

Innovation in Dental Education: A Proposal for a Doctoral Program in the Philippines

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ABSTRACT

The absence of a Doctor of Philosophy (PhD) in Dental Education in the Philippines has led dental professionals to pursue general PhD in Education programs, resulting in a misalignment between advanced academic training and the specific competencies required in dentistry, including clinical integration, research development, leadership, and educational governance. This gap has become increasingly significant in light of technological advancements, expanded public health responsibilities, and global academic standards, ultimately limiting research capacity, academic leadership, and policy engagement within the profession. This study aimed to examine the need, feasibility, and strategic direction for establishing a PhD in Dental Education in the Philippines. A mixed-methods design was employed, involving a quantitative survey of 80 stakeholders from the dental industry and qualitative interviews with 15 dental professionals, educators, and practitioners. Quantitative data were subjected to statistical analysis, while qualitative data underwent thematic analysis, with triangulation applied to ensure alignment and validity of findings. Results demonstrated strong support for the proposed program, particularly among those with advanced academic training, and identified critical gaps in research literacy, faculty development, academic leadership preparation, public health integration, and digital readiness. The findings further emphasized the importance of aligning the proposed curriculum with institutional and regulatory standards set by PRC, CHED, and PQF. The study concluded that a PhD in Dental Education in the Philippines is both necessary and feasible, recommending a policy-aligned, research-intensive, and flexible doctoral framework to strengthen dental education, enhance institutional capacity, and support national and global oral health goals.

Keywords: academic leadership, Dental Education, Doctoral Program, faculty development, research capacity

INTRODUCTION

Dental education has undergone significant transformation due to technological advancements, globalization, and the increasing demand for evidence-based practice. While professional degrees such as the Doctor of Dental Medicine (DMD) prepare clinicians for practice, doctoral education is essential for developing research capacity, leadership, and academic innovation. In the Philippine context, the absence of a PhD in Dental Education represents a critical structural gap that limits faculty development, research productivity, and institutional advancement.

The proposed PhD in Dental Education is theoretically anchored on Human Capital Theory by Becker (1964) [1], which views advanced education as an investment in professional productivity and national development. In the context of dental education, doctoral preparation develops higher-order competencies in research, curriculum innovation, educational leadership, and policy development. Systems Theory by Von Bertalanffy (1968) [2] further explains the interdependence among higher education institutions, regulatory agencies, and healthcare systems, emphasizing the need for doctoral programs aligned with national frameworks such as the Philippine Qualifications Framework (PQF) Level 8 and the Career Progression and Specialization Program (CPSP). Professional Identity Formation of Cruess et al., (2014) [3] and Stakeholder Theory by Freeman

(1984) [4] likewise support the transformation of dental educators into scholar-leaders capable of influencing institutional reform and advancing evidence-based educational practices. Collectively, these frameworks establish the conceptual and policy foundation for the proposed doctoral program in Dental Education in the Philippines.

Despite these global developments, dental education in the Philippines remains predominantly focused on undergraduate and clinical training, with limited pathways for academic specialization. This misalignment between professional demands and academic preparation constrains innovation and leadership within the field.

This study therefore aimed to evaluate the feasibility of establishing a PhD in Dental Education in the Philippines by examining stakeholder perspectives, identifying systemic gaps, and proposing a structured and implementable doctoral framework aligned with national and international standards.

METHODOLOGY

Research Design

This study utilized a descriptive-evaluative and mixed-methods research design to comprehensively assess the feasibility of establishing a Doctor of Philosophy (PhD) in Dental Education in the Philippines. A cross-sectional approach was employed to gather immediate data regarding stakeholders' perceptions, understanding, and evaluation of the current state of dental education. By integrating both quantitative and qualitative data, this mixed-methods approach generated an evidence-based assessment of the program's viability, relevance, and structural needs. Furthermore, the proposed program was strictly examined in relation to its alignment with national regulatory and educational frameworks, including the Professional Regulation Commission (PRC) Vertical Alignment, the Philippine Qualifications Framework (PQF), and the Career Progression and Specialization Program (CPSP).

Research Participants

The study engaged key stakeholders in Philippine dental education to ensure a rigorous evaluation of the proposed doctoral program. Purposive sampling was employed to select a total of 80 survey respondents for the quantitative phase and 15 key informants for the qualitative phase. This targeted sampling approach ensured that all participants possessed the requisite expertise in clinical practice, higher education policy, and curriculum development. The 80 survey respondents consisted of dental educators, clinical practitioners, university administrators, regulatory representatives, higher education officials, and dental graduates. Their participation guaranteed that the quantitative data reflected profound insights into the systemic needs and pedagogical gaps within the dental sector. Concurrently, the 15 key informants, representing both academic and regulatory sectors, participated in in-depth interviews. Their expert perspectives contributed to a deeper qualitative understanding of institutional readiness, policy considerations, and strategic recommendations for program development.

