

# Advances in Nursing Doctoral Education & Research

Official Journal of the International Network for Doctoral Education in Nursing (INDEN)

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# Journal Purpose

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The goals of *Advances in Nursing Doctoral Education & Research* are to:

- Promote academic debates and reports about nursing doctoral education
- Provide an academic platform for doctoral educators to share their innovations and experiences in providing nursing doctoral education
- Publish high quality nursing and interdisciplinary research
- Share best practices and procedures to enhance the diversity and quality in nursing doctoral education

## Author Guidelines

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Manuscripts submitted will be reviewed for their match to the journal's aims by the editors. If the manuscript is a match for the journal's aims, the editor will identify two editorial board members or manuscript reviewers with expertise in the area of the manuscript topic to review it and make recommendations regarding whether to publish it and any editing needed. The process will be 'blinded', neither the author(s) nor the reviewers will know the others' identity.

Papers may be on any topic relevant to the goals of the publication and INDEN. (please refer to the INDEN website for its aim and objectives in detail) This may include those focused on research, theory, program evaluation and other scholarly papers related to nursing doctoral education and research topics. Some issues of the journal may focus on a particular theme such as "Measuring quality in nursing doctoral education."

### **Guidelines for the submission of a manuscript for the peer review section**

1. Relevance to aims of this publication
2. Follow format guidelines for manuscripts
3. Length – 2500-3000 words with 12 Arial font and double line spacing.
4. Format for research manuscripts:
  - Abstract (limited to 350 words)
  - Key words (3-4)
  - Introduction and Background
  - Methodology
  - Analysis
  - Conclusions
  - Discussion
  - Implications for practice and future research
5. Format for non-research manuscripts:
  - Abstract (limited to 350 words)
  - A concise summary of the argument or proposed course of action and conclusions
  - 3-4 key words

# Author Guidelines

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## **Guidelines for the submission of a Perspective**

The Perspectives section of our ANDER journal invites doctoral students and faculty to share their experiences in doctoral education or other activities related to their development as scholars.

Authors for this section should include their name, credentials, affiliated university and their email address at the top of page. They also should send a picture and identify all the individuals in the picture with a text box underneath the image. Authors should briefly describe their area of research and population of interest.

The Format of this writing should be Arial, 12-point font and single-spaced with an extra space between paragraphs. The Maximum word limit is 400. Authors can send their perspectives to the editors through following email: [son-inden@jhu.edu](mailto:son-inden@jhu.edu)

# Editors and Board Members

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Professor and Chair  
Department of Acute and Chronic Care  
School of Nursing  
Johns Hopkins University  
mnolan3@jhu.edu

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William F. Connell School of Nursing  
Boston College  
Chestnut Hill, Massachusetts 02467 USA  
laurel.eisenhauer@bc.edu

Kristiina Hyrkas, PhD, LicNSc, MNsc, RN  
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Quality Outcomes  
Adjunct Professor, University of Southern Maine  
Editor, Journal of Nursing Management  
Maine Medical Center  
22 Bramhall Street, MGB2, RM2620  
Portland, Maine 04102-9954 USA  
hyrkak@mmc.org

Munikumar Ramasamy Venkatasalu, RGN, RMN, RNT,  
BSc, N MScN (Neuro), PhD (End of Life Care), PGDEPP  
Senior Lecturer in Adult Nursing  
Royal College of Nursing Akinsanya Scholar 2012  
University of Bedfordshire, Buckinghamshire Campus  
Oxford House, Oxford Road,  
Aylesbury, Buckinghamshire, HP21 8SZ  
kumar.venkatasalu@beds.ac.uk

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# Greetings from INDEN President

## Leadership Development in Nursing Doctoral Education

Our colleagues in several countries who have launched doctoral education in nursing in the last decade are working hard to develop capacity to prepare the next generation of nurse leaders in higher education and practice.

China has proceeded with breathtaking speed from two nursing doctoral programs in 2004 to reports of more than 20 today. In the U.S., there are a large number of nursing doctoral programs but the number of vacancies in the top leadership positions of dean, associate dean, and department chair is growing, reflecting the retirements of members of the baby boom generation. To what extent should we include education and development opportunities in



academic leadership within our nursing doctoral and postdoctoral programs to ensure adequate numbers of future leaders in nursing higher education? Doctoral and postdoctoral programs already seem packed with content on research design, advanced biostatistics, theory, and research ethics.

With greater attention to early identification of doctoral students and faculty who have an interest and aptitude for academic leadership, these individuals could be guided to take on minor leadership responsibilities. Involvement of young faculty and doctoral students in the search committees for academic leaders is a very effective and not overly burdensome way to expose them to the requirements of academic leadership. Both doctoral students and faculty in our school who have served on search committees for the positions of school of nursing dean and university provost and president have gained greater insight into the way that universities function and the importance of academic leaders developing a track record of successful faculty mentorship, curriculum innovation and financial stewardship in addition to a track record of publication and funding. In this issue of *Advancing Nursing Doctoral Education in Nursing* (ANDER), a doctoral peer mentoring program is described. Mentoring the doctoral students who enroll after them is a mutually beneficial way for doctoral students to advance their leadership skills. For faculty in the U.S., the American Association of Colleges of Nursing (AACN) and the National League for Nursing (NLN) (2014) have created academic leadership programs that bring together cohorts of developing leaders from many different universities. Finally, most of us who currently serve in academic leadership positions such as program director, department chair, associate dean and

# Greetings from INDEN President

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dean, can also contribute to faculty development by inviting faculty and students to work with us on school, university, and health system task forces and committees. Commitment to developing capacity for leadership in nursing higher education in general and nursing doctoral education in particular, is critical to advancing the nursing profession across the globe.

Signature Redacted

Marie T. Nolan, PhD, RN  
President INDEN  
Professor, School of Nursing  
Johns Hopkins University, USA

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NLN Leadership Institute (2014). <http://www.nln.org/facultyprograms/leadershipinstitute.htm>, Accessed on May 26, 2014



# Letter from the Editors

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Greetings to our Readers,

In the peer review section of this issue we have two articles related to strategies to enhance the success of those contemplating or enrolled in doctoral program. An article by Taylor, Terhaar, Mark, and McNelis describes a structured program to guide master's prepared nurses in deciding on doctoral education and in the process of applying to a program. An article by Fredickson and Nickitas describes a peer mentoring program developed for first year doctoral students to enhance the success of these students as well as to engage both mentors and mentees with interactions with students at other levels of the program.

The What's New in Doctoral Education section, of this issue highlights and article about faculty- doctoral student co-authorship. Another item refers to a report from the British Council about the phenomenon of English increasingly becoming the language of instruction as universities become more global.

We congratulate Matthew Lee, a doctoral student from the University of Pennsylvania for receiving an unusual and interesting award for game development. Matthew is researching the therapeutic uses of video games for positive mental health promotion. Further details about the award are included in this issue.

