



The Impact of Leadership and Research on Decision Making: Doctoral Degrees in Dental Hygiene – A True Transformation for Dental Hygiene Education

JoAnn R. Gurenlian, RDH, MS, PhD

This next decade is going to be an exciting time for dental hygiene education. While there has been an emphasis on transforming dental hygiene education, the profession is about to witness change the likes of which has never occurred before. Doctoral degree programs in dental hygiene will be developed for the first time in program history in the U.S.

In 2005, the American Dental Hygienists' Association (ADHA) published a document entitled *Dental Hygiene: Focus on Advancing the Profession*.¹ Within this paper, the profession recognized that dental hygiene scholars were needed to lead the development of theory and knowledge unique to the discipline of dental hygiene and that there was a shortage of dental hygiene faculty that was expected to continue into the future. The leaders noted that doctoral preparation of dental hygienists is essential for building the dental hygiene knowledge base for advancing the professionalization process. Further, an aim recommended within this document was to create a doctoral degree program in dental hygiene. Recommendations were to:¹

- Develop curricular models for both professional (doctor of science in dental hygiene practice) and academic (doctor of philosophy or PhD) doctoral programs in dental hygiene
- Conduct educators' workshops at professional meetings to promote the development of doctoral programs in dental hygiene
- Publish curricular models for doctorate programs

Over the next decade, discussions occurred further supporting the need for doctoral education in dental hygiene,²⁻⁵ workshops were offered establishing interest in creating doctoral programs for dental hygiene,⁶ and research has been conducted about this topic.⁷ Specifically, Tumath et al surveyed graduate dental hygiene students to assess perceptions of importance in establishing dental hygiene doctoral programs and interest in applying to them.⁷ Of the 159 graduate learners responding to the survey, the majority of respondents (77%) indicated that doctoral education in dental hygiene is needed and the establishment of a dental hygiene doctoral degree is important to the profession (89%). Although most respondents supported both a

PhD in dental hygiene and the Doctor of Dental Hygiene Practice (DDHP), 38% preferred the PhD program while 62% preferred a DDHP program for themselves. Further, 43% expressed interest in enrolling in a doctoral program in the next one to five years.⁷

Curriculum models for both a PhD Program and entry level doctorate in dental hygiene have been proposed.⁸ The PhD program is designed to prepare academicians and researchers to expand the scientific body of knowledge in the dental hygiene discipline, and develop a cadre of leaders capable of impacting health policy to improve access to dental hygiene care. The entry level doctorate concept is designed to prepare graduates to function independently and work collaboratively on inter-professional health care teams. Students will enter the program with a baccalaureate degree and complete a 4-year curriculum with practicum experiences in all 6 roles of the dental hygienist so they are prepared to function in a variety of health care settings to complement clinical practice.⁸ With modification, the entry level doctorate model could serve as the basis for a DDHP program for current dental hygienists seeking a doctoral degree.

In the near future, there are 3 viable options for doctoral education for dental hygiene. The PhD program is already undergoing institutional approval process and could start as early as Fall 2017 pending state board of education approval. Once one program begins, others, including the DDHP and entry level concepts, will follow. As this transformation of dental hygiene education occurs, the profession will change. Theory development will advance, research will broaden, new academicians will be prepared and a higher level of clinicians will be contributing to improving the oral health challenges of the nation. Equally exciting, these graduates will possess four years of education at the graduate level equivalent to other health care professionals. Thus, there no longer will be a need for clinicians to be held to unnecessary supervisory restrictions by another discipline. That is truly a long overdue transformation!

Sincerely,

JoAnn R. Gurenlian, RDH, MS, PhD

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