Research Instruments

Data were collected using two primary instruments. The first was a **structured questionnaire** adapted and modified from the study of Davis et al. (2016) [5], designed to assess the feasibility and need for a PhD program in Dental Education in the Philippines. The questionnaire consisted of six sections: demographic information, perceived need for the program, stakeholder interest and perceptions, barriers and challenges, facilitators and recommendations, and an open-ended section for additional comments. The instrument included Likert-scale, multiple-choice, and open-ended questions to allow both quantitative measurement and qualitative insights. The second instrument was a **researcher-developed semi-structured interview guide** composed of 12 questions focusing on program feasibility, gaps in dental education, and curriculum and policy considerations.

The research instrument underwent expert validation by specialists in dental education, curriculum development, and educational management to establish content validity and alignment with the objectives of the study. A pilot test was conducted prior to the actual data collection to assess clarity, internal consistency, and reliability of the instrument.

Data Analysis

Quantitative data were analyzed using both descriptive and inferential statistical methods. Descriptive statistics such as frequency, mean, median, and mode were used to summarize respondent characteristics and perceptions. Inferential statistics, including chi-square tests, t-tests, and Analysis of Variance (ANOVA), were employed to examine relationships and differences among variables. Regression analysis was conducted to identify significant predictors of perceived feasibility and acceptance of the proposed program. Qualitative data from interviews were analyzed using **thematic analysis**, following the framework on the Qualitative Research Methods (2nd ed.) by Liamputtong and Ezzy (2005) [6]. Responses were coded, categorized, and organized into emerging themes. Additionally, content analysis was performed on relevant documents, including PRC and PQF frameworks. Quantitative and qualitative findings were triangulated to provide a comprehensive and integrated interpretation of the study results.

Ethical Considerations

The study adhered strictly to established ethical standards to ensure the protection and welfare of all participants. **Informed consent** was obtained by providing respondents with clear information regarding the purpose, procedures, and expected participation in the study prior to data collection. **Confidentiality and anonymity** were maintained by ensuring that all personal information and responses were securely stored and presented in aggregate form, preventing identification of individual participants. Participation was entirely **voluntary**, and respondents were informed of their right to withdraw at any time without penalty. All collected data were stored in password-protected files accessible only to the researcher and authorized personnel, ensuring **data security**. Furthermore, a **technical review certificate** was secured prior to the commencement of data collection to validate the research process.

RESULTS AND DISCUSSION

Guided by the objectives of this study, this section presented how key stakeholders perceive the need and feasibility of a PhD in Dental Education in the Philippines. The findings reflected current gaps in research capacity, faculty development, academic leadership, public health integration, and digital readiness, as experienced across academic and professional settings. The results were organized into key themes aligned with the research objectives, highlighting both existing challenges and opportunities for advancement. Stakeholder perspectives also emphasized the importance of aligning the proposed program with national standards set by the PRC, CHED, and PQF. Overall, the findings provided a grounded basis for proposing a doctoral program that is responsive, relevant, and aligned with the evolving demands of dental education.