We once again encourage the submission of manuscripts for the peer review section and welcome the submission of perspectives from doctoral students and faculty. The deadline for the next issue is September 1, 2014

## **Associate Editors:**

Laurel A. Eisenhauer, PHD, RN, FAAN

Kristiina Hyrkas, PhD, LicNSc, RN

Munikumar Ramasamy Venkatasalu, PhD, RGN, RMN, RNT, PGDEPP



# A Doctoral Peer Mentoring Program

Keville Fredrickson, EdD, RN, FAAN<sup>1</sup>, Donna M. Nickitas PhD, RN, NEA-BC, CNE, FNAP, FAAN<sup>2</sup>

<sup>1</sup>City University of New York, Lehman College Department of Nursing

<sup>2</sup>City University of New York, Hunter-Bellevue School of Nursing

**Abstract:** The Institute of Medicine *Future of Nursing: Leading Change, Advancing Health* report (2010) called for the doubling of the number of nurses with a doctorate by 2020. To accomplish this, strategies need to be implemented during the educational period that provide support using different approaches. The purpose of this project was the development and evaluation of a peer mentoring program for new doctoral students by those more experienced and senior. The program created ten mentor-mentees dyads. At the completion of the program, a focus group was conducted to determine preliminary outcomes. Three categories emerged that were helpful to the mentees were personal, professional and academic life.

**Keywords:** peer mentoring, doctoral education, graduate student, doctoral program development

## Introduction

The Institute of Medicine *Future of Nursing: Leading Change, Advancing Health* report (2011) called for the doubling of the number of nurses with a doctorate by 2020, “to add to the cadre of nurse faculty researchers, with attention to increasing diversity” (p.13). Given the projections of a severe nursing shortage, nurses with doctorates are needed to educate future generations of nurses. Doctoral faculty are also needed to serve as leaders, teachers, and mentors who are responsible for how nurses are educated, utilized, and socialized into the profession. Already, qualified students are turned away at nursing schools across the U.S. because of faculty vacancies. The American Association of Colleges of Nursing data for the academic year 2012-2013 reveal a national faculty vacancy rate of 7.6 percent. Of these vacancies (88%) were faculty positions requiring or preferring a doctoral degree (AACN, 2012).

This limited pool of doctorally-prepared faculty hampers efforts to expand the registered nurse workforce and advance the discipline. The prob-

lem is compounded by the fact that the overall percentage of nurse faculty with doctoral degrees has decreased over the past decade. From 1980 to 2003, the percentage of doctorally-prepared faculty teaching in baccalaureate and higher degree programs in nursing increased steadily from 16% in 1980 to 50% in 2003. Over the past 10 years, this proportion has dropped to below 50 percent as the competition for nurses with doctoral degrees, outside of academia, has dramatically increased (AACN, 2013).

One of the barriers for preparing doctoral level faculty is the increasing time between entrance to a program and graduation, with an associated increased risk for drop-out (Grasso, Barry, & Valentine, 2007). Studies have shown that structured mentoring increases student retention and degree completion (Mingo, 2008).

Peer mentoring in doctoral education has been found to enhance students' exposure to learning and provided support to those trying to

work full-time while earning their doctorates (Dorn & Papalewis, 1997). Effective mentors demonstrate a willingness to engage, co-learn, and develop a strong collegiate relationship both inside and outside the classroom setting (Brown, et al., 1999).

The framework for the Doctoral Peer Mentoring Program aimed at first year doctoral nursing students included elements of both the Bland, et al. (2009) and the Brown, et al. (1999) frameworks. This article reports on a program that developed and evaluated peer mentoring for new doctoral students by doctoral students who were more experienced and more senior in the program.

## Setting

The doctor of philosophy in nursing program at the Graduate Center is a seven-year-old program within a large urban university, City University of New York (CUNY). The nursing doctorate, the newest addition to the Graduate Center, began as a doctorate in nursing science (DNS) and admitted the first students in 2006. The program prepares nurses as faculty members and researchers within universities and healthcare settings which addresses the complex health care needs of the urban population of New York and beyond. The PhD graduates are prepared to assume leadership positions in these settings and to develop and implement programs of nursing outcomes research in nursing and health care

In 2013, the DNS degree was converted to a doctor of philosophy (PhD) degree. The program is a full time program in which students meet once a week. Since the inception, 22 students have graduated with DNS or PhD and currently there are 71 students enrolled. The student body is diverse, consisting of approximately 31% underrepresented minorities. The attrition rate is very low with three dropping out for academic or

personal reasons, a rate of less than 2%. In addition, the completion time has been impressive, averaging 5.5 years. Given that the doctoral program is almost eight years old, the mentoring program, DPMP, was designed to continue and/or improve the completion rates.

The peer-mentoring program was originally based on the program's cohort structure in which students are placed in a cohort according to the year of their September entry into the program. The entering students remain as a group, taking classes and progressing through the program for approximately three years. Since they are together consistently, they develop strong bonds and grow to support one another throughout the doctoral experience. This horizontal peer support has consistently been reported by both graduates and ongoing students as one of the most positive aspects of the program providing academic and social support.

As the doctoral program evolved, however, we noticed that the cohorts were functioning more as silos with little communication with other cohorts. As a result, at social/professional events, students were purposively placed in groups that mixed the cohorts. For example, at the end of the year luncheon, seating was organized so that at a table for 10, there would be students assigned from at least 3 cohorts. Student reviews of these events were very positive stating that they had a better understanding of the program's opportunities and challenges from more senior students.

The DPMP was designed to provide a more formal structure with the intent of mixing the cohorts. The design of the program was to

provide the more junior students with a connection to those more seasoned who could provide insight, guidance, and support about course expectations, role stress, and strategies for success. At the same time, the more senior students attended seminars on mentoring and received feedback about their mentoring skills from the mentees and the two co-directors.

### **The Doctoral Peer Mentoring Program**

The Doctoral Peer Mentoring Program (DPMP) was piloted in 2012-13 with 10 mentors/mentee pairs. The program consisted of: three in-person informal meetings between mentor/mentee documented on activity logs, formative and summative evaluation activities and open communication channels between mentors/mentees; as well as the mentors/mentees and the project co-directors.

All ten newly admitted students (mentees) were paired with second or third year students (mentors) for a total of ten dyads. The mentors were selected for their overall level of success with the program and their observed willingness to connect with the program and peers along with astute interpersonal and social support skills. The co-directors developed the mentor-mentee pairings based on shared research interests and work setting. Mentees and mentors completed a questionnaire which asked about research interests, work setting, work hours (such as day vs evening or mixed), basic concerns about the doctoral experience and self-appraised strengths and weaknesses. In addition, the pairings were also based on common personal factors such as ethnicity, gender and age.

The first meeting was with the mentors to discuss the mentoring process. A fully developed orientation program was provided to review the core concepts and principles of mentoring. Students

were encouraged to foster feelings of belonging to a community of scholars where they would be respected for their ideas and insights, and to model values of collegiality to program retention and graduation. Following the meeting with the mentors, a group meeting was held to introduce the mentors to mentees, discuss the process of mentoring, expectations, and answer any questions. At this meeting, time was allocated for mentors and mentees to meet one another. This initial social meeting proved helpful in creating an atmosphere of relaxation and support allowing the peers get to know one another on an individual basis. The pilot mentoring program provided “structured relationships” that students may not have had the time or initiative to create otherwise. The program provided a formal mechanism to introduce the new cohort of students to the community of scholars and foster friendships that would promote success while pursuing doctoral education.

Three in-person meetings were held between the mentors and mentees during the semester. Additionally, the dyads were encouraged to contact each other by phone, email or in person when the need arose. Mentors were asked to check in with their mentees on a regular basis to see how they were doing and answer questions of a more informal nature about the programs or special interests.

