

Professional Ambivalence: Understanding of the Eminence of Advanced Clinical Nursing Specialization in the Philippines

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Abstract

As the practice of nursing continuously evolves, the registered nurses' role has expanded from basic practice to advanced nursing practice over the last 100 years. Following the demands of healthcare organizations worldwide, Philippines adopted the Nursing Specialty Program that aims to promote presence of clinical nurse specialists in the country.

Cognizant of this challenging role, this phenomenological inquiry has eidetically captured their collective experiences as clinical nurse specialists. A series of semi-structured, in-depth, one on one interview was conducted. Driven by the central question, "What describes the acceptance and utilization of CNS in the health care institution?" Field text were transcribed and subjected to phenomenological reduction via cool and warm analyses.

Four clusters of themes delineated the participant's collective experiences namely: (a) Inspired to perform a new role (b) Blinded acceptance of embodied role (c) Narrowed opportunities to practice area of specialization and (d) Divided to one's own achievements. An experience of "professional ambivalence" greatly characterized the narrowed response of the community and healthcare professionals that led to the feelings of ambivalence to one's own achievements, from being fulfilled to frustrated, dissatisfied and uncertain to practice confidently and independently.

The Filipino clinical nurse specialists are initially motivated to improve one's practice and the nation's health but, unfortunately enjoy sparingly the eminence and appreciation as foreign nurse specialists do. To be able to empower more Filipino nurses to struggle for professional growth and for advanced nursing practice in the Philippines to continue to flourish, it is imperative that nursing leaders must begin to organize a unified vision of advanced nursing practice by amending the existing law, delineating the scope of their practice, reviewing the existing requirements for certification to meet global standards and making the healthcare community mindful of the existence and value of such professionals.

Keywords: Clinical nurse specialists; Acceptance; Utilization; Professional ambivalence; Philippines

Introduction

Advanced Nursing Practice has totally transformed the direction and future of the nursing profession. The intense demand to address the need for health promotion, disease prevention, and to provide for evidence-based care to the underserved populations of the world led to the development and expansion of this advanced nursing role. Though it has grown scale in other countries especially in developed countries like the United States, Australia and United Kingdom, Advanced Nursing Practice in the Asia Pacific region especially in the Philippines, has received diminutive attention.

The growth and development of nursing specialties has, from its earliest inception, been an interesting and challenging journey. Early in the 20th century, nurse midwives and nurse anesthetists' laid the formative foundations for what we now know as advanced practice nursing [1,2]. Four distinct advanced practice nursing roles evolved from the early beginnings- the nurse midwife (CNM), the nurse

anesthetists (CRNA), the clinical nurse specialists (CNS), and the nurse practitioner (NP). New roles continue to emerge or morph into new configuration.

A number of authors have noted patterns in the evolution of nursing specialties to an advanced practice level [1,3]. Initially, it was driven by the changes in patient needs, new technology, and changing opportunities within the workforce and insufficient physician supply. In the second stage, the specialty required organized training for nurses. This specialty training programs were institution-specific and essentially consisted of a paid apprenticeship with some organized classes. These "certificate programs" were not standardized, and quality was uneven [1]. The third stage is characterized by pressures for standardization of education and skills involved in the specialty both as a means of increasing standardization and to raise the status of the specialty to an advanced practice level. There is growing recognition of the additional knowledge and skills needed for increasingly complex practice in the specialty [1].

Certification, as defined by the American Board of Nursing Specialties [4], is the formal recognition of specialized knowledge,

skills and experience demonstrated by achievement of standards identified by a nursing specialty to promote optimal health outcomes. It is an accepted method to validate that nurses have knowledge, skills and abilities that are fundamental to accomplishing their job functions as advanced nurse practitioners. While basic nursing licensure indicates a minimal professional practice standard, certification denotes a high level of knowledge and practice, with the intent to protect the public. The purpose of certification is to assure members of the public that an individual has mastered a body of knowledge and acquired skills in a particular specialty [5].