Figure 1. Distribution of Respondents by Profession

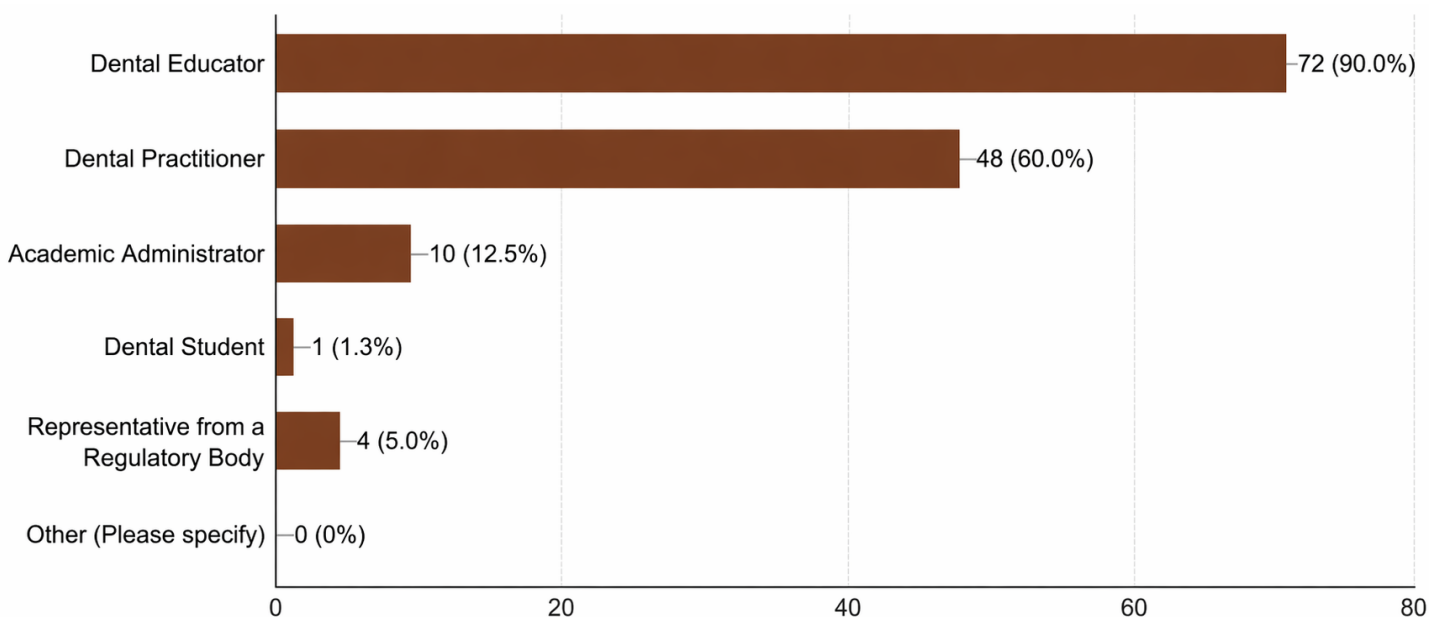


Figure 1 presented distribution of the professional roles of the study's respondents, with the total percentages exceeding 100% indicating that participants could select multiple applicable designations. The sample was overwhelmingly composed of Dental Educators, who made up 90.0% of the total with 72 respondents, followed by Dental Practitioners at 60.0% with 48 respondents. Academic Administrators represented a smaller fraction at 12.5% (10 respondents), alongside Representatives from Regulatory Bodies at 5.0% (4 respondents) and a single Dental Student comprising 1.3%. The complete absence of respondents in the "Other" category further solidified that the survey effectively captured its target demographic, highlighting that the vast majority of participants were directly engaged in the pedagogical and clinical dimensions of the dental field.

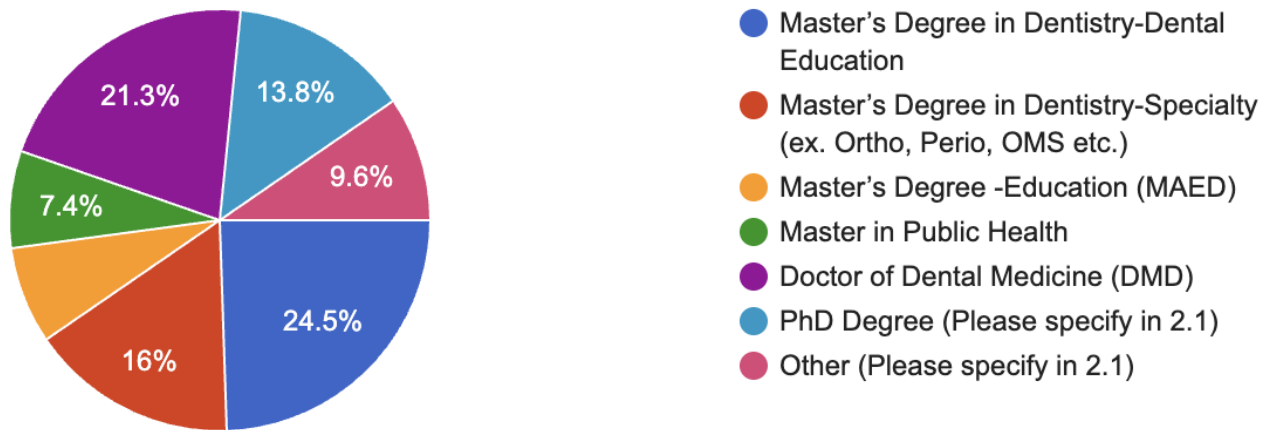


Figure 2. Distribution of Respondents by Level of Education Completed

Figure 2 presented the distribution of the study's respondents based on their highest level of education completed. The largest segment of the sample, accounting for 24.5% of the total, consisted of professionals who held a Master's Degree in Dentistry with a specific focus on Dental Education. This was closely followed by individuals holding a Doctor of Dental Medicine (DMD) degree at 21.3%, and those with a Master's Degree in a clinical dental specialty, such as Orthodontics, Periodontics, or Oral and Maxillofacial Surgery, at 16.0%. Respondents who already possessed a PhD degree comprised 13.8% of the sample, while those classified under "Other" qualifications made up 9.6%. The remaining portions of the cohort were evenly split at 7.4% each between holders of a Master in Public Health and a Master's Degree in Education (MAED). Collectively, these findings highlighted that a clear majority of the participants had already pursued advanced post-graduate or specialized academic paths, reinforcing the readiness and foundational interest of the community for a vertically aligned doctoral program.