At the end of the academic year, a focus group was conducted to evaluate the program. A total of 16 participants attended, of which 7 were mentees and 9 were mentors. One of the project co-directors led the discussion while the other co-director took notes reflecting the conversations. She then summarized these notes and read them back to the participants. The notes were corrected as indicated.

The co-directors then analyzed the notes. Three categories of support perceived by the students who were mentored emerged:

*Personal* included balancing multiple roles such as parenting, partnering, working and balancing life in general. For example:

*It was nice to put a face on an upper classman and to have the ability to reach out to a friendly face.*

*Knowing that others had similar pressures with young children, work and the inevitable weekends of school-work made it doable.*

*Professional* included the stress of the program requirements, acceptance of the commitment to doctoral education and time considerations.

*Just knowing I had the ability to continue in the program even when my job seemed so overwhelming and stressful and that I could seek help from my mentor was reassuring.*

*I found this program very helpful in that my mentor was also a colleague at work*

*She was often a phone call or email away. Just knowing that I could reach out to her as both a mentor and as a student who had been there, was very helpful.*

*Academic* included gaining information about the courses and faculty, advisement, reassurance of attainability and decreased anxiety.

*My mentor was great. It was so valuable to be given insights into the program, faculty and individual expecta-*

*tions. This helped decrease my anxiety and stress about the course work and assignments.*

*It was good to have someone to reach out to during the semester. I was so lucky to have someone to answer my questions, provide support and a real meaningful relationship to manage the challenges, stresses and anxiety of school.*

## **Conclusions**

The first year of the Doctoral Peer Mentoring Program (DPMP) resulted in a positive experience for both mentors and mentees. Often it is assumed that at the doctoral level, students are mature and do not need this kind of support. Our experience is that this is not true. The socialization and pressures of doctoral work differ from other educational experiences. Our findings revealed that new students perceived social support in the domains of personal, professional, and academic life.

Establishing a formal system of peer mentoring between new and more seasoned students offers advantages for both. It serves as a strategy to begin socializing new doctoral students to personal, professional, and educational skills, behaviors, and attitudes need to become a nurse scientist. For the mentors, it serves as a first step in developing competency in mentoring while being afforded the opportunity for support from the faculty.

The lessons learned included a need for more structure about expectations and opportunities as a comment from one the participants describes:

*Although we did not meet them more than the initial meeting time and I did not really contact her during the semester it was nice to see a friendly face.*

In September 2013, there were 13 new PhD students who are participating as mentees and 13 mentors from a total of 50 continuing students. Of the 10 mentors in the 2012-13 cohort, three graduated and seven will continue mentoring the students identified in 2012-13 program. The three students whose mentors graduated have been assigned new mentors. Since the program is only in its second year, we do not yet have data on graduation rates or time to completion,

A major outcome of this DPMP was to assist first year students to be successful in the first year examination and be positioned to progress in a timely fashion towards graduation. All students have progressed and successfully passed their first examination.

Further development of the project is planned. Funding was sought and received for a project to support the mentoring program and to develop an evaluation plan that will refine, evaluate, enhance, and create an evidence-based sustainable program for nurses studying for their PhD in the Graduate Center. There will be a web-based resource guide created for nursing doctoral students on internal and external resources to assist in successful completion of the program.

By providing peer mentors and mentees with additional resources, the program aspires to further enhance mentoring as a key component of doctoral education and professional enhancement.

### Correspondence

Keville Frederickson, EdD, FAAN  
Professor Lehman College Department of Nursing  
and The Graduate Center PhD Program in Nursing  
Keville.Frederickson@lehman.cuny.edu  
212-817-7987

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# A “GuIDE-ing” Initiative to Increase Applicants for Doctoral Study

Laura A. Taylor<sup>1</sup>, PhD, RN, Mary F. Terhaar<sup>1</sup>, DNSc, RN, Hayley Mark<sup>1</sup>, PhD, MPH, RN, Angela McNelis<sup>2</sup>, PhD, RN, ANEG

<sup>1</sup>Johns Hopkins University School of Nursing

<sup>2</sup>Indiana University School of Nursing

**Background:** The need for nurses with doctoral degrees to teach, administer, and provide quality care has never been greater. The number of doctoral programs in nursing has grown substantially in recent years, yet barriers remain for nurses to apply, progress and graduate from these programs. The literature suggests that a lack of understanding on the part of doctoral applicants of the type of programs available, experience needed for a successful application and progression, and ways to address barriers, all hinder nurses from pursuing and achieving admission to a doctoral program.

**Methods:** The GuIDE™ program is a two-day interactive problem solving bootcamp designed to move master’s-prepared applicants intentionally toward doctoral admission, increase the pool of applicants competitive for admission to doctoral programs in nursing.

**Results:** As a continuing project, the overall impact has yet to be determined, however, initial results are promising. In the three bootcamps offered to date, of the 36 nurses who have participated in the GuIDE™ program, seven (19%) have been admitted to doctoral programs (3-DNP, 4-PhD). Of these seven, four applicants were minority (3 African American and 1 Middle Eastern). Both qualitative and quantitative evaluation results indicate that the program has helped nurses understand their options for graduate education, address barriers to doctoral education, and develop a competitive application.

**Key Words:** Doctoral education, advance practice nurses, nursing faculty, diversity

## Introduction

Making the decision to pursue doctoral education in nursing can be daunting. The plethora of degrees from which to choose (Doctor of Nursing Practice [DNP], Doctor of Philosophy [PhD], Doctor of Education [EdD]), types of pedagogy from which to select (face to face, online, hybrid), as well as focus areas, makes it difficult for prospective students to navigate the pathway to admission, progression and graduation.

Over seven years of providing a DNP program and 25 years providing a PhD program in Nursing, faculty in an east coast university noted a pattern of many master’s-prepared nurse applicants not presenting themselves effectively to be competitive for admission. After reflecting on the data and reviewing the literature, faculty concluded that attending a well-structured men-

toring program before application to a doctoral program could increase students’ chance of success (Bednash, 2000; Beurhaus, Starger, & Auerbach, 2009; Donley & Flaherty, 2008). With support from the Maryland Health Services Cost Review Commission, in the form of a Nurse Support Program (NSP) II Award, the “Guiding Initiative for Doctoral Education” (GuIDE™) was developed and implemented for nurses across the state of Maryland.

GuIDE™ was designed to increase the pool of applicants competitive for admission to nursing doctoral programs, thereby expanding the pipeline to doctoral education and increasing the number of nurses eligible to become faculty. Moreover, an emphasis on increasing the diversity of the applicant pool was an integral com-

ponent of GuIDE™. The purpose of this manuscript is to describe the design, implementation, and early success of this unique program.

## **Background and Significance**

Increasing complexity of patient care, concerns about quality and safety, and the acute shortage of nursing faculty are feeding a growing nationwide need for nurses with doctoral preparation. A clear link has been established between higher levels of nursing education and better patient outcomes (Aiken, Buchan, Sochalowski, Nichols, & Powell, 2004). Paradoxically, in 2011, US nursing schools turned away 75,587 qualified applicants from baccalaureate and graduate programs and cited the critical shortage of doctorally prepared faculty as one cause for the problem (American Association of Colleges of Nursing, n.d.). Currently, less than 1% of all nurses in the US have doctoral degrees (American Association of Colleges of Nursing, 2008). The need for doctorally prepared nurses is clear and immediate.