Internationally, the current processes for CNSs entry into practice are: (1) to graduate from an accredited master's or doctoral level program that prepares the student for practice as a CNS with a specialty and (2) to secure employment.⁵ According to the National Association of Clinical Nurse Specialists, this is the most appropriate pathway because this recognizes the value of the additional credentials earned through advanced education preparation. Some states have additional requirements such as: (3) to pass the national certification examination in the specialty; (4) to apply for licensure or authorization to practice in a state where title protection is in place; (5) to apply for credentialing and privileging process if necessary or if required by the facility in which the CNS works. More recently, certification at the advanced practice level has been used as a quasi-regulatory by the state agencies that grant recognition to individuals who have met pre-determined qualification [5,6].

Direct clinical practice is the central competency expected from an advanced nurse practitioner [1]. Six additional core competencies that further define advanced practice nursing include expert guidance and coaching, consultation, ethical decision making, collaboration, research skills, and clinical and professional leadership. Further, advanced roles would include autonomous problem-solving and clinical decision-making, advanced assessment, prescriptive authority, and expert nursing care and advanced communication skills, pharmacological and other selected diagnostic and therapeutic procedures [7].

The literatures have examined the impact of certification as it benefits nurses who are certified in their work place. These benefits would include: personal achievement, job satisfaction, validation of knowledge, greater earning potential, commitment to professionalism, and access to a broad range of job opportunities [8], high levels of professionalism, attitude of self-regulation, self-determination, and independence [9]; fewer errors in patient care [6]; Influencing accountability, accomplishment, growth, specialized knowledge, as well as recognition among employers, peers and consumers [10]; professional fees accepted by the Center for Medicaid and Medicare Services (CMS) [5]; and finally reimbursing examination fees, displaying certification credential on nametag and/or business card, and reimbursing for continuing education [11].

In the Philippines, continuous efforts to meet up with the global standards led to the establishment of Advanced Nursing Practice through the adoption of a Nursing Specialty Program and creation of the Nursing Specialty Certification Council (NSCC) [13]. This serves as the government's response to the issues faced by the nursing profession such as decreasing quality of nursing graduates, surplus of nurses, increasing unemployment and low compensation [13].

Locally, certification has three (3) levels, namely: Level I- Nurse Clinician I; Level II- Nurse Clinician II; and Level III- Clinical Nurse Specialist. Certifications will be granted to candidates after they have

successfully passed the series of didactic, practical and written examinations and complied with the requirements necessary, such as the following: certified copy of Transcript of Records (TOR) of BSN and graduate M.N. degrees; documents showing completion of the requirement (clinical/academic) for the level applied for; and recommendation of NSCC to Board of Nursing (BON) for the issuance of certification for the level applied for. According to the Philippine Board of Nursing (BON), advanced nursing practice covers the roles of the clinical nurse specialist, who is an expert practitioner within a specialized field of nursing. These nurses participate in a range of sub-roles including direct patient care, research, teaching, consultation and management. Clinical nurse specialists are independent nurse practitioners that could be self-employed and provides professional services to client/patients and their families. These nurses reach out and offer their services rather than expect clients to seek their help.

Although, nurse leaders have exerted efforts to formulate specialty programs for Filipino nurses. The researcher felt that there is a strong need to look into the present conditions of the clinical nurse specialists. What have happened to them after certification? Are they receiving the same recognition and benefits as other international nurse specialists receive? How are they being accepted and utilized in the Philippine health care setting?

Method

Design

Phenomenology seeks knowledge on the basis of the genuine, human experience and aims to describe the phenomena "going to the things themselves" and in the natural experience of the "life-world" [14]. This approach will involve direct exploration, analysis, and description of the acceptance and utilization of Filipino advanced clinical nurse specialists as free as possible from unexamined presuppositions aiming at maximum intuitive presentation and a capacity to stimulate our perception of their lived experiences while giving emphasis on the richness, breadth, and depth of this phenomenon [15].

Selection

Five Filipino advanced clinical nurse specialists, certified by the Philippine Board of Nursing, working in tertiary hospitals in Metro Manila were chosen using Snowball sampling technique. With regard to the recommendation for sampling size [16], in qualitative studies, it is noted that this study had few participants for the reason that qualitative methodology values the understanding of complex human issues rather than generalizability of results.