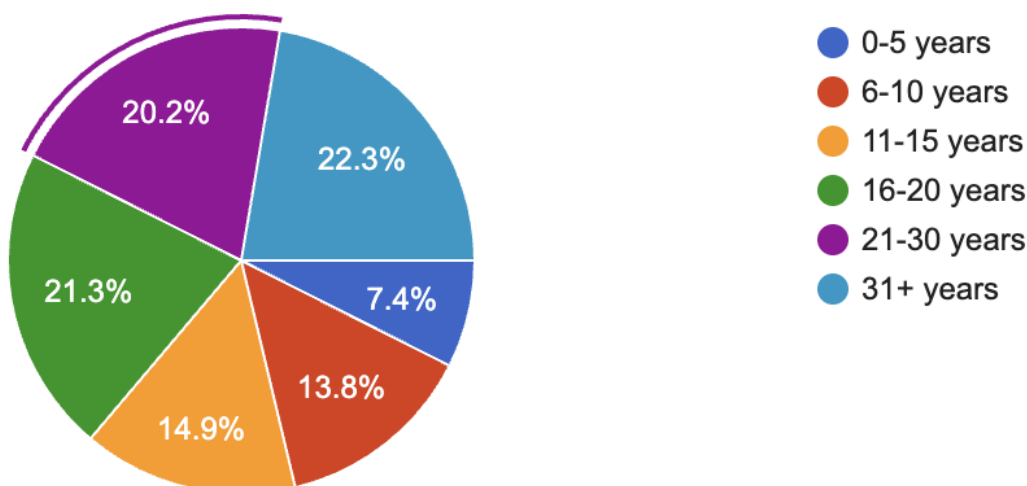


Figure 3. Distribution of Respondents by Years in the Profession

Figure 3 presented the distribution of the study's respondents based on their years in the profession. The largest segment of the sample consisted of individuals with 31 or more years of experience, accounting for 22.3% of the total. This was closely followed by participants with 16 to 20 years of experience at 21.3%, and those with 21 to 30 years at 20.2%. A distinct visual arc highlighted these three most experienced groups, collectively demonstrating that a substantial majority of the respondents—comprising 63.8% of the chart—had spent more than 15 years in the field. The remaining portions of the sample included professionals with 11 to 15 years of experience (14.9%), 6 to 10 years (13.8%), and 0 to 5 years (7.4%). Overall, the distribution indicated that the survey predominantly captured insights from highly seasoned professionals with extensive backgrounds in the dental profession.

Rationale for Establishing a PhD in Dental Education

Identification of Current Gaps in Dental Education

The quantitative and qualitative findings presented a synthesized picture of the current state of dental education in the Philippines, illustrating a critical transition toward a competency-based, student-centered, and technology-enhanced model. However, this progress remained constrained by persistent competency gaps.

Table 1. Level of Identified Gaps in Dental Education

Identified Gap / Need / Challenge	Frequency (n)	Percentage (%)	Mean*	Median*	Mode*	Description / Notes
Need for enhanced research and innovation	78	83.0	4.2	4	5 (Strongly Agree)	Most respondents agree that current dental education lacks sufficient focus on research development and innovation.
Need for alignment with international standards	72	76.6	4.0	4	4	Standardization with global dental education practices is perceived as a significant gap.
Need to improve faculty qualifications and expertise	81	86.2	4.3	4	5	Respondents highlight faculty development as critical for improving program quality.
Promotion of leadership and academic excellence	65	69.1	3.9	4	4	Gaps exist in cultivating leadership roles and excellence in teaching and administration.
Expansion of career opportunities for dental educators	57	60.6	3.6	4	4	Participants report limited structured pathways for career advancement within dental education.
Availability of funding and scholarships for advanced programs	61	64.9	3.7	4	4	Funding limitations are a key barrier to pursuing higher degrees and research initiatives.
Program structure and flexibility (online, hybrid, part-time)	55	58.5	3.5	4	4	Respondents emphasize need for flexible program formats to accommodate working professionals.

Institutional support for program development	49	52.1	3.4	3	3	Insufficient administrative backing is a reported obstacle to establishing new programs.
Lack of qualified faculty to teach in PhD programs	66	70.2	3.9	4	4	Many respondents note the shortage of educators with expertise in advanced dental education pedagogy.
Limited interest from potential enrollees	44	46.8	3.2	3	3	Perceived low enrollment interest is a challenge for program sustainability.
Lack of alignment with regulatory policies (PRC, PQF)	38	40.4	3.1	3	3	Regulatory misalignment is seen as a barrier to program legitimacy and implementation.
Supportive factors: Government and institutional funding	70	74.5	4.1	4	4	Strong perceived need for financial support from government and institutions.
Supportive factors: Integration with existing dental frameworks (PQF, CPSP)	62	66.0	3.8	4	4	Integration with national qualification frameworks is considered essential.
Supportive factors: Collaboration with international institutions	58	61.7	3.7	4	4	International partnerships are seen as enhancing program credibility and quality.
Preferred program format: Part-time, hybrid (online + in-person)	64	68.1	3.9	4	4	Hybrid models are most favored for balancing professional obligations and learning.
Preferred program format: Fully online	30	31.9	3.2	3	3	Fully online options are less preferred but still relevant for some stakeholders.