The American Association of Colleges of Nursing (AACN), the National Academy of Sciences (NAS), and the Institute of Medicine (IOM) have all called for more doctorally prepared nurses. In 2004, AACN voted to endorse moving the current educational preparation necessary for advanced practice from the master's to the doctoral level. Moreover, they endorsed that nurses practicing at the highest level should receive the highest level of education and so the practice doctorate was implemented. Just one year later, in 2005, the NAS called for nursing to develop a "non-research clinical doctorate" to prepare expert practitioners to serve as clinical faculty. The Future of Nursing Report from the IOM (2011) similarly called for nurses to achieve higher levels of education and to double the number of nurses with a doctorate by 2020.

In response, DNP and PhD programs in nursing have been expanding nationwide. Between 2006 and 2012, the number of DNP programs in the US expanded from 20 to close to 300 (AACN, n.d.).

At the same time, the number of PhD programs in nursing expanded from 103 to 131. Thus, academe has accomplished much to address capacity barriers to pursuing doctoral education, however, personal and structural barriers remain, including a lack of understanding among potential applicants of the different terminal degree options and how to effectively pursue admission. Given the wide agreement on the pressing need for more doctorally prepared nurses, it is crucially important that young, talented nurses seeking doctoral education be helped to move expediently toward the appropriate doctoral program. These future scientists and scholars will contribute to nursing science, practice, and the health of the nation. With these central tenets in mind, a team of expert educators developed the GuIDE™ program.

## **Developing the GuIDE™ Program**

Donley and Flaherty (2008) and Bednash (2000) noted that well-structured mentoring before seeking admission to a doctoral program can increase an applicant's chance of success. Mentoring can guide an applicant to reflect upon the level of expertise, leadership and contribution to the nursing community necessary for successful admission to doctoral education programs, and then to take action to demonstrate these characteristics in their career and admissions portfolio. Literature suggests that nurses pursuing doctoral education need to critically examine the driving forces and the restraining forces of such pursuits (Table 1). The GuIDE™ Program was designed to facilitate participant examination of each of these forces. The ultimate goal of the GuIDE™ program was to increase the pool of applicants who are competitive for admission to doctoral programs by guiding potential applicants through the considerations and processes necessary for an application for ad-

mission (AACN PhD Position Statement, 2010; AACN DNP Essentials, 2006).

Table 1: Modified driving and restraining forces for doctoral students

Applicant Identified Driving Force	Applicant Identified Restraining Force
Interest in pursuing graduate studies	Lack of available programs with a focus on nursing education
Flexible program delivery options	Work responsibilities may limit time and access to graduate studies
Mentoring	Lack of available mentors
Collaborative Initiatives	Time constraints

At the beginning of development, three major components required to craft an effective and sustainable intervention were identified: an expert team, an Advisory Council, and a needs assessment of key stakeholders.

1. Establishment of a team of experts. The team was formed based on the expertise needed and included a principal investigator, co-investigator, program coordinator, and evaluator. The Principal Investigator (PI) brought over 20 years of faculty experience in nursing education, including many years of advising DNP and PhD candidates. The PI maintained the integrity and management of the grant, and oversight of the budget. She played a key role in developing and revising the curriculum, maintained communications between team members and project participants, and worked with the evaluation coordinator on the evaluation plan. The Program Coordinator managed marketing/recruiting, electronic registration, email notifications, supplies and meeting space as well as the program’s electronic survey tool design and distribution. The co-investigator (Co-I) is an expert in nursing education and in the outcomes of a post- DNP program. The Co-I was predominantly responsible for facilitation

and management of the program, and incorporation of evaluation feedback. Finally, the program evaluator (PE) is an expert in innovative teaching and learning strategies, nursing education research, evaluation, and faculty development. She developed the evaluation strategy and tools, as well as collects and analyzes participant data.

2. Establishment of the GuIDE™ Program Advisory Council. Six Chief Nursing Officers (CNOs) from Maryland-area hospitals were invited to participate on the Advisory Council. The council assisted in the development and review of the program, using their knowledge of the challenges their staff encountered when embarking on doctoral studies.

3. Needs assessment of key stakeholders. As representatives of key stakeholders for the program, current DNP and PhD students at one east coast university were asked to respond to questions regarding factors (benefits, consequences, facilitators and barriers) associated with their decision to pursue a doctorate (N= 6). They were also asked what information, in retrospect, would have been valuable to know while they were applying to doctoral programs.

### The GuIDE™ Program

Armed with data from current and recently graduated doctoral students, Advisory Council recommendations, and knowledge of the literature, the PI, Co-I, and Evaluator designed and implemented a curriculum using a strengths-based perspective where participants identified and maximized their strengths in making decisions regarding doctoral education. Participants were guided on how to: address facilitators and barriers; develop a network of advisors; and increase visibility in the educational and professional communities. Participants expanded their understanding of the institutional culture of academe to ensure confidence and success throughout the doctoral educational application process (See Table 2).



Table 2: The Goals of GuIDE™

Goals of GuIDE™
Successfully set priorities to address facilitators and barriers to doctoral education
Develop a network of advisers and collegial support through mentorship and networking
Increase understanding of professional development in the hospital and professional communities
Expand understanding of institutional culture to promote confident progress through each phase of doctoral education: the application process, the courses, the capstone/dissertation

The GuIDE™ mentorship Boot Camp is a 2-day intensive program which has been offered semi-annually from 2013-2014 to groups of 5-20 advanced practice nurses from Maryland hospitals and schools of nursing who are considering pursuing doctoral education. The program coordinator established a protocol that outlined the process of communication with all registered participants (See Table 3). A pre-bootcamp assignment was sent via email three weeks and one week before the bootcamp to engage participants and included online readings, and pragmatic information such as general reminders regarding access to the location, parking, and materials to bring to the bootcamp.

Following the first trial, the team received numerous requests from participants to review their résumé or curriculum vitae. The GuIDE™ team decided that the pre-bootcamp assignment should also offer the participant the opportunity to send their most recent résumé or curriculum vitae so that the faculty team can review and offer feedback at the end of day two.

The agenda for the program (Table 4) included mentorship, coaching, application strategies, and facilitators and barriers to moving ahead with doctoral education (Bednash, 2000; Dennis, 1991; Donley & Flaherty, 2008; Hinshaw,

2001; Cleary, Horsfall, O'Hara-Aarons, Jackson & Hunt, 2011). The program contracted with relevant content experts to provide a robust educational intensive program.

Table 3: Communication Protocol with Registrants

Timeline	Communication Sent
1 month prior to GuIDE Bootcamp	Send Flier with registration link to CNO's to distribute to Nurses interested in pursuing doctoral education
Ongoing	Send confirmation email to nurses as they register
2 weeks prior to GuIDE Bootcamp	Send email to registrants with assignments and agenda
3 days prior to GuIDE Bootcamp	Send reminder email with agenda and parking information

The GuIDE™ Bootcamp was an excellent forum for individuals to share the processes and desires that are required to apply, progress and graduate from a doctoral program. As such, the GuIDE™ program included a panel of current DNP and PhD students and recent graduates who shared their stories and insights on successful navigation and completion of their program. The panel consisted of diverse participants, including men, African American and Asian doctoral students or graduates. This component received very high evaluation marks from participants, with all participants rating it as highly effective. Panelists were invited to participate in networking opportunities with the bootcampers, including lunch and the networking soirée' after the first day of the program.