Procedure

A two-part instrument was developed by the researcher to gather data and information for this qualitative study. It comprises of the participant's demographic profile and a semi-structured in depth interviews comprising of open-ended questions [17] as data gathering tool. The interviewing technique ensured that the study participants spoke on issues pertinent to advanced clinical nursing practice and helped achieve data saturation point. Their sharing revolved around the central question "What describes the acceptance and utilization of advanced clinical nurse specialist in the health care settings?"

After securing informed consent, interviews were scheduled based on the participants' availability and convenience. Interviews were taped recorded for the purpose of capturing everything that transpired in the process including the non-verbal cue and clues. Code names were assigned to each recorded audio tape to maintain their anonymity. Interview lasted for an average of one hour. After transcription of the data, the researcher went back to the participants to validate the responses gathered.

Mode of analysis

Tape recorded interviews were personally transcribed by the researcher individually to minimize transcription errors and followed the steps of a descriptive phenomenology method of inquiry as outlined by Swanson-Kauffman and Schonwald [18]. The researcher made every effort to set aside all personal biases and prejudices of the phenomenon [19]. After listening to individual interviews and transcribed the collected data, the researcher analysed all data based on the field texts and processed it with the use of repertory grid. The process involved sorting, categorization (cool analysis) and thematization (warm analysis). Inductive and deductive methods were used to ensure appropriate placement of appropriate themes and finally uncover the central meaning of the phenomenon. Also, the researcher adopted Colaizzi's Seven Steps of Phenomenological analysis [20].

The exhaustive description and the fundamental structure were then validated by qualitative research experts not involved in the study. Member checking procedures were done to ensure truthfulness and trustworthiness of the data [21].

Findings

From the fullness and vividness of the verbalizations of the clinical nurse specialists (CNS), the researcher deduced the phenomenon of "Professional Ambivalence" that described their experiences in the acceptance and utilization of advanced practice nursing in the Philippines. As the study aimed to described and understand the acceptance and utilization of CNS, the phenomenon of Professional Ambivalence Syndrome emerged as shown in Figure 1. Four Clusters of themes delineated their collective experiences and are described as follows: Inspired to perform a new role, Blinded acceptance of the embodied role, Narrowed opportunities to practice area of specialization and Uncertainty to one's own achievements.

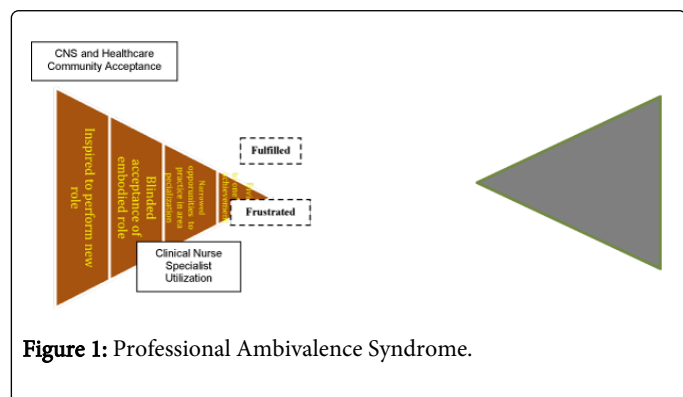


Figure 1: Professional Ambivalence Syndrome.

Professional Ambivalence Syndrome greatly characterized the divergent recognition of the healthcare professionals to the clinical nurse specialists' enthusiasm to commit to practice professional

advancement and maximize their services in the country. Notably, there is an evidence of incongruity in the views of the clinical nurse specialists' and the response of the community of healthcare professionals which was graphically represented by the use of a green laterally inverted triangle. From the enormous commitment of unremittingly improving nursing services, an ambiguous, narrowed response in the community of healthcare professionals was received by the clinical nurse specialist. The shape of a laterally inverted triangle was used to depict the wider perception of the CNS that gradually narrows as the healthcare professionals give limited regard to the value of ANP. Also, the green colour was used to signify the nursing profession.

As the CNSs progress to compete globally, a narrowing regard and acceptance of their specialization was experienced by the clinical nurse specialists' leading to feelings of ambivalence to one's own achievements, from being proud to frustrated, dissatisfied and uncertain to practice confidently and independently as represented by another grey triangular shape in opposing position which highlighted the CNS divided, clouded emotions.

