

**PRESIDENTIAL ADDRESS:
OUR “OPPORTUNITIES”**

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Good Morning. What a great week! I am pleased to welcome you to the 22nd Annual Meeting of the Council of Academic Programs in Communication Sciences and Disorders. If you think about it, everyone in this room controls the destiny of the discipline of Communication Sciences and Disorders and of the two professions: audiology and speech-language pathology. You control what services will be provided and how they will be provided. You control the quality of life for individuals with communication disorders from womb to tomb, and from many different cultures here in the United States and from all over the world. You control communication, or what keeps people human, at least for the first half of this century. What an awesome responsibility! Thank you for the honor and privilege of serving this past year as the President of the leaders of academic and clinical programs for the professions.

This morning, I want to acknowledge a number of guests and very important people. Secondly, I want to provide a preliminary update on our activities during the past year. The Spring Status Report, which provides more detailed information, should be waiting for you when you return from this meeting. And finally, I would like to share with you some of my thoughts about the excitement of change and our future.

Introductions and Acknowledgments

Our attendance this year is 340 leaders in academe which is a new record. To the “old-timers” whom I refuse to define either by chronological age or short term memory skills; that is, to those who have previously been involved with the Council and have participated in our meetings, I thank each of you for

your continued support. A special welcome to our clinic directors; the value of this meeting depends on your willingness to seek out and share your concerns, successes, and problems with other chairs/heads and clinic directors. Another gradually increasing group attending this year are faculty who are not chairs or clinic directors. We welcome you and hope you will participate fully in our conference.

One of the observations which I have heard over the past few years is that this organization is changing. Assuming that most program chairs/heads are also program representatives, I quickly grabbed our *1996 Directory* to verify the differences over the past five years. I checked the number of programs with different representatives in 1996 and 2001. About 64%, or a little under two-thirds, of the program representatives were different which leaves approximately 36% of the program representatives who have remained department chairs/heads for the past five years. This year we continued the practice of identifying first-time attendees with a blue dot on their name tag. I extend a special welcome to our newcomers, over 100 so far. I hope you will discover that the major benefit of our conference is the spirit of sharing and cooperation among the participants. Finally, some may question the value of the amount of non-scheduled time, the time which is purposefully not scheduled so that you will have the opportunity to seek and share your thinking on those common problems we all have but are not discussed in our formal program. The question is, "Can we afford it?" I would respond, "Can we afford not to have it?" Most would agree that solutions to many of our most important problems as administrators occur during that time.

For this organization to be effective means that many individuals must donate their time and thinking to the Council's activities. I would like to recognize some of those individuals now. Will you please stand as I call your name? First, I want to personally thank and congratulate the Program Committee. This year's conference presented some "unique challenges." We had to change the city and

find a hotel less than six months before the meeting. Special thanks to Jane Lieberman, Chair; the Assistant Chair, Jim Mahshie; Clinic Director Representatives Vicki McCready and Susan Bartlett; and national office staff, Mary Ambroe and Frances Laven for their flexibility in planning an exciting meeting during this unusual year. Our high attendance reflects your success. You have proven how to change what Jane called “a major problem” into an opportunity. Also, I want to thank each of our speakers, discussion group facilitators, and recorders for this year’s meeting. All of these individuals will be introduced as they appear on the program and we thank them for sharing their talents with us.

Every successful organization must have a special group of individuals who go above and beyond. They are the elected and appointed leaders who give more. Your Executive Board this year is primarily responsible for our achievements as an organization. We have been very fortunate this year to have the following individuals in those roles: The Past president is Elaine McNiece; the President-elect is Mick Hanley; Rick Talbott is the Secretary; and Mick McNeil is Treasurer. The Vice President for Communications is Trish Hargrove; you have already met the Vice President for Professional Development, Jane Lieberman; John Saxman is Vice President for Standards and Credentials; and Kim Oller is the Vice President for Research and Academic Development. Also, I want to acknowledge the commitment and assistance of Mary Ambroe and Frances Laven of Executive Administrative Services. Let me add my personal thanks to all board members for the sometimes confusing (I’m still trying to learn the alphabet!) and often boring duty of putting up with me this past year.