### Evaluation

All participants were asked to complete survey/evaluations throughout and following the

Table 4: GuIDE™ Agenda

Day 1 & 2

<b>Time</b>	<b>Topic</b>	<b>Leader</b>
8:00-8:30	Registration: Breakfast	
8:30- 9:15	Introductions	PI, Co-I, Evaluator
9:15- 10:45	The Types of Programs	Director of DNP Director of PhD
10:45- 11:00	Break	
11:00-12:30	Panel Discussion	
12:30-1:30	LUNCH	
1:30- 3:00	Application & Résumé that Shines for the Program You Want What Should you Plan For	Admissions Office Representative
2:30- 2:45	Break	
3:00-4:00	Mentors and Coaching**	PI, Co-I, Evaluator
4:30 – 6:00	Networking Soiree, for off campus gathering	

Day 2

<b>Time</b>	<b>Topic</b>	<b>Leader</b>
8:00-8:30	Networking Breakfast	
8:30-10:00	Facilitator/Barriers**	PI, Co-I
10:00-10:15	Break	
10:15-12:00	SWOT Analysis	PI, Co-I
12:00-12:30	Conclusion: Evaluation Lunch to Go	

experience. Demographic information was collected on each cohort. Surveys included a combination of items requesting yes-no responses, single best responses and a selection of a responses from a 5-point Likert type scale (strongly agree, agree, neutral, disagree, strongly disagree). Survey data were collected face to face during critical junctures of the program, and then electronically within one week of completing the program and 6 months after attending the program. These online surveys contained 11 questions (See Table 5).

### Preliminary Findings of GuIDE™

At the time of manuscript submission, the 2-day GuIDE™ program had been delivered three times. Some of the initial results and revisions are presented, followed by future directions for increased dissemination and research.

Table 5: Sample Questions of One-Week Post-Bootcamp Evaluation

Questions	Scale
How well did the bootcamp meet its objectives?	Extremely Well, Very Well, Moderately, Not at all
How organized was the course content?	Extremely Well, Very Well, Moderately, Not at all
Do you feel that the bootcamp was objective, balanced, and free of bias?	Yes/No Please Explain (Free Text)
Will you change your approach or career trajectory/plans in any way as a result of attending the bootcamp?	Yes/No Please explain (Free Text)
How effective was the pace/content of the following components: SWOT, Mentoring, Panel Discussion,	About the right speed, slightly too quickly, slightly too slowly
Overall, how would you rate the bootcamp	Excellent, very good, fairly good, mildly good

Participants. A total of 36 nurses have participated in the program, ranging in age from 24-57 years (M = 40). Although predominantly Caucasian (64%), participants were also African-American (25%), Middle Eastern (3%) and Hispanic (8%). A wide variety of practice areas and years of practice were represented, and many participants held certification in their specialty area. Prior to the program, most participants were unsure if or to what doctoral program they would apply (72%), and only 1 of 36 had previously applied to a doctoral program.

At the beginning of the program, participants were asked to list their top three barriers to pursuing doctoral education on a scale from 1 (very little) to 10 (very much). In rank order of most frequently indicated, participants listed: financial obligations/money/cost; time; lack of focus area; family balance; life commitments/lifestyle; Intimidation/fear (not smart enough); relevance/how will it help my practice; not sure about PhD or DNP; having to take the GRE; support of peers, colleagues or family; preparedness (professionally); and length of program. During the course of the program, these barriers were addressed numerous times, particularly in the panel discussion with current students and recent graduates, in the Strengths-Weaknesses-Opportunities-Threats (SWOT) analysis, and in the facilitators/barriers session.

One week after the conclusion of each boot camp, participants were asked to complete an online survey about their perceptions of GuIDE™. Twenty of 36 participants (57%) responded to the one-week online survey. Ninety percent of respondents reported that they would change their approach or career trajectory plans as a result of attending the bootcamp. All of the 20 respondents reported that the program met the objectives very to extremely well, the information was very to extremely clearly presented, and the content was very organized. Open-ended comments about what they found most effective included differentiating among the degree programs, understanding the admission process, résumé building, and networking with

faculty and potential doctoral peers. Results from the one-week post survey revealed that participants enthusiastically endorsed the pedagogical strategies employed including the SWOT analysis, panel discussion, and reflection exercises. Ideas for improvement included more information about actual courses in the programs, admission essay preparation, and mock interviews with each section being well paced and organized. Participants also suggested that information about post-graduation job opportunities and salaries be included in the future.

As part of the GuIDE™ program, all participants received a six-month post-bootcamp email survey (eight questions revolving around ways to improve the GuIDE™ program, satisfaction with content delivery, and current status in the application process). Initial data shows that six bootcamp participants have applied and been accepted into the doctoral program of their choice, and two participants reported that they were actually very glad to participate in the bootcamp as it helped them to NOT pursue a doctoral degree at this time but plan to revisit this decision in the future.

### **Rapid Performance Improvement Strategy**

Data collected during the session on barriers to pursuing doctoral study, and the open-ended comments on the survey, were used to revise the program. Using just in time performance improvement strategies (Porter-O'Grady & Malloch, 2007; White & Dudley-Brown, 2012), the GuIDE™ program was revised to incorporate the feedback immediately. The following critical changes were made:

1. A session focusing on the most commonly identified barriers and suggested strategies was incorporated as a core component of the program. Moreover, panelists concentrated on specific ways they were able to successfully overcome the obstacles they encountered during application and throughout the phases of their programs.
2. SWOT analysis: –Time allotted for the SWOT analysis was increased as participants indicated this was an exceptionally helpful ac-

tivity and one in which they wanted more time to engage. SWOT was relocated to day two as the first activity in the morning with greater time allowance for dialogue and strategy building for success at various stages: application, progression, and career development.

3. Mentoring/Coaching was relocated to day one following the application and résumé building activity as this discussion helped participants understand the importance of letters of recommendations, GPAs and GREs, as well as financial aid opportunities and resources to support all components of doctoral education. It was felt that the presentation on strong coaching and mentorship fit more closely immediately following this discussion because many participants realized that they would benefit from professional mentoring support as they prepared their applications.

4. Finally, a session on an individualized résumé building with faculty experts was added to day two. In the “pre- bootcamp” emails, participants were invited to send a current résumé and set up a 15-minute appointment with the PI, Co-I or Evaluator. This component was very well received during the third trial.

### **Discussion**

The need for nurses with doctoral degrees to teach, administer, and provide quality care has never been greater. National organizations have called for increasing the levels of education among nurses, and a strong body of evidence supports a link between higher education and improved patient outcomes. The number of doctoral programs in nursing has grown substantially in recent years, yet barriers remain for nurses to apply, progress and graduate from these programs (Kirschling, 2014). Our experience over many years of providing nursing education suggested that a lack of understanding on the part of applicants of the type of programs available, experience needed for a successful application and progression, and ways to address barriers, all hindered nurses from pursuing and achieving admission to a doctoral program. In response, we designed the GuIDE™ program. To our knowledge, this is the first program developed to address these needs and move master's-prepared applicants intentionally toward doctoral admission.