Table 1 highlighted that the highest levels of stakeholder agreement pertained to the need to improve faculty qualifications (86.2%) and enhance research and innovation (83.0%). These findings revealed a strong consensus regarding existing deficiencies in advanced academic preparation and scholarly engagement within the current educational system. This assessment aligned with global literature, which emphasizes doctoral education as a critical driver of research productivity and academic excellence in the health professions. Gurenlian & Spolarich (2013) [7]. Furthermore, the identified need for alignment with international standards (76.6%) underscored the drive of local institutions to achieve global competitiveness, mirroring the evolutionary trajectories of European and North American dental education systems. Dalanon & Matsuka (2019) [8]

Beyond academic gaps, respondents pointed to significant institutional and structural barriers, notably a shortage of qualified faculty to deliver doctoral-level instruction, limited financial resources, and insufficient program flexibility. These concerns corroborated prior research indicating that the successful launch of a doctoral program requires robust institutional capacity and resource allocation, not merely academic demand. ADEA (2011) [9] Notably, the relatively low concern regarding a potential lack of student interest suggested that a strong market demand for the program already exists; thus, strategic efforts must focus on fortifying the structural conditions necessary to support its implementation. Zitzmann et al. (2020) [10]

Assessment of Needs and Challenges

Table 2. Inferential Analysis of Needs and Challenges in Dental Education

Variable	Measure	Category / Group	n (%)	Chi-square / ANOVA / t	p-value	Regression β (SE)	p-value
Perceived Need for PhD Program	Yes / No / Maybe	Role	Faculty: 36 (38.3%) Administrator: 24 (25.5%) Student: 34 (36.2%)	$\chi^2 = 5.78$	0.056	Role (Faculty=ref)	0.32 (0.14)
		Years of Experience	<5 yrs: 18 (19.1%) 5–10 yrs: 30 (31.9%) >10 yrs: 46 (48.9%)	$\chi^2 = 4.12$	0.128	Experience	0.08 (0.03)
Primary Reasons for Establishment	Mean Score (1–5)	Role	Faculty: 4.32 \pm 0.62 Administrator: 4.05 \pm 0.71 Student: 3.87 \pm 0.80	F = 5.91	0.004	Role (Faculty=ref)	0.28 (0.10)
Interest in Pursuing PhD	Yes / Maybe / No	Prior Exposure to Advanced Dental Education	Yes: 50 (53.2%) No: 44 (46.8%)	$\chi^2 = 7.34$	0.026	Prior Exposure	0.41 (0.16)
Perceived Challenges	Count of Challenges Selected (1–3)	Role	Faculty: 2.1 \pm 0.8 Administrator: 1.9 \pm 0.7 Student: 2.0 \pm 0.9	F = 0.89	0.413	Experience	0.05 (0.02)
Factors Supporting Development	Count of Support Factors Selected	Education Level	Bachelor: 30 (31.9%) Master: 42 (44.7%) Doctorate: 22 (23.4%)	$\chi^2 = 3.65$	0.162	Education Level	0.12 (0.06)
Justification for PhD	Mean Perception Score (1–5)	Role	Faculty: 4.45 \pm 0.55 Administrator: 4.18 \pm 0.68 Student: 3.95 \pm 0.72	F = 6.48	0.003	Role (Faculty=ref)	0.35 (0.11)
Program Structure Preference	Online / Hybrid / Part-time	Role	Faculty: Online 15 (15.9%), Hybrid 21 (22.3%) Administrator: Online 12 (12.8%), Hybrid 12 (12.8%) Student: Online 18 (19.1%), Hybrid 16 (17.0%)	$\chi^2 = 2.97$	0.226	Prior Exposure	0.27 (0.12)

Table 2 provided deeper insight into the factors that influenced feasibility. The significant relationship between stakeholder role and perceived need indicated that faculty members demonstrated stronger support for the program, likely due to their direct engagement in academic work and their heightened awareness of existing limitations. More importantly, the finding that prior exposure to advanced education significantly predicted interest in pursuing a PhD ($p = 0.026$) underscored the importance of academic culture in shaping professional aspirations. This supported previous research showing that exposure to postgraduate education and research

environments enhanced motivation and participation in advanced academic programs. Gurenlian & Spolarich (2013) [7]

Interestingly, the absence of significant differences across years of experience and educational attainment suggested that support for the proposed program was widely shared across different groups. This indicated a collective recognition within the profession of the need for doctoral-level education, reinforcing the argument that the program addressed a systemic rather than an isolated concern. The preference for hybrid and part-time program delivery further reflected the realities of working professionals, emphasizing the need for flexibility in program design. This aligned with contemporary higher education models that prioritized accessibility and adaptability, particularly in professional disciplines.

The qualitative analysis revealed **four major interconnected themes**, synthesizing stakeholder perspectives on the current state of dental education and the need and feasibility of a PhD in Dental Education.

Theme 1: Transition Toward Competency-Based, Technology-Enhanced, and Research-Oriented Dental Education

The transition toward a competency-based, technology-enhanced, and research-oriented framework represented a critical and necessary evolution in Philippine dental education. Qualitative findings revealed a decisive shift away from traditional, teacher-centered instructional models toward dynamic, student-centered, and outcomes-driven pedagogical approaches. This modernization was deeply aligned with the policies of the Commission on Higher Education (CHED) and reflected broader global standards in health professions education. At its core, this paradigm shift mandated the holistic integration of critical thinking, professional ethics, effective communication, and advanced clinical competencies within the standard dental curriculum.