Acceptance

In this study, acceptance is defined as to how the clinical nurse specialists and the healthcare professionals embraced the advance nursing practice in the country. It is clearly highlighted from the two contrasting descriptions of the clinical nurse specialists' positive view to practice independently and the concealing responses of their colleagues and nursing administrators. Contrary to the optimistic views of the nurse to pursue clinical nurse specialization, the healthcare community responded indifferently to the presence of clinical nurse specialists in the healthcare team. Acceptance is further described in the study through the two cluster themes that emerged, (1) Inspired to perform a new role and (2) Blinded Acceptance of Embodied Role.

Inspired to perform a new role

This cluster of theme was characterized by the clinical nurse specialists' positive view to challenge self with the need for professional advancement. For most of participants, Advanced Nursing Practice is a form of specialization that would give them a higher level of advantage in terms of autonomy and authority in their profession, economic stability and degree of worth in the healthcare field. These ideas were clearly depicted by all of the participants' statements as one the participant Nightingale narrated "Through this specialization, I will be able to advance myself both professionally and economically." Moreover, Benner and Orem affirmed that the prestige of being called as a specialist inspired them to become certified.

Additionally, Orem and Roy confirmed their optimistic perception that being a clinical nurse specialists would change their future, be globally recognized and uplift their morale and the nobility of the nursing profession. As Orem stated, "When I heard about the specialization, I was delighted because this could give a new image to Filipino nurses. I was so interested because I felt that this is now the chance to prove to the world that we can be trained and we can excel in our field. This could pave a better future ahead of us. This could open new doors to opportunities and recognition."

Blinded acceptance of embodied role

In this study, blinded acceptance was described by the clinical nurse specialists (CNS) indistinct performance of their perceived role in the healthcare setting and how the patients, administrators and other healthcare professionals appreciated their presence in the area. When Nightingale was asked to describe how her patients, administrators and other healthcare professionals accepted her roles and responsibilities as a Cardiovascular Clinician she strongly responded "Acceptance of the CNS is a big question mark!! There is no well-defined law as to what the scope of the roles and responsibilities of the CNS are. There are even no well-defined competencies that each CNS should be acquired. I am definitely accepted as ICU Nurse but as a specialist in terms of profession I am not. People and even doctors are not even aware that such specialization among nurses exists."

Subsequently all respondents know for a fact that acceptance of their profession is still in question because there is no well-defined laws that explains their scope of practice. "It is so difficult to act especially if you are not guided by the law"; "I really don't know how far I could render care to my patients. It is like practicing the profession without guidelines."

Abdellah distressingly said "Actually, I, myself, am not quite sure of my roles and responsibilities. There are no clear descriptions on what a clinical nurse specialist can do and not do. There are no set of competencies set by the Board of Nursing. I just simply met all the requirements and become certified, that's it! Even as a specialist, I was treated the same way before my certification. There was no big difference at all." Further, Roy added "Even if you are qualified, if your role is not accepted based by law it is nothing."

Utilization

Utilization is defined in the study as to how the services of the clinical nurse specialists are maximized and valued by their patients/public, co-workers and administrators. Two cluster themes described how the CNS was regarded in their area of specialization. First, Narrowed opportunities to perform in area of specialization, second, divided to one's own achievements.

Narrowed opportunities to perform in area of specialization

This cluster of theme outlined the limited regard of the healthcare team to the clinical nurse specialists. As most of the participants validated this experience "Our expertise is only being availed inside the hospital and I think people would still prefer to see a doctor rather than consulting us." But positively some of the respondents shared how public utilization may be made more possible "For the public to utilize our profession the ANP should pass a licensure exam given by the PRC and results must be known to the public"; "People would only believe in us if we have the license as a nurse specialist."

Consequently, this study revealed that utilization of the expertise of these clinical nurse specialists in their workplace depends on how much their colleagues trust them. As Benner shared "You really need to show them that you can because for one doctors would still question and doubt you of our expertise."; "Though advanced nursing practitioners abroad is an autonomous profession, doctors here still claim that they have longer educational preparation than ANPs here and so you always need to prove yourself."; "Some of the doctors allow me to do stoma care especially if they knew that I've undergone

trainings and seminars and am certified as a nurse specialist, but some still don't. It's really a case to case basis."