Other committee and working group chairs include: Barbara Shadden, Archives; Maurice Mendel, Webmaster and photographer; Rosalind Scudder, Honors and Awards Committee; Roy Shinn, Committee for the Study of Demographics; Bob Turner, Working Group on Projected Personnel Needs; Brooke Hallowell, Chair of the Joint Committee on Academic Assessment. Rick

Talbott will Chair the Ad Hoc Joint Committee on Doctoral Education and you are aware that the Vice Presidents chair their respective committees. You'll be hearing more from all of these individuals at the Business Meeting on Friday.

Please allow me to introduce to you our former presidents who are in attendance today. I would like to ask them to stand and remain standing until all have been acknowledged. They are John Bernthal (1985-86); Nick Bankson (1986-87); Fred Minifie (1988-89); Nancy Creaghead (1993-94); John Ferraro (1994-95); Barbara Shadden (1995-96); Maurice Mendel (1996-97); Rosalind Scudder (1997-98); and Elaine McNiece (1999-2000). My friends, these individuals are responsible for the growth, development, and strength of this organization and I invite you to join me in thanking them for their leadership.

We are pleased to welcome the following individuals from other professional organizations. Would you please stand as I call your name: NSSHLA Representative Rachel Parlier is a student at Marquette University. Welcome Rachel, you represent what we are about! Attendees representing ASHA's Executive Board and ASHA Boards and Committees related to higher education, many of whom are double dippers because they are our own member program representatives are: ASHA President-elect, Nancy Creaghead; Cheryl Scott, Vice President for Academic Affairs; Alex Johnson, Vice President for Professional Practices in Speech-Language Pathology; Julie Masterson, Vice President for Research and Technology; Glenda Oschner, Vice President for Quality of Service in Speech-Language Pathology; Lynn Goldberg, Vice President for Administration; Gip Seaver, Chair of the Council on Academic Accreditation; Sue Hale, Chair of the Council for Clinical Certification; Mike Chial, Chair of the Academic Affairs Board, and Jean Blosser, Chair of Special Interest Division 10. ASHA National Office personnel include Deborah Busacco, Director of Academic Affairs; Sharon Moss, Director, Research Resources and Advocacy; Kathleen Whitmire, Director of School Services; Vic Gladstone, Associate Director of Audiology; James Potter, Director of Governmental Relations and

Public Policy; Tess Kirsch, Accreditation Program Manager; and Janet Brown, Associate Director of Healthcare Services; and a special welcome to the Director of the American Speech and Hearing Foundation, Nancy Minghetti. I am especially pleased to welcome the ASHA President, John Bernthal. John will address the Council at our business meeting on Friday morning. I want to welcome the President of the National Association of Pre-Professional Programs, Karen Johnson. Also, you should be aware that David Fabry, President of the American Academy of Audiology, asked me to express his regrets that he is unable to attend our meeting. Finally, I would like to introduce to you, Ms LaShundra Collins, an undergraduate student at Hampton University. Mentored by Polly Murphy and Nan Ratner, LaShundra received the Ronald McNair Outstanding Scholar Award, and a part of that award allows her to select a professional meeting to attend. We are glad she selected our meeting.

A very special welcome to each of our sponsors. We thank you for your participation and for your support for this meeting. I want to encourage each of you to take a few minutes and visit with our sponsors.

Update of Council Activities

A part of the previous presidential addresses have included a brief analysis of the “State of the Council.” While I can’t match the record of brevity established by my predecessor (McNiece, 2000), I think it is important to briefly mention a few highlights of the Council’s activities this year.

Council Operations. The implementation of the new Articles of Incorporation and Bylaws has progressed very smoothly this year. Still untested at this time is whether the resolutions process which is needed for the formal adoption of Council policies will meet our needs. I am proud of how quickly and efficiently our Board members adapted to their different roles in the new organizational structure.

Council Survey. You have it, and I doubt that anyone will leave here without understanding the urgency of returning the Survey this year. The information we seek is important, especially this year. If we're going to be successful in making our case for additional funding for training grants and other types of financial support, we simply can no longer afford to rely on anecdotal data to document our shortages.