A major catalyst for this educational transformation had been the rapid integration of digital technologies. The adoption of advanced educational and clinical tools—such as simulation-based learning, CAD/CAM systems, virtual learning platforms, and artificial intelligence—has significantly accelerated curriculum modernization. This technological pivot gained particular momentum during and following the COVID-19 pandemic, permanently altering how clinical skills are taught and assessed. Concurrently, there was a pronounced structural pivot toward evidence-based practice, which imposed a growing expectation on both students and educators to move beyond rote clinical application and actively engage in scholarly research and knowledge generation.

However, despite these progressive advancements, the findings underscored that institutional implementation remained highly uneven. This inconsistency was primarily driven by significant disparities in financial resources, technological infrastructure, and, most crucially, faculty readiness. While current dental educators possessed exceptional clinical competence and practical experience, many lack formal, advanced training in modern higher-education pedagogy, curriculum design, and the seamless integration of educational technology. Ultimately, this theme reflected a higher education system in active transition—earnestly progressing toward modernization and global competitiveness, but fundamentally constrained by systemic gaps in targeted faculty development and resource allocation. These structural limitations highlighted a critical ceiling in current academic preparation, reinforcing the strategic necessity of a specialized doctoral program. By cultivating a new generation of teacher-scholars, such a program would directly address these gaps, equipping educators with the advanced pedagogical and research expertise required to fully realize and sustain this transition.

Theme 2: Persistent Competency Gaps in Research, Leadership, and Public Health

This theme highlighted a critical dichotomy within the Philippine dental education system: while existing programs effectively produce highly capable clinical practitioners, they leave graduates underequipped for broader professional responsibilities. Stakeholders reported profound deficiencies in foundational academic skills, with graduates exhibiting limited confidence in research design, data analysis, and the translation of scholarly findings into clinical practice—a concern validated by 83.0% of surveyed participants who stressed the urgent need to enhance research and innovation. Furthermore, noticeable inadequacies persisted in essential leadership competencies, communication, and interprofessional collaboration, which are increasingly vital for

modern, integrated academic roles. These academic and leadership shortfalls were compounded by underdeveloped public health competencies, specifically in community engagement and oral health program planning, which restrict the profession's capacity to engage meaningfully with broader societal needs and health policy development. Ultimately, these systemic gaps demonstrated that current undergraduate training is insufficient for the multifaceted demands of the field, reinforcing the strategic necessity of a specialized doctoral program designed to transform clinicians into rigorous researchers, well-rounded academic leaders, and active policy contributors.

Theme 3: Need for Curriculum Enhancement Toward Holistic, Future-Ready, and Globally Aligned Graduates

This theme highlighted a critical consensus among stakeholders: while the existing dental curriculum provides strong clinical preparation, it is no longer sufficient to address the complex, evolving demands of the modern dental profession. Participants emphasized an urgent need to transition from a strictly clinical focus toward a more holistic, interdisciplinary, and future-oriented educational framework. To remain relevant, the curriculum must expand to actively integrate research methodologies, digital literacy, leadership training, and meaningful community engagement. This shift requires introducing early clinical exposure and fostering interprofessional education, ensuring that dental students learn to collaborate effectively within broader healthcare teams rather than in isolated clinical silos. A significant concern raised by stakeholders was the persistent gap between traditional academic training and the realities of real-world practice. To bridge this divide, curriculum enhancements must incorporate modern advancements, particularly digital technologies and simulation-based learning, which are now essential for contemporary dental practice. By embedding these tools into the learning process, educational institutions can ensure that theory is seamlessly translated into advanced clinical application. Furthermore, the theme underscored the necessity of developing a strong professional identity among students. Stakeholders emphasized that educational programs must encourage graduates to look beyond merely fulfilling licensure requirements. Instead, the curriculum should instill a commitment to lifelong learning and continuous professional growth, empowering educators and practitioners to adapt to future innovations and evolving public health landscapes. Ultimately, this theme pointed out that piecemeal updates to the curriculum are inadequate. Comprehensive curriculum reform was required to produce graduates who are not only clinically competent but also highly adaptable, collaborative, and socially responsive. Aligning the curriculum with these holistic and global standards is a fundamental prerequisite for elevating Philippine dental education to international prominence and ensuring its graduates are fully equipped for the future of healthcare.

Theme 4: Feasibility and Strategic Value of a PhD in Dental Education

This theme framed the proposed doctoral program not merely as an academic option, but as a critical, system-level intervention necessary for the future of the dental profession in the Philippines. Stakeholders strongly expressed that the current absence of a vertically aligned doctoral pathway is a significant structural vulnerability. Without a specialized PhD in Dental Education, faculty members are often forced to pursue unrelated, generalized education degrees or seek advanced training abroad. This dynamic leads to the fragmentation of academic development, a misalignment of pedagogical training, and a potential "brain drain" or loss of specialized expertise within local institutions. The strategic value of the program lies in its ability to directly address the systemic gaps identified in earlier themes. Stakeholders viewed a specialized PhD as an essential incubator for developing high-level academic leaders. By systematically strengthening research capacity, the program will empower educators to drive evidence-based curriculum design, elevate institutional accreditation processes, and actively contribute to national oral health policies. While the strategic necessity was widely acknowledged, the feasibility of establishing the program is conditional upon overcoming several significant hurdles. Participants highlighted that successful implementation must directly confront a shortage of doctoral-qualified faculty capable of delivering the instruction, alongside persistent funding constraints and varying levels of institutional readiness across universities.