The ultimate goal of the GuIDE™ program is to increase the pool of applicants competitive for admission to doctoral programs in nursing. Both qualitative and quantitative evaluation results indicate that the program has helped nurses understand their options for graduate education, address barriers to doctoral education, and develop a competitive application. As a continuing project, the overall impact has yet to be determined, however, initial results are promising. In the three bootcamps offered to date, of the 36 nurses who have participated in the GuIDE™ program, seven (19%) have been admitted to doctoral programs (3-DNP, 4-PhD). Of these seven, four applicants were minority (3 African American and 1 Middle Eastern).

The GuIDE™ team believes that if the program and applicant career aspirations are matched and aligned with the best doctoral programs, the factors related to attrition (loss of interest, disillusionment, powerlessness, frustration and conflict in expectations) can be minimized if not eliminated (Cohen, 2011; Nolan, Wenzel, Han, Allen, Paez, & Mock, 2008; Stefuriuc, 2009). The GuIDE™ Bootcamp is an innovative educational experience, designed specifically to meet the identified learning needs of the population of nurses it serves, primarily master's-prepared nurses considering doctoral education. GuIDE™ will ultimately arm the current workforce with tools to be successful in application to a doctoral program, address the need for greater diversity in doctorally prepared nurses and nurse faculty, and be a model for the establishment and enduring collaborative community of scholars within the doctoral educational community.

### **Acknowledgements**

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### **Correspondence**

Laura A. Taylor, PhD, RN,  
Assistant Professor  
Department of Acute and Chronic Care  
Johns Hopkins University School of Nursing  
525 N. Wolfe Street, Office 415  
Baltimore, MD 21205  
(O) 410.502.9342  
Twitter: TaylorPathoProf  
Linked In: Laura A. Taylor

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## Doctoral Student Perspectives



### **Barbara Barrionuevo Bonini, MSN**

Visiting PhD Student, University of Pennsylvania

I am a PhD student at the School of Nursing, University of São Paulo – Brazil. My area of interest is history of nursing. With support from the Alice Fisher fellowship, Bates Center for the Study of History of Nursing and the Brazilian Fundação de Amparo a Pesquisa do Estado de São Paulo I came to the University of Pennsylvania as a visiting scholar to learn more about how the

history of nursing is studied in the US and to explore the archives at the Penn Bates Center, the Rockefeller Foundation and the National Archives. My faculty mentor here at Penn is Dr. Julie Fairman, Director of the Bates Center, who helped me develop new ideas and ask new questions about my research. While at Penn, I attended classes, did my research and presented a seminar for the Bates Center. The seminar was also transmitted via the web so my friends, family and colleagues in Brazil could participate generating very interesting questions and discussions. Back in Brazil I plan to finish my dissertation, to help improve the Ibero-American History of Nursing Center at the School of Nursing, University of São Paulo, and to stimulate other Brazilian nurses to come to Penn either to be a visiting scholar or to do some research.

### **Siriwan Chukumnird, M.Sc., RN**

PhD Student

I am a doctoral student in nursing science at the Prince of Songkla University, Thailand. My area of interest is hypertension care strategies focused on culture and hypertension control. I plan to develop an adherence to preventive behavior scale for the Thais with pre-hypertension, using a cultural base. As a visiting scholar in the School of Nursing at the University of Pennsylvania, I would like to learn about the strategies to improve writing a dissertation /manuscript and to publish an article in the international journal. Under the mentorship of Lisa Lewis, PhD, RN, FAAN, Associate Professor of Nursing, a core member of the Center for Health Equity Research, I have learned and generated two articles related to my study. After completing my visiting scholar program, I will conclude my research and finish my dissertation. I plan to publish the study findings with my advisor in international journal.



## Doctoral Student Perspectives

### Elif Gürsoy, PhD

During my PhD studies I noticed that the most important need in the nursing field is a strong leader with a broad perspective. Many others in the field were also aware of these needs but I was on a quest to make change. I wanted to find examples of strong leaders who take a broad view.

An adviser said Dean Meleis at the University of Pennsylvania School of Nursing was the leader I was looking for, that I would learn a lot from her. Also, that UPenn Nursing houses very powerful researchers who actually shape nursing policies and that I could observe global projects in the Global Health Affairs office.



Highlights of what I've learned and experienced while at Penn SoN are:

- There are no words to describe the quantity and quality of what I've learned from Dean Meleis. She told me: "You cannot change anything that you are not part of"; "Don't ever forget that most of the time informal relationships are far more important"; "Never say 'I hope,' Always say I will";
- I attended numerous conferences across the USA and on campus.
- With my advisor's guidance, Dr. Julie Fairman I conducted a research project focused on academic-practice partnerships. This project helped me learn qualitative research. This experience was priceless.
- I also attended my co-advisor Dr. Eun-Ok Im's lectures and learned about Nursing Theories, web-based research and writing articles;
- Dr. Marjorie Muecke taught me about global partnership and helped me get a wider point of view. Her support and guidance gave me the strength I needed in this foreign country;
- In November 2012, I presented a paper at the 19th International Council of Women's Health Issues (ICOWHI) in Bangkok, Thailand, titled "Perceptions of Sexuality Concerning Women Among University Students in Turkey: A pilot study." This was my first presentation in English;
- I observed at the Hospital of the University of Pennsylvania's OB/GYN department whereby I learned very valuable clinical nurse leadership lessons.

Upon returning to Turkey I will do the following:

- Write two papers on the academia-practice partnership model in continuation of the project I started here. I also plan to introduce the model of nursing school-hospital collaboration to my university;
- Initiate a doctoral course and a certificate program in leadership and management for nurses in Turkey;
- Mobilize academic and nursing practice leaders to influence social and health policies;
- Continue collaboration with UPenn SON.



## Doctoral Student Perspectives

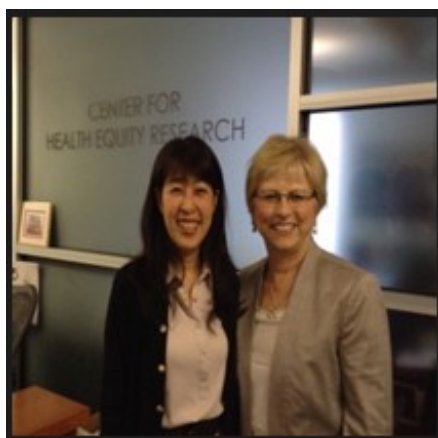
**Kyoko Kobayashi, R.N., Ph.D.**

I came to UPenn School of Nursing to learn and define nurses' roles in the care of childhood cancer survivors. My mentor at UPenn SoN was Dr. Janet Deatrck and co-mentor was Ms. Wendy Hobbie, MSN, CRNP. They made my dreams come true! Even though my staying at UPenn SoN was 4 months, my eyes were opened and I found incredible new perspectives. My learning consisted of three parts; clinical observations, training, and research.

**Clinical observations** I visited 6 clinics of 5 hospitals that had different cancer survivorship care models. I learned a lot from many nurse practitioners. Becoming acquainted with great nurses became one of the treasures for my life.

**Training** I learned about childhood cancer in Ms. Hobbie's course "NURS 715 Pediatric Oncology Theory I." Also, I learned qualitative research methods from Dr. Deatrck's course "NURS 813 Qualitative Paradigm Empirical Nursing Research."

