-se como uma proposta de formação doutoral de enfermeiros que atuam na prática. O programa é uma realidade do cenário internacional, pois na literatura nacional as publicações são escassas e o programa ainda inexistente. O objetivo foi refletir sobre o *Doctor of Nursing Practice*, explorando as potencialidades e fragilidades do programa. Trata-se de um estudo reflexivo que teve como base publicações indexadas nas bases de dados eletrônicas Scielo, BDNF, SCOPUS, MEDLINE e Web of Science. Foi realizada busca combinada utilizando-se os descritores controlados *nursing* e *advanced practice nursing* e o descritor não controlado *doctor of nursing practice*. As reflexões que emergiram são os aspectos relacionados ao contexto histórico e às características do programa, as potencialidades e fragilidades desta proposta e sua inserção no cenário internacional. Considera-se que este estudo apresenta um panorama sobre o assunto, de modo que subsidie a reflexão e discussão acerca de uma possível formação doutoral no cenário nacional.

Palavras-chave: Educação em Enfermagem; Enfermagem; Educação de Pós-Graduação em Enfermagem.

RESUMEN

El *Doctor of Nursing Practice* es una propuesta de formación doctoral de enfermeros que desempeñan tareas prácticas. El programa es una realidad del escenario internacional ya que en la literatura nacional las publicaciones son escasas y el programa no existe. El objetivo de esta investigación fue reflexionar sobre el *Doctor of Nursing Practice* y analizar las potencialidades y debilidades del programa. Se trata de un estudio reflexivo sobre publicaciones indexadas en las bases de datos electrónicas Scielo, BDNF, SCOPUS, MEDLINE y Web of Science. Se efectuó la búsqueda combinada con las palabras clave controladas *nursing* y *advanced practice nursing* y la palabra clave no controlada *doctor of nursing practice*. Surgieron consideraciones sobre aspectos

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vinculados al contexto histórico y a las características del programa, las potencialidades y debilidades de la propuesta y su inserción en el escenario internacional. El estudio presenta un panorama sobre el tema con miras a propiciar la reflexión y debate acerca de la posible formación doctoral en el escenario nacional.

Palabras clave: Educación en Enfermería; Enfermería; Educación de Postgrado en Enfermería.

INTRODUCTION

The *Doctor of Nursing Practice* (DNP) is not a new idea, since related discussions began in 1979 in the United States of America (USA), focusing on the level of doctoral training in Nursing for the practice. The main goal of this program was to train nurses with competence to improve the quality of care and the health system.¹

In Australia, United States, United Kingdom, France, Sweden and Turkey there are two types of doctoral programs: the *Doctor of Nursing Practice* (DNP) or *Professional Doctorate* (PD), which are focused on the practice, and the Doctor of Philosophy degree (PhD), which is focused on research knowledge.²

The motivation behind this publication came from a seminar on the theme, developed by the authors in the "Nursing and Work: theoretical bases" discipline of the *Programa de Pós-Graduação da Faculdade de Enfermagem da Universidade Estadual de Campinas*, doctorate level.

Considering that there are few publications on this subject in the national literature, this study aimed to reflect on the *Doctor of Nursing Practice*, in addition to exploring the program's main strengths and weaknesses.

METHODS

The theoretical foundation was based on a review of international and national literature with a qualitative approach, and included the authors' perceptions and discussions on the theme.³ The study was conducted based on two guiding questions: In which scenario and context the proposal of the *Doctor of Nursing Practice* was developed? And What are the implications of this program for Nursing (main strengths and weaknesses)?

A search was conducted in the Scielo, BDENF, SCOPUS, MEDLINE and Web of Science electronic databases, using the controlled keywords *nursing* and *advanced practice nursing* and the uncontrolled keyword *doctor of nursing practice*. The inclusion criteria included were the following: texts in English or Portuguese and full text available in the databases consulted. Thus, this study included 11 journal articles, three

reference documents from the American Association of Colleges of Nursing (AACN) and one document from the Institute of Medicine, totaling 15 papers studied. The period of the analyzed publications varied from 2008 to 2017.