To overcome these capacity limitations, the findings advocated for highly strategic planning. Inter-university partnerships, international academic linkages, and the pooling of shared resources are identified as vital approaches to making the program viable. Furthermore, stakeholders emphasized that strong institutional

commitment must be paired with rigorous regulatory alignment involving the Commission on Higher Education (CHED), the Professional Regulation Commission (PRC), and the Philippine Qualifications Framework (PQF). Ultimately, this theme underscored that a PhD in Dental Education is more than a new degree offering; it is a profound system-level transformation. By successfully navigating the feasibility challenges through collaboration and alignment, the program promises to elevate Philippine dental education by producing multifaceted professionals who serve simultaneously as expert clinicians, rigorous researchers, visionary leaders, and active policy contributors.

Based on the empirical findings highlighting persistent gaps in research capacity, academic leadership, and public health engagement, the following curriculum framework for the Doctor of Philosophy (PhD) in Dental Education was developed. Strictly aligned with the Philippine Qualifications Framework (PQF) Level 8 and global accreditation standards, the coursework was strategically structured to address these deficiencies by transitioning clinically proficient practitioners into visionary teacher-scholars, rigorous researchers, and capable educational leaders.

Table 3. Proposed Curriculum for Doctor of Philosophy in Dental Education

Course Code	Course Title	Course Description
CORE: 6		
CODE 701	Advanced Theories in Health Professions Education	In-depth exploration of classical and contemporary theories underpinning health professions education, with emphasis on dental education contexts. Focuses on integrating theory into educational practice and research.
CODE 702	Advanced Research Methodology in Dental Sciences	Covers advanced qualitative, quantitative, and mixed-methods research designs specific to dental sciences, including data analysis tools and ethical considerations.
PROFESSIONAL COURSES: 21		
PRODE 703	Curriculum Leadership in Dental Education	Examines leadership roles in curriculum development, implementation, and evaluation within dental schools, highlighting evidence-based and culturally responsive approaches.
PRODE 704	Innovations in Dental Pedagogy	Focuses on innovative teaching strategies, simulation-based training, and competency-based dental education approaches for improved learning outcomes.
PRODE 705	Assessment & Accreditation in Dental Schools	Provides frameworks and tools for designing valid and reliable assessment systems and preparing for national and international accreditation.
PRODE 706	Educational Technology in Dentistry	Examines digital platforms, e-learning tools, and virtual simulation technologies to enhance dental education delivery.
PRODE 707	Ethical & Legal Issues in Dental Education	Examines the ethical principles, professional responsibilities, and legal frameworks governing dental education and practice. It explores issues such as academic integrity, research ethics, patient rights, institutional policies, accreditation standards, and regulatory compliance. Emphasis is placed on critical analysis and application of ethical decision-making models and legal guidelines to real-world scenarios in dental teaching, administration, and research.
PRODE 708	Policy and Governance in Dental Education	Explores policies, governance structures, and administrative frameworks affecting dental education in local and global contexts.

PRODE 709	Special Topics in Dental Education	Offers advanced study on emerging issues in dental education, allowing customization based on student research interests.
DISSERTATION: 12		
DIGSDE 710	Dissertation 1	This stage focuses on the development and writing of a doctoral dissertation proposal that introduces original knowledge, innovative practices, or significant contributions to the field of dental education. The process emphasizes scholarly rigor, relevance, and potential impact on both the academic community and society.
DIGSDE 711	Dissertation 2	This final stage involves the completion of the dissertation and the preparation of high-quality, publishable journal articles derived from the research findings. It ensures that doctoral candidates demonstrate the competence to conduct, present, and disseminate research that meets international academic standards.

DISCUSSION

The quantitative and qualitative findings of this study presented a comprehensive evaluation of the current state of dental education in the Philippines, illustrating a critical systemic transition. Historically, the evolution of local dental education had successfully prioritized and produced highly capable clinical practitioners equipped to address immediate patient care needs (Dalanon & Matsuka, 2019) [8]. However, modern dental education was shifting decisively toward a competency-based, student-centered, and technology-enhanced model. This paradigm shift required educators to possess competencies that extend far beyond clinical proficiency, encompassing advanced research design, educational governance, and curriculum innovation. As differentiated in global literature, while a Doctor of Dental Medicine (DMD) prepared individuals for clinical practice, a research-intensive academic doctorate is essential for cultivating scholars capable of generating original knowledge and leading institutional reform (Giddon & Lamster, 2022) [11]. The absence of a dedicated Doctor of Philosophy (PhD) in Dental Education in the Philippines represented a significant structural vulnerability that currently limits the profession's academic and policy-level advancement.