**Research** I developed a research proposal for the coming year for which Dr. Deatrck will be my mentor and we began meta-ethnography research.



Through these learning opportunities, I will be able to establish Japanese survivorship care in Japan in my research, clinical practice, and education. I think this is the best way to repay the kindness I had from Dr. Deatrck and Ms. Hobbie and all people I had met at the UPenn and clinics during my observations.

*Apply Now*

STTLINDEN Fellowship

*June 30, 2014*

See page 24 for more information

Expiration Date: 00/00/00

## Doctoral Student Wins Game Award

### Matthew Lee R.N., Ph.D.

Matthew Lee, a Penn Nursing Hillman Scholar for Nursing Innovation, has been awarded a 2014 International Game Developers Association (IGDA) scholarship. The IGDA Scholarships, among the most coveted awards for promising students in game development and related disciplines, offer scholars a broader understanding of the gaming industry, provide an excellent opportunity to meet prominent figures in the field and to bond with the brightest young talent.

A member of Penn Nursing's Health Technology Innovation Incubator, Matthew is a doctoral student researching the therapeutic uses of video games for positive mental health promotion. Matthew and his team of interdisciplinary colleagues are prototyping 'AppHappy: Journey to the West' a mobile app which encapsulates

evidence-based techniques, such as cognitive behavioral therapy, within the narrative and mechanical framework of a role-playing game. Designed to help college students facilitate social integration and stress management, the app is expected to be released in 2015. A graduate of the Interactive Multimedia program of the University of Southern California (USC) School of Cinematic Arts, and formerly attached to USC's Center for Scholarly Technology, Matthew built the foundation for the university's presence in Second Life, collaborated with the MacArthur Foundation and other organizations on projects relating to Virtual Worlds and the Public Good, and assisted in the development of technologies for healthcare simulation and learning.



### About Penn Nursing's Health Technology Innovation Incubator

Penn Nursing's Health Technology Innovation Incubator is designed to foster creativity, promote collaboration, and accelerate health innovations from the realm of concept to real-world applications. The incubator connects people from diverse disciplines across the University, the Penn Medicine Health System, the City of Philadelphia, the corporate world, and beyond to stimulate and expand on the interconnectivity between healthcare science, clinical practice, civic life, and emerging technologies.

<http://www.nursing.upenn.edu/news/Pages/Penn-Nursing-Student-named-International-Game-Developers-Association-Scholar.aspx>

## What's New and Upcoming in Doctoral Education

**Contributor:** Laurel Eisenhauer, RN, PHD, FAAN , Boston College, USA

Dearden, J. (2014). *English as a medium of instruction – a growing global phenomenon: phase 1. Interim report*. British Council. Retrieved from: <http://www.britishcouncil.org/education/ihe/knowledge-centre/developing-talent/report-english-medium-instruction>

Explores the shift from English as a second language to English becoming the language of instruction in universities in countries where English is not the predominant language. It includes a discussion of questions about impact of this on equality and human rights.

Maher, MA, Timmerman, BC, Feldon, DF, & Strickland, D. (2013). Factors affecting the occurrence of faculty-doctoral student co-authorship. *The Journal of Higher Education*. 84:121

**Abstract:** Using faculty narratives, this study identifies factors affecting the occurrence of faculty-doctoral student coauthorship. Norms of the discipline, resources, faculty goals for students, faculty goals for themselves, and institutional expectations emerged as dominant factors. Each factor is explored separately and as part of an interlocking holistic picture.

## INDEN BUSINESS

### STTI-INDEN Fellowship

- ◆ Apply now! (see following pages)
- ◆ Deadline is June 30, 2014

### INDEN Membership Drive

- ◆ Renew your membership by July 1, 2014
- ◆ <http://nursing.jhu.edu/excellence/inden/membership.html>

### INDEN Elections

- ◆ Elections will close June 8, 2014
- ◆ New INDEN Board Members will be announced June 30, 2014
- ◆ Email [inden@jhu.edu](mailto:inden@jhu.edu) with any questions

## INTERNATIONAL POSTDOCTORAL FELLOWSHIP IN NURSING

Jointly Sponsored by:  
**Sigma Theta Tau International (STTI)**  
and  
**The International Network for Doctoral Education in Nursing (INDEN)**

### **Purpose:**

The purpose of this fellowship is to enhance the quality of doctoral education worldwide by:

- providing opportunities to nurse faculties in doctoral programs to strengthen their research skills and learn about doctoral education and mentoring in an international context;
- laying the foundation for future international research collaboration and multi-site studies; and
- opening avenues for international exchange of scholars.

### **Features of the Fellowship**

#### **Who can apply?**

The fellowship is limited to recent (within the past 5 years) doctoral graduates from low and middle income countries who hold faculty positions in doctoral programs, and who supervise doctoral student research.

#### **What does the fellowship provide?**

The fellowship provides a monthly stipend of \$1,760 (USD)/month for the 3 months of the fellowship. The stipend should be sufficient for room and board, local transportation, and purchase of health insurance available in most countries for students. The fellowship also provides a modest honorarium for mentors.

#### **Where will fellows be placed?**

Fellows will be placed in research intensive environments in North America, the United Kingdom, Europe, or Australia and matched with investigators in the fellow's proposed area of research. Applicants may suggest appropriate venues and potential mentors for the consideration of the selection committee. The selection committee, composed of STTI and INDEN members, will locate appropriate settings using extensive contacts developed through the diverse membership of STTI and INDEN.

#### **Number of Awards and Length of Fellowship Training**

Three fellows a year will be supported; the fellowship period is three months.

#### **Eligibility**

At the time of application, applicants must:

- Hold membership in both STTI and INDEN.
- Be competent in the English language.
- Be a faculty member in an institution offering nursing doctoral education.

#### **Selection Criteria**

Successful candidates will:

- Have graduated from a nursing doctoral program [or possess a master's degree in nursing and a doctorate in a related field] within the past five years.
- Present a preliminary research proposal in an area of nursing science that will be the basis of the work during the fellowship period, and which promises to evolve into a program of research.
- Present evidence that research will continue upon return to home country.
- Have the potential for engaging in future international collaboration.
- Have responsibilities for teaching/advising doctoral and post-doctoral students in the home country.

## INTERNATIONAL POSTDOCTORAL FELLOWSHIP IN NURSING

### Terms of the Award

- Applicants must return to their home country/institution following the period of training.
- The applicant's employer makes a commitment to provide facilitation for the conduct of the fellow's research upon return from the fellowship, and agrees to fund the travel of the fellow [along with any visa fees] to and from the location where the fellowship will take place.
- The applicant's employer commits to releasing the successful applicant within 3–6 months of fellowship offer.
- The fellowship must begin no later than **January, 2015**.
- The fellowship does not support travel or related expenses for accompanying adults or children.

### Application Checklist – Deadline June 30, 2014

- A completed application cover sheet [attached to this call for proposals—please see p. 3].
- A completed, signed contract [attached to this call for proposals—please see p. 4].
- Proposed plan for research and mentorship for the fellowship period, not to exceed 5 pages.
- A curriculum vita not to exceed 5 pages.
- A letter from the employer agreeing to elements under “Terms of the Award,” above.
- A letter from a senior colleague knowledgeable about the applicant and his/her work, addressing the applicant's potential for a research career and the applicant's potential contribution to nursing doctoral education in his/her country.
- Documented evidence of INDEN membership and STTI membership in a chapter [information on membership can be obtained from INDEN or STTI websites listed below in section “For More Information.”]