REFLECTIONS ON THE HISTORY OF THE DOCTOR OF NURSING PRACTICE PROGRAM AND ITS MAIN CHARACTERISTICS

There are currently two types of doctoral programs in the USA: one which focuses on the foundations of research, better known as the "academic doctorate", which offers a Doctor of Philosophy degree (PhD) or a Doctor of Science degree (DNS or DSN or even DNSc) and another with a focus on practice. The latter is called *Doctor of Nursing Practice* (DNP) and was created in 2004 amid discussions by the members of AACN-affiliated educational institutions.¹

After the creation of the DNP, just two years later, in 2006, the state of Pennsylvania was the first to offer the program and in 2012, the state government formalized it through a document establishing that universities offering master's programs should also offer the DNP.⁴

In 2006, the AACN members reached a consensus to create the program, which is published in "*Essentials of Doctoral Education for Advanced Nursing Practice*", which also specifies the curriculum elements and competences of the program. The justification for developing this program is based on the growing demand of health care scenarios.¹

About DNP's expansion, in the United States there are currently 229 professional doctoral programs in 49 states, and 100 are under development.^{4,5}

In 2011, the Institute of Medicine of The Nationalities in Washington recommended that nurses continually seek to improve themselves in order to meet the demands of the population and of the system. It was then suggested that, by 2020, the number of nurses with a doctorate degree should be doubled.⁶ A study identified the undergraduate students' willingness to attend DNP soon after graduation, and they also reported having a social support network that would sustain extended studies. The results indicated that interest, readiness and support represented three distinct factors that can be used for further analysis to predict future enrollment in nursing doctoral programs.⁷

Regarding the requirements for entering a DNP course, the professional must have a bachelor's or a master's degree in Nursing and at least 1,000 hours of practical experience.^{1,5} They should be able to translate scientific evidence, transforming the health scenario with better results.^{1,5,8,9}

The curriculum of the DNP program is varied, as new entrants may choose different areas to specialize in, such as Nursing Administration, Public Health Policies, Obstetrics and Anesthesia.^{1,5}

The AACN suggests that the structure of the courses be divided into core subjects, common to DNP students, and into specific subjects, depending on the chosen area of training. The core subjects should include the following competencies: methodological and scientific bases, management and leadership skills and evidence-based practice in order to bring scientific knowledge closer to the professional practice.^{1,5}

Added to these competences should be the technological knowledge and knowledge of the information systems, as well as the skills related to health policies in all health care fields. Regardless of the master's program previously taken, it is suggested that at least 12 months of full-time study be required.^{1,5}

Among the differences between the DNP and the PhD/DNS, it is important to note that in the DNP the goal is to prepare nurses who will be leaders in the highest level of the Nursing practice. In the PhD/DNS, the goal is to prepare nurses at the highest level to carry out advanced research and to contribute to the production of Nursing evidence.^{1,5}

Another difference concerns the expectation regarding the students of the programs. In the DNP the student's commitment is to health care practice and career, so they are instructed towards improving patient care and population health outcomes, while in the PhD/DNS the student's commitment is focused primarily on research, enabling the development of new Nursing knowledge through scientific research. Regarding the curricula and the content in both programs, it is noteworthy that in the DNP the leadership competence in the practical area is developed, as well as the role of the nurse regarding the population and health demands. And in the PhD/DNS program, leadership in research funding areas is expected, focusing mainly on the theoretical and scientific basis of the area. Regarding the results and evaluation of the programs, DNP students should aim to contribute, through practice, to the transformation of population health policies and landscape, being evaluated by nursing accreditation institutions. In the PhD/DNS programs, students are expected to contribute with new knowledge and academic papers that provide the basis for the advancement of Nursing science, and these courses are evaluated by authorized and accredited bodies in the field of education.^{1,5,10}

Upon completion of the DNP program, the final defense product should generally document the results of the experiences during the course so that student immersion can be evaluated and the expertise and knowledge gained during the training can be summarized. Examples of the final

product, according to the AACN recommendations, include the following: a portfolio describing the impact or the results of practice, videos, clinical simulation, documents with a final synthesis of the practice and knowledge exchange, publication of systematic review and pilot project or study in the area of expertise.⁵

ASPECTS UNDER DISCUSSION: REFLECTION ON THE STRENGTHS AND WEAKNESSES OF THE PROPOSAL

Among the strengths of the DNP program is the promotion of evidence-based practice, a reduction in disparity with other professionals and highly specialized Nursing care.