Lastly, administrators have a great impact as to the utilization of the CNS. These nurse specialists noted that "We are deployed in the clinical area just like other staff nurses."; "It doesn't mean even though you are a new-born screener you'll be automatically assigned in a pediatric or nursery unit as still the hospital administration will decide." In the end such administrative decisions would dictate the path of utilizing the expertise of a clinical nurse specialist because "No special privilege is given to us even after all certifications and trainings we went through to be the expert that we know we are now," a respondent emphatically expressed.

Aggravating to the situation would be the fact that the public is unaware of the existence of such practice as Nightingale and Benner viewed the public and the healthcare professionals' limited regard of their specialization were related to their lack of awareness of such specialization. As Roy affirmed this experience "It is really hard to say that I am truly recognized as a nurse specialist... People will remain seeing us an ordinary staff nurses that happened to have the extra skill,." "And I don't think people will come to my house for nursing care" Orem skeptically added.

This legal issue that long plagued their profession led to disappointment as experienced by most of the participants as they openly averred "You are just treated the same way as the other nursing staff, even if you went through trainings and certifications. Every day you feel that there's this constant need to prove yourself to your colleagues."; "Yes, you are eventually recognized as skilful but definitely not as a specialist."; "People would usually perceive nurses as secretary of the doctors or assistants"; "What's more disappointing is that you know you are very much capable of doing the tasks and yet you cannot work independently."

Divided to one's own achievements

This emerging pattern surfaced the participants' experience of conflicting emotions in the practice of advanced practice nursing. Being fulfilled of their achievements is coupled with the negative feelings of frustrations based from how they were regarded as members of the healthcare team. As one of the participants verbalized "You are hesitant and most often doubtful of what you can and cannot do because of the lack of a clear scope of practice still plagues the CNS profession," one reflected on the intrapersonal factors that chain the proliferative utilization of such profession in the country today. Moreover lack of confidence and a great feeling of being lost are some of the shared reasons of these respondents as to why they don't assert their profession as much. The following are their verbalizations:

"Being a certified clinical nurse specialist is not an assurance of a promotion" as Nightingale verbalized about its professional gains in their field of practice. Others support his statement by verbalizing that "No special privileges and benefits are given to CNS.; "Definitely I cannot ask for any professional fees, like doctors do, for the special service I've rendered."; "In the hospital that I'm working at, nurse specialists like me are not only overloaded but also can be pulled out anytime of their units to render special care but without any additional compensation." Additionally one responded sums it all why professional gains of these CNS are masked by noting "As what I've observed and experienced myself a CNS obtains promotions not solely based on his/her status as a clinical nurse specialist but mainly because of the skills and the number of years he/she might have rendered in

the institution he/she is working at. Sometimes, it's just hard not to compare how well clinical nurse specialists (CNS) are accepted and privileged abroad", one respondent verbalized as he shook his head comparing how Filipino and foreign CNS are accepted in their respective locales.

Discussion

The introduction of advance nursing practice (ANP) has already generated many debates regarding issues such as educational preparation, scope of practice and even the consistency in which these professional roles should be called [22,23]. In the Philippines, ANP became one of the nation's healthcare strategies in improving its global competence [13]. However, the same problems arose when regulatory boards failed to address aforementioned concerns surrounding its inconsistencies. Hence this study opted to explore qualitatively the acceptance and utilization of clinical nurse specialists in the Philippine health care settings.

In the study by Niebuhr and Biel [11] both the authors averred that several studies correlated the impact of certification as it benefits to nurses who are certified and how the employment of certified nurse's benefits the workplace. The clinical nurse specialists' positive perceptions of acquiring a specialization in the country were related to the potential advantages of authority, independence and financial stability that accompany it. These optimistic views of Filipino CNS proved the findings of Wynd [9] who emphasized that the value of nursing certification has also been associated with high levels of professionalism, characterized by attitudes of self-regulation, self-determination, and independence. Certified nurses have been shown to possess increased sense of empowerment [11]. Most of the participants in the study initially regard advance practice nursing as giving them the autonomy to achieve their highest level of potential, personal fulfilment and a deeper sense of accomplishment.