Related Organizations. In the past, the Council has been proactive in seeking positive working relationships with all related organizations especially with ASHA. This year the Board has sought to expand these activities. As you know, representatives from the Executive Boards of ASHA and the Council meet each year to review the goals of our respective organizations and to discuss current topics of mutual concern. In our meeting with the ASHA Executive Board members this year, we agreed to form two joint committees, one in academic assessment and one in doctoral education. Naturally, the primary focus of attention is on the shortages in the professorate and cooperative efforts have already been planned by the two organizations. I believe that we are approaching a new level of cooperation with ASHA. Our meeting focused on the development of solutions to problems. I would be remiss if I didn't acknowledge Debbie Busacco, for her leadership role in seeking ways to improve the communication between ASHA and the Council.

We have also held meetings with the Coordinators of ASHA Special Interest Division 10, the National Association of Professional Programs, and we have a meeting scheduled next month with Executive Board members of the American Academy of Audiology. Some may contend that we can meet our goals more effectively and efficiently if we just do it ourselves. I believe that we maximize our limited resources when we join with other professional organizations in mutually beneficial endeavors. That is, we increase our ability to solve our problems through the development of these critical partnerships.

Educational Testing Service (ETS). Last year you passed a resolution that we ask the Clinical Certification Board to join with us and renew our efforts to obtain additional data about student performance on the PRAXIS Examination (NESPA). ASHA staff members, Vic Gladstone, Debbie Busacco, and Sharon Goldsmith, have held several meetings with ETS to convince them that we need that information. This has been a major concern for the Council for a number of years. In response to the resolution passed at last year's meeting, I wrote to ETS informing them of our support for ASHA's request. Recently, Debbie Busacco informed me that beginning in Fall 2002, ETS has agreed to provide us with diagnostic test information about our students' performances on the exam. Please join me in thanking Sharon for her early efforts, and Vic and Debbie for the follow-through.

State of the Council. While the specifics will be covered in the reports at the corporate business meeting, I want to assure you that the State of the Council is stronger than ever. Volunteer leadership has been very effective. For example, the members of the Executive Board have taken time each meeting to look at leadership issues, thinking beyond the current year into the future to identify not only where *are* we going but where we *should be* going. These have resulted in some very preliminary discussions about our limited international involvement which might provide the basis for future directions in that area. I strongly support these efforts to become more international, in scope and activities. We are discussing the development of new directions in advocacy and you'll hear more about that at the business meeting. From the Communications Committee, there are preliminary discussions about establishing an On-line Journal of Scholarship and Research in Teaching in Communication Sciences and Disorders. Additionally, we are expanding our efforts to develop strong relationships with other professional organizations with

mutual interests which impact on our goals. Those relationships have already resulted in joint initiatives and more cooperation will be needed as we seek solutions to our current problems. Also, I believe that most would agree that the transition from an organization of department chairs to an organization of departmental leadership which includes both chairs and clinic directors has benefited higher education in our discipline. And as you will soon discover, integration of academic education, as primarily delivered in the classroom and research laboratories, and clinical education which is primarily delivered in various clinical sites, is a natural consequence of the new standards for the certificates of clinical competence.

Finally, I am pleased to report to you that while we are not flush, we are relatively secure financially. That is, we currently have the resources needed to complete our mission and no dues increases are anticipated at this time.

Future Opportunities

I'd like to conclude my remarks with my list of "Future Opportunities," that is, specific areas that require immediate and special attention from the Council. Some of you may wish to identify these as "Threats or Challenges," but you are probably wrong. Each of you may have a different list and you are probably right.

- 1.) Highest on my list is the *shortage in the professorate*. We've been warned about these in the past from individuals like Creaghead (1994), Hochberg (1966), Mills (1996), Smit (1996) and Minifie (1997). I want you to understand that now the situation is critical. Everyone in this room is or will be impacted by the shortages which threaten the very survival of the discipline and of the professions. Since this is a complex problem, we will need a major cooperative effort among the Council of Academic Programs, the American Speech-Language-Hearing Association, the American Academy of Audiology, and the National Association of Pre-