Promotion of evidence-based practice, that is, closing the gap between theory and direct care, is a strength. Thus, these professionals are better able to transform the daily practice through the use of scientific evidence.¹¹ Some researches also reveal that the degree can contribute to the reduction of discrepancy with other professionals in the areas of Medicine, Audiology (training not available in the Brazilian context), Physical Therapy, Occupational Therapy and Pharmacy, as these professions require a professional doctoral level training in the North American context.^{4,12}

And finally, the Nursing care offered by these professionals is classified as highly specialized. This reality is emphasized as a possibility of improving professional qualification. This fact can ensure more visibility and appreciation of these professionals in the health team.⁸

Among the weaknesses, there are notes on the fragmentation of the professional category, lack of consensus among health institutions that do not require the degree and do not consider it for better remuneration, and medical professionals believe that patients could get confused regarding the nurses' degree. The fragmentation of the professional category is considered a weakness, as it can cause conflicts not only among Nursing professionals, but also among the multi-professional team.¹²

There is still a lack of consensus among health care institutions, as they do not require a DNP degree for hiring and the degree does not result in a difference in compensation to nurses. These two weaknesses may discourage professionals from investing in this type of training.¹²

Another aspect is the possibility of misunderstandings with the professionals who attended the academic doctorate (Philosophiae Doctor – PhD). Added to this, according to a paper published by medical professionals, it can generate doubt even in the patients and, as a consequence, endanger their lives.¹³

A 2015 AACN Publication outlines recommendations on how to expand knowledge, skills, and attitudes for advanced Nursing practice to occur effectively.⁵ However, the programs are presented in different configurations and objectives, as well as criteria for their validity, and concerns remain about the insertion of these professionals in the practice.^{11,12,14}

There is great concern in some publications about the quality of the programs, given that many use on-line methodology and varied curriculum structures.^{4,14}

Another point for reflection is the program evaluation criteria, which are discussed in publications as one of the biggest challenges. The difficulty is not only restricted to the diversity of the program's structures, but due to the complexity of the task itself. This is because it involves evaluating professionals and assessing the impact on improving the quality of health care, as well as other parameters that are still under development.^{12,14}

It is possible to notice that, although DNP's diverse strengths and weaknesses are recognized, there is still no consensus of opinions among educational institutions, professionals and health institutions. Despite the lack of agreement, the programs are still offered in several countries. The discussion seems to be far from the end, but nowadays nurses are able to get this title, and these professionals are probably being inserted in the job market. The results found in countries with this graduate education may support future longitudinal researches, showing the real strengths and weaknesses of the program.

EXPANDING THE REFLECTIONS: DNP GOALS, EXPERIENCES, AND CHALLENGES

In a 2014 publication, the AACN outlined a goal for all specialist nurses, currently referred to as Advanced Practice Nurses (APRN), to obtain the DNP title by 2015.¹ There was no consensus, and some areas established a deadline, while others remained neutral, stating that DNP is just a choice.¹²

The American Association of Nurse Anesthetists (AANA) stated that it will employ DNP to replace the specialist by 2025, while the National Association of Clinical Nurse Specialists (NACNS) reinforced that DNP is optional and can be aligned with the academic doctoral program proposal.¹²

Regarding the Australian trajectory, both types of doctoral training were simultaneously developed and are valued (PhD and DNP), which did not result in a gap between theory and practice.² In Turkey, the programs coexist and the subjects that are the focus of research are related to the practical application of Nursing care. In Sweden, although there is a professional doctorate, the election of the PhD

predominates, and the nurse attending the DNP should complete it in four years. And before the defense of the thesis, they should publish at least two or three papers.²

In the UK experience, both programs coexist amidst the positive aspects and the controversies. Allegedly, the main advantage is the improvement of clinical practice, and the justifications are based on the improvement of the quality of care. In France there is a program for the training of Advanced Practice Nurses (APN), in which academic master's and doctor's degrees are offered. In Japan and Russia there is no formal education program to prepare APNs.²

In Brazil there is no such program, but it can be said that the professional master's degree is the one that most closely resembles the proposal when compared to the DNP. The professional master's degree is aimed at professional nurses inserted in the job market who seek to articulate knowledge with the practice developed, emerging as a reflection space for the teaching-learning process, in order to strengthen and contribute to the *Sistema Único de Saúde - SUS*.¹⁵

Many questions remain that permeate the proposal for doctoral training in the area; however, it is necessary to reflect on this theme present in the international scenario. With the rapid expansion of the program abroad, there is still concern about the growing shortage of Nursing teachers.^{12,13} Who would be the appropriate teachers for the DNP and which criteria would be taken into consideration when choosing teachers for the program?

Another fundamental question is that, considering the specificity of the area, whose epistemological object is translational, can theory, research and practice be understood if they are torn apart?

FINAL CONSIDERATIONS

It is considered that this study expanded the understanding about DNP. The findings are intended to provide analysis and to raise questions about doctoral training in the practice, considering the complexity related to the epistemology of Nursing. It is highlighted that the purpose of the authors was not to answer the questions, but to enable reflections to support discussions on the theme nationwide.

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