Survey results demonstrated robust stakeholder consensus on these deficiencies, with an overwhelming 86.2% of respondents emphasizing the urgent need to improve faculty qualifications and 83.0% prioritizing enhanced research and innovation. Qualitative themes corroborated these figures, revealing that while current undergraduate programs were clinically rigorous, they leave graduates underequipped for broader professional responsibilities, particularly in translating scholarly research into clinical application and public health advocacy. This disconnect highlighted a critical ceiling in current academic preparation. Furthermore, 76.6% of stakeholders highlighted the necessity of aligning local curricula with international standards. This aspiration mirrored evolutionary trajectories observed in advanced dental education systems worldwide, where mandatory postgraduate academic qualifications for higher education faculty have become the baseline for achieving global competitiveness (Gelbier, 2005 [12]; Cheng, Lo, & Chiang, 2025) [13].

Addressing these systemic deficiencies necessitated a transformative doctoral program that elevates dental educators into visionary scholar-leaders. The empirical data strongly reinforced this pivot. Regression analyses revealed that prior exposure to advanced dental education significantly predicts a stakeholder's interest in pursuing a doctoral degree ($p = 0.026$). This supported previous research indicating that sustained exposure to postgraduate education and research-intensive environments naturally enhances motivation and participation in advanced academic programs (Davis et al., 2016) [5]. Moreover, faculty members exhibited a significantly stronger endorsement for the program's primary establishment rationales compared to administrators and students ($p = 0.003$). This indicated a distinct, organic professional demand from current educators who recognize that pursuing generalized PhD in Education degrees—the current default—resulted in a misalignment between their academic training and the specialized pedagogical demands of modern dentistry.

To be effective, the proposed doctoral framework must also address the urgent need for a holistic, interdisciplinary curriculum. Qualitative feedback underscored that isolated clinical training is no longer sufficient; future-ready educators must integrate digital literacy, artificial intelligence diagnostics, and interprofessional healthcare collaboration into their teaching methodologies. Furthermore, addressing underdeveloped public health competencies is critical. A specialized PhD program will empower graduates to move beyond individual patient care to actively engage in community health planning, policy formulation, and the fulfillment of broader national health objectives.

Successfully operationalizing this initiative, however, required institutions to navigate significant structural and systemic barriers. Stakeholders explicitly identified a severe shortage of doctoral-qualified faculty capable of delivering doctoral-level instruction (70.2%) and persistent funding limitations (64.9%). Overcoming these hurdles required more than just high academic demand; it mandated strategic institutional capacity building, inter-university partnerships, and resource pooling. Additionally, to accommodate the realities of mid-career professionals, educational institutions must adopt flexible delivery models, a necessity reflected by the 68.1% of respondents who strongly favor hybrid or part-time program structures.

Ultimately, the strategic viability and long-term sustainability of this doctoral program depended heavily on rigorous regulatory alignment. To ensure the degree legitimately addressed local healthcare demands while elevating the Philippine dental education system to international prominence, the curriculum and its implementation strategy must be strictly integrated with the policies of the Commission on Higher Education (CHED) and the Professional Regulation Commission (PRC). Most critically, the program must demonstrate absolute structural compliance with the rigorous academic standards defined by the Philippine Qualifications Framework (PQF) Level 8 (Baltazar, 2023) [14], ensuring that the graduates are recognized both locally and globally as premier experts in dental education.

CONCLUSION

Based on the findings, the study draws the following conclusions:

1. There is a strong justification for the establishment of a PhD in Dental Education in the Philippines, given the identified gaps in the current educational system.
2. Despite advancements in competency-based education and technology integration, significant deficiencies remain in research capacity, academic leadership, faculty development, and public health engagement, limiting alignment with global standards and local oral health needs.
3. The findings highlight the need for a doctoral program that develops scholars, researchers, and academic leaders capable of advancing dental education and contributing to national development.
4. The Philippine dental education system is at a critical juncture, shaped by the demands of Universal Health Care, digital dentistry, and global integration, requiring leaders who can effectively bridge clinical practice, education, and public health.
5. A research-driven, policy-aligned, and institutionally supported PhD program is both necessary and feasible, with strong potential to transform dental education by improving its quality, relevance, and responsiveness in the coming decade.

RECOMMENDATIONS

Based on the findings of the study, the following recommendations are proposed:

1. Higher Education Institutions (HEIs) should develop a research-driven and competency-based PhD curriculum in Dental Education, integrating advanced research training, digital dentistry, educational technology, leadership, and public health to prepare future-ready academic leaders.
2. HEIs are encouraged to strengthen institutional capacity and faculty development through mentorship programs, research infrastructure enhancement, and international collaborations to ensure quality doctoral education and global alignment.

3. Flexible and accessible program delivery models (e.g., hybrid, modular, or blended learning) should be implemented to accommodate working professionals, supported by strong mentoring and continuous program evaluation systems.
4. Policy makers and professional organizations, including CHED, PRC, and the Philippine Dental Association, should ensure policy alignment, accreditation standards, and financial support mechanisms, including scholarships and partnerships, to promote sustainability and nationwide access to the program.
5. Future researchers should conduct ongoing evaluation and impact studies on doctoral education in dental fields, focusing on faculty development, research productivity, educational outcomes, and contributions to national oral health and policy development.

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