### Deadline

All materials listed under “Application Checklist” above must be sent to [inden@jhu.edu](mailto:inden@jhu.edu) with the subject heading “2014 STTI/INDEN Fellowship Application” and received electronically in **one pdf file by June 30, 2014**. Letters from employers and senior colleagues must be sent separately to the same email address by the deadline (applicant needs to request the letters).

### Review Process

Applications will be reviewed by an international panel of nurse academics, consisting of members of both STTI and INDEN.

### Start of Fellowship

Once selection and placement of fellows has occurred, the exact fellowship period will be negotiated for a time convenient to the fellow and the mentor, but must begin within 3 - 6 months of selection.

### Upon Completion of the Fellowship Period

Fellows will submit a report for the INDEN *Newsletter*, and an article to STTI for publication and/or presentation at one of its meetings.

### For More Information

The websites of STTI and INDEN should be consulted for membership information. They will also contain the announcement and the application cover sheet [<http://www.nursingsociety.org>; <http://nursing.jhu.edu/inden>].

If your country/province does not have a STTI chapter, please contact Ms. Beckie Schafer at [beckie@stti.iupui.edu](mailto:beckie@stti.iupui.edu) about how to apply for membership as a Nurse Leader. She is the Global Chapter Advisor for STTI.

INTERNATIONAL POSTDOCTORAL FELLOWSHIP IN NURSING

APPLICATION COVER SHEET

**Download** this application and **save** it on your computer. **Fill in** the information requested and **email** this page to: [inden@jhu.edu](mailto:inden@jhu.edu)

Name \_\_\_\_\_

Mailing Address [Provide complete information, including State, Country, postal or zip code, etc.]

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone and FAX numbers \_\_\_\_\_

Email address \_\_\_\_\_

Institution of current employment \_\_\_\_\_

Address of institution \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Briefly describe your current responsibilities as a faculty member \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date when doctoral degree was obtained \_\_\_\_\_

Title of dissertation \_\_\_\_\_

Institution where doctoral degree was obtained, and title of degree \_\_\_\_\_

\_\_\_\_\_

Name, title and email of employer who is responsible for research facilitation and providing support for travel \_\_\_\_\_

\_\_\_\_\_

Name, title and email of senior colleague who will send a letter of reference describing the applicant's research and mentoring potential \_\_\_\_\_

\_\_\_\_\_  
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**INTERNATIONAL POSTDOCTORAL FELLOWSHIP IN NURSING**

**CONTRACT**

Jointly Sponsored by:  
The International Network for Doctoral Education in Nursing (INDEN)  
and  
Sigma Theta Tau International (STTI)

**Instructions for this page:**

This page must be signed and dated by the applicant and his/her employer.

**To be signed by the applicant:**

I, \_\_\_\_\_, a faculty member at \_\_\_\_\_ University am applying for the INDEN/STTI fellowship, for the 2014 – 2015 academic year. If selected, I understand that I will receive:

- a total of \$5,280 (USD) stipend (\$1,760 USD/month for 3 months). This money shall be used for room and board, local transportation, and purchase of health insurance.
- Research mentoring by an experienced researcher, in an area of research of interest to the fellow

In addition, I will:

- return to my home country/institution following the fellowship

Signed \_\_\_\_\_

Date \_\_\_\_\_

**To be signed by the employer:**

I understand that, \_\_\_\_\_, who is on faculty at \_\_\_\_\_ University, and has signed above, is applying for the INDEN/STTI fellowship for the 2014 – 2015 academic year. We are committed to the following:

- funding the travel of the fellow to and from the location where the fellowship will take place
- paying any visa fees, if applicable
- releasing the successful applicant within 3 – 6 months of fellowship offer
- providing facilitation for the conduct of the fellow's research upon return from the fellowship
- holding a faculty position for the fellow, upon his/her return to our university

Signed \_\_\_\_\_

Date \_\_\_\_\_

# POST-DOCTORAL FELLOWSHIP IN MENTAL HEALTH AND PSYCHIATRIC NURSING

The Johns Hopkins University School of Nursing is seeking a highly qualified candidate for a two-year post-doctoral fellowship in mental health and psychiatric nursing.

Created through the generosity of the Morton K. and Jane Blaustein Foundation, the **Blaustein Fellowship** provides a richly mentored experience to promising nurse scholars committed to pursuing multidisciplinary and collaborative research that advances the science surrounding the mental health of young children and their families and the treatment or prevention of symptoms associated with mental illness in childhood.

The Blaustein Fellow is mentored by Dr. Deborah Gross, the Johns Hopkins University Leonard and Helen R. Stulman Endowed Chair in Mental Health and Psychiatric Nursing, and other faculty members from the School of Nursing and the Department of Psychiatry and Behavioral Sciences in the School of Medicine. In collaboration with Dr. Gross, the Blaustein Fellow will conduct research that seeks to improve the mental health and wellbeing of individuals and families in hospital or community settings.

*See reverse for Blaustein Fellowship Application Procedures*

More information about the Blaustein Fellowship and other post-doctoral opportunities can be found at [http://nursing.jhu.edu/faculty\\_research/research/opportunities/post-doctoral.html](http://nursing.jhu.edu/faculty_research/research/opportunities/post-doctoral.html)





## APPLICATION PROCEDURES

**Eligibility:** Applications are welcomed from nurses with research doctorates or those nearing completion of their doctoral degree who have demonstrated a commitment to scholarship in mental health or psychiatric nursing research. Preference will be given to applicants with research interests in the mental health of young children and their families, histories of prior research funding, and data-based publications in refereed journals. The annual stipend ranges from \$35,000 to \$51,000, depending on experience. Second year of funding contingent on progress in achieving first year fellowship goals.

*Fellowships are open to eligible U.S. citizen and international applicants. Applicants from groups underrepresented in the nursing profession are encouraged to apply.*

**Due Date:** The application process is open. Applications will be reviewed upon receipt. Start date is negotiable.

**Application Requirement:** Please submit the following materials as PDF documents to [blausteinfellowship@son.jhmi.edu](mailto:blausteinfellowship@son.jhmi.edu)

- Statement of career objectives/research goals.** The statement should be 2-3 pages double spaced and include:
  - Future career goal(s)
  - Proposed goals for the post-doctoral fellowship
  - Prior scholarship, experiences, or achievements the applicant believes will significantly contribute to a post-doctoral fellowship at Johns Hopkins University
- Curriculum Vitae**
- Three (3) letters of recommendation.** Letters should be sent to [blausteinfellowship@son.jhmi.edu](mailto:blausteinfellowship@son.jhmi.edu). Ask letter writers to state in email subject line: "Letter for (applicant's name): Blaustein Postdoctoral Fellowship.
- Official Transcripts** (only transcripts from PhD program are required)

Questions regarding application procedures or specifics of the Fellowship should be directed to Dr. Gross at [debgross@jhu.edu](mailto:debgross@jhu.edu) or [blausteinfellowship@son.jhmi.edu](mailto:blausteinfellowship@son.jhmi.edu).

**Johns Hopkins University School of Nursing**

525 North Wolfe Street Baltimore, MD 21205 410-955-4766 [www.nursing.jhu.edu](http://www.nursing.jhu.edu)