Contrary to the Filipino ANPs positive views about the value of certification, this does not directly correlate to an automatic salary increase; promotions are not solely based on their status but mainly because of their skills and most often due to the number of years they have served a hospital or an institution. This variability is parallel to the American Board of Nursing Specialties' Value of Certification Survey⁴ when only one (1) statement- "Certification increases salary"- did not receive overall agreement from the respondents.

Interviews with the ANP suggest that they collectively view professional gains as being recognized to be skillful and competent at the same time. Competency has been defined as the degree to which individuals can apply the skills and knowledge associated with a profession to the full range of situations that fall within the domain of that particular profession [24]. But without the clear-cut distinction of what an ANP could do and not do, they remain unparalleled to the regular registered nurses (RN). Therefore they will just be recognized as skillful in a particular field but not necessarily a specialist.

Findings of the study also proved how the community of healthcare professionals and their stakeholders can greatly influence the acceptance and utilization of ANP locally. As the study of Niebuhr and Biel [11] identified that lack of institutional support would keep nurses from valuing their specialization. The lack of institutional support was clearly described by most of the study participants in the following situations: First, they felt that they were treated ordinarily by their colleagues and administrators despite their earned specialization. Second, most of the CNSs were assigned to area outside their expertise

prohibiting them from practicing their skills and knowledge, gaining confidence and practicing independently. Third, there were no clear boundaries set by the Board of Nursing in all healthcare institutions to establish their nursing roles and responsibilities as clinical nurse specialists. A need for clarity regarding the core competencies of APN is essential to be able to understand their distinctive role in practice [1].

Narrowed opportunities revealed to be the essence of ANP's utilization in the country. This is due to the lack of public trust to the new found profession. Without public awareness, professional gains for these professionals will remain uninviting. To date the country still experiences paucity when it comes to investigating issues, barriers and efficacy of these professional roles; thereby, contributing to the lack of awareness of the nation with the services that the CNS can offer. Moreover lack of formality when it comes to the scope of practice serves as confusion for both physicians and clinical nurse specialists especially that they utilize the same body of knowledge. Some asserted that when measures of quality and cost are used, the primary care provided by nurse practitioners is equivalent or superior to that provided by physicians [25]. In summary, if the issues about the utilization and acceptance of the Advanced nursing practice felt by CNS still remain unheard and not addressed, the evolution of ANP in the Philippines will languish.

Conclusion and Recommendation

Collective analysis of the verbalizations, the Filipino CNS successfully unraveled the eidetic meaning of acceptance and utilization of clinical nurse specialists in the country. An extensive amount of literatures have been published regarding advanced nursing practice, its development, acceptance, barriers and mishaps. Despite those efforts there still exists a paucity of research that digs deep on how advanced nursing practice (ANP) in the Philippines is utilized and accepted. Thus this phenomenological inquiry sought after finding the true essence of both the acceptance and utilization of the aforementioned professional locally.

Philippines continuously geared to move toward global competence; finding ways in improving its resources, practices and services, developing its health care system through the more advanced breed of nurses more known to be called as advanced nurse practitioners (ANP). Driven by their confidence to practice the acquired advanced skills and knowledge, the Filipino clinical nurse specialists (CNS) are initially motivated to improve one's practice and the nation's health. Filipino CNS sparingly enjoys the eminence and appreciation as foreign nurse specialists do. To be able to empower more Filipino nurses to struggle for professional growth and for advanced nursing practice in the Philippines to continue to evolve, it is imperative that Filipino nursing leaders must begin to organize a unified vision of advanced practice nursing to establish the value of advance nurse practice in the Philippines by amending the existing law, delineating the scope of their practice, reviewing the existing requirements for certification and making the healthcare community mindful of the existence and value of such professionals.

As Hanson and Hamric¹ noted that the title of advanced practice will have meaning only if it is used consistently to refer to advanced clinical practice rather than being inclusive of other advanced roles in the profession, such as in research, education and administration. All roles whether specialty or advanced practice, are valuable and vital to the profession's continued development [4].

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