On Accreditation

By Gerald T. Church



The next several articles in the ACAE Corner will be from program directors and faculty who have participated in the ACAE process. The topics will concern educational issues pertaining to accreditation, audiology, and higher education. ACAE is pleased to highlight these articles and would like to have your feedback and thoughts. Thank you very much.

— Doris Gordon, Executive Director, ACAE

he initial reaction of most faculty members when preparing for an accreditation site visit is one of dread. It represents a great deal of effort and, unfortunately, is not high on anyone's list of things they want to do. Upon reflection, however, this viewpoint is mistaken. The accreditation process allows a program to benchmark itself against professional expectations and other academic programs. Believe it or not, this process may be very rewarding. Accreditation can identify a program's strengths and set a standard for other programs to follow (a heady experience). Conversely, it can identify weaknesses that can then be addressed and the overall program improved. Accreditation forces reflection that confirms what was probably known all along but conveniently ignored. It sometimes takes an outside force to move deeply entrenched routines. The problems can no longer be thought about at a theoretical level (something academics love to do) and must be fixed. Eventually, program improvement occurs, which is also very rewarding.

Accreditation may also be used as bone fide leverage by a program with the university administration. The accreditation process highlights needs the program may have in terms of faculty, staff, and equipment, which impacts the program's ability to achieve required standards. These concerns may be conveniently ignored by a university administration, especially in times of economic duress and uncertainty. However, because accreditation is important in terms of university prestige and student recruitment, university administrations take accreditation reports seriously. The above highlights the advantages of accreditation for the program and the university. What are the advantages of accreditation for the profession?

I find it interesting that one of the major driving forces underlying the AuD degree movement was the drift that occurred between academic programs and the personnel needs of the profession. There was a general feeling that MA-level clinicians were ill prepared to meet the clinical practice needs of the profession. Clinical skills were initially taught and refined after graduation. Employers were teaching graduates clinical skills that should have occurred in the graduate program. There was a perceived

disconnect between the clinicians providing audiological services and the professors teaching in the MA-level programs.

The switch from the MA to a doctoral entry-level degree does not necessarily solve this problem. The accreditation process is critical in preventing this drift or disconnect between educational and professional concerns. Accreditation standards should be rigorous and developed by both academics and clinicians. Input is needed from both sides to properly prepare tomorrow's audiology professionals. The accreditation process allows the profession to examine and interact with the academic programs, which is of benefit to both and will have a significant impact on the future of the profession. This was, in fact, the reason that leading audiologists, sanctioned by the American Academy of Audiology, developed an independent accrediting agency.

Unfortunately, program accreditation is not a solution to all of the problems facing the education of audiologists. But accreditation can be instrumental in bringing about change. For example, a current problem often expressed is that there are too many doctoral programs in audiology. Rigorous accreditation will ensure that the profession will endorse only the strong programs that adhere to contemporary standards. However, this drive to quality is problematical in the current situation where audiology has two accreditation organizations. It is common sense that weak programs will choose the agency with the weaker standards and vice versa. We cannot expect the accreditation process to reduce the number of academic programs to a more reasonable number (whatever that is) unless we consistently demand the highest level of accreditation.

It is ironic that the profession has two accreditation agencies. Audiology is a relatively small profession, but the current situation reflects a problem the profession has always faced. Audiology is like the middle-aged adult still living at home with his or her parents. There may be lots of valid reasons why this situation exists. Nonetheless, can the profession be considered autonomous and independent if still living at home with the folks? Audiologists must control their own destiny through accreditation, of, by, and for audiologists.

The profession has successfully transitioned from an MA to a doctoral entry-level degree. The profession has "talked the talk." It is now time to prove that the AuD degree is truly a doctoral-level degree. A way to do this is to have an accreditation system and standards that reflect doctoral rather than modified MA-level standards

and that represent the highest level of scientific knowledge and professional practice.

But what is an individual audiologist to do to help remedy the current situation we find ourselves in? First, let us all affirm the importance of audiology education in transforming our profession to achieve what we envisioned in the AuD. Then determine for yourself which accreditation agency has the strongest standards. Which standards better represent the profession? Second, contact the accreditation agencies and tell them which standards should be strengthened, replaced, or dropped. Finally, only hire graduates from programs accredited with the standards you agree with. The profession has transitioned itself from an MA to an AuD entry-level degree. But the process is not over. We must continue our quest for professional excellence.

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