Professional Programs. I believe we need a National Conference focused only on Doctoral Education, similar to the early Highland Park Conference (1963) and the St. Paul Conference (1983) with maximum participation from all groups. We have studied and lamented about this problem for too long. We need the national conference as soon as possible. After we validate the extent of the problem, we will need to seek major increases in funding from the federal funding agencies, the National Institutes of Health and the Office of Education, and especially the Congress of the United States. We cannot wait any longer. As an aside, I've been impressed with some initial attempts to solve the problem from individual programs. For example, the faculty at Florida State University are seriously considering developing and promoting a BA to PhD program for their brightest undergraduate students. Their program does not include meeting the requirements for the CCCs. It just may be that we will have to modify our thinking. Reflect for a minute—Do we really need the CCCs to teach about the disorders? Incidentally, that is not a CAA standard or requirement. Also, I believe that we must develop information which can be used by all programs, especially the smaller programs, which will educate our administrators about what you will need to be successful in both recruitment and retention. While recruitment may initially appear to present us with the greater problems, I believe that retention will become a more serious threat to our discipline and our professions. To be a successful “retainer,” when there is a major shortage will require an examination of faculty expectations and workloads, especially in the smaller programs. For the Council, we should be able to resolve these concerns before they become major problems.

- 2.) To my colleagues in Audiology; at the present time, we are still devoting considerable effort to the issue of the degree designator and the identification of curriculum. While those are worthwhile issues, we need to move on to the more critical threats to your profession. Given that

currently the primary source of doctoral students is the Master's degree, we have effectively closed the pipeline of potential PhD students by implementing the AuD. Where will we get the new faculty in clinical Audiology, and I am not referring to supervisors, but to professors who can meet the University's requirements for promotion and tenure? Believe me, we have not seen the end of increased efforts by policy makers and legislators to raise the tenure requirement bars even further than they have already been raised. Some of you will recognize this "Challenge" from President McNiece's (2000) comments last year. Like the shortages, this problem simply will not go away. In fact, it hasn't even started yet! For the record, please note that I did not say that we shouldn't have gone to the entry-level doctorate in audiology.

To me, the greatest "threat" to the profession of Audiology, which must be immediately addressed by all professional and scientific audiology organizations, is the development of an audiology aide or assistant's program by another profession. We cannot let our emotional reaction to the concept of "Assistants" prevent us from responding directly to this attack on our autonomy. I contend that history has shown us that the organization that writes the standards for practice for any level of service delivery for a profession controls or eventually will control that profession. I view this as a major threat and call upon ASHA, AAA, the Council, and every related audiology organization to respond quickly and decisively. If Audiology Assistants can practice under medical supervision with an "Official Audiology Assistant Certificate," will there really be a need for audiologists? I'm not ready to give up that fight.

- 3) The new standards for the CCCs in both speech-language pathology and in audiology provide us with a way to develop innovative educational programs which allow us to highlight our own strengths. I predict that there will be a cry in the very near future, which will precede the

implementation date for both sets of standards, for more specificity both at the implementation level, (e.g., at the Council for Clinical Certification level) because it will reduce their problems in interpretation, and at the program level, as it is much easier to function when you can tell the Dean that we don't meet the criteria because we need 50 clock hours in three different sites, or we need a minimum of X-number of faculty members. I plead with you to strongly inhibit that urge. We have the opportunity to do some truly creative academic and clinical educational programming. Let's see what we can do with it. Not all programs need to graduate speech-language pathologists or audiologists who are carbon copies of other programs.

Time does not allow me to raise the issue of our critical need to develop benchmarks for doctoral education programs; by our silence we are approving the *US News and World Report's* ranking. Are you really happy about it? Can't we do a better job? And finally, as the two professions develop different standards for entry into the professions, which very appropriately meet their individual needs but become progressively more exclusive, there is one group whose needs are not being met. I am referring to the lack of recognition for a solution to the problem of the education of those who provide aural (re)habilitation. Obviously, this "opportunity" will increase as the number of cochlear implants increases nationally. Leadership is needed here in both professions and ignoring the problem does not enhance our ability to resolve the major issues which should be addressed if we truly believe that it is our ethical responsibility to hold paramount the interests of those we serve.

In conclusion, let me remind you again that it is those who sit in this room and participate in this conference that control the destiny of the discipline and the professions and more important, the quality of life for individuals with communication disorders. What an awesome responsibility! Thank you!

(Dr. Carney presented the Singular Thomson Learning Scholarship for Technology Innovation following his Presidential Address. The text of that presentation can be found in the Honors and Awards Section of these *Proceedings*.)

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