



CASLPA Position Paper on
the Professional Doctorate
Degree in Audiology

A position paper represents the direction CASLPA has taken on a particular topic or provides guidelines for particular areas of practice. These positions are time-bound, representing the thinking at a particular point in time.

Position

The Canadian Association of Speech-Language Pathologists and Audiologists (CASLPA) supports the concept of the professional doctoral degree in audiology (AuD) in Canada for future professionals and commits to further investigation of this issue.

Rationale

A survey of Canadian audiologists regarding the subject of the AuD was conducted by CASLPA in conjunction with the development of the 2004 position paper. A similar survey was repeated in 2006 as recommended in the original position paper. The 2006 survey was completed by 397 audiologists (response rate of 29.6%) while the 2003 survey received a comparable number of responses with 435 audiologists participating. Demographic information was similar for both surveys.

The table below presents the results in percentages from both the 2003 and 2006 surveys on key questions targeting “*best option for entry level into the profession of audiology*”.

	2003	2006	Difference +/-
Support implementing the AuD as entry level	37.2 %	51.5 %	+ 14.3 %
Support improving current Masters programs	48.6 %	40.3 %	- 8.3 %
Support keeping current Masters programs as they are	14.2 %	7.7 %	- 6.5 %
Respondents currently pursuing an AuD (at the time of the survey)	4.9 %	15.2 %	+ 10.3 %

The 2006 survey results indicate that 51.5% of respondents support implementing an AuD as the entry level to the profession in Canada (allowing current Master’s degree holders to continue to practice without obtaining an AuD). This represents an increase of 14.3% since 2003. The option of improving current programs (but keeping the Master’s degree as the entry to practice) has decreased in support since 2003 to 40.3% as well as maintaining the Master’s programs in their current form (7.7%).

Results indicate that 34.5% of respondents believe the current Master's degree programs provide graduates with adequate preparation to enter the profession. However, 41.1% feel that current programs only *somewhat* prepare students. Similar results were found in 2003.

Of the 20.6% who feel that the current programs *do not* provide adequate preparation, 35.8% think an increase in clinical practicum would be an appropriate solution while 23.7% recommend extending the current programs.

When asked if current Canadian audiology programs should offer the AuD *instead* of the Master's level program, 47.3% responded "yes" and 51.9% responded "no". A similar split was found when survey participants were asked if Canadian audiology programs should offer the AuD *in addition* to the already existing Master's level program (51.5% responded "yes" and 46.7% responded "no"). Interestingly, while 36.6% do not think implementing the AuD as the entry level to practice will have much effect on the number of applications to audiology programs, 41.2% believe this would result in a decrease and 21.7% believe this would result in an increase in the number of applications.

The motivation to pursue an AuD was quite varied, with the highest ranked reason (27.6%) being "the opportunity to formally upgrade knowledge and skills" followed by "better preparation for the job" at 12.7%. Of the respondents holding an AuD, the majority indicated that the AuD did not increase their salary (71.4%). In fact, the majority of all respondents indicated that they do not believe holding an AuD would increase their income (61.8%). This belief has slightly increased since the 2003 survey (59.7%). Half of respondents (49.6%) indicated that if the AuD became the entry-to-practice, they would consider distance learning to pursue the AuD to enhance their education. Financial constraints were reported by 58.1% of respondents as a reason for not seeking an AuD at this time.

Recommendations

Recommendation 1

The profession of audiology should be acknowledged as the leader in assessing changes in its entry-to-practice credentials. This process, however, should involve broad consultation, impact analysis, and strong collaboration with stakeholders such as the Canadian Council of University Programs in Communication Sciences and Disorders (CCUP-CSD) and the Council of Accreditation of Canadian University Programs in Audiology and Speech-Language Pathology (CACUP-ASLP).

Recommendation 2

Increase communication and collaboration among the professional associations, provincial/territorial regulatory bodies representing audiologists and the existing university training programs to support student preparation for practice. The universities should continue to revise their audiology curriculum to ensure that the content is consistent with the recent review of the foundational knowledge, skills and practice

competencies that CASLPA considers to be essential for audiologists. The universities should work together with audiologists in the profession to expand practicum opportunities for students in order to tightly link clinic-based to classroom-based education which would then be evaluated against clearly stated learning objectives. The universities, audiologists and other stakeholders should work together to define an educational model for the AuD and the type of professional that it would train.

Recommendation 3

Enhance dissemination of information to Canadian audiologists and audiology students on advanced educational choices such as the academic doctorate degree (PhD) and the professional doctorate degree (AuD). Audiologists require such information in order to be aware of the options that would best meet their needs, the needs of the profession and the needs of individual students. Universities must attract more audiologists to take academic doctorates to produce an adequate supply of researchers and academic educators. Such information dissemination can be accomplished through publications, educational sessions at conferences as well as internet websites.

Recommendation 4

Enhance dissemination of information to Canadian audiologists and audiology students regarding the implications that entry level to practice in Canada will have on the mutual recognition agreement (MRA) between CASLPA and the American Speech-Language and Hearing Association (ASHA). Almost two-thirds of the current survey respondents (61%) felt this MRA is important to them therefore prior to this position paper being reviewed again in two years, audiologists should be well informed of its impact.

Background

Canadian audiologists have experienced significant expansion in their scope of practice over the past few decades. This expansion has partially been a consequence of the evolution of technology in diagnostic tools, rehabilitative instruments and intervention strategies. These advancements provide audiologists better tools to deliver comprehensive services to clients but also require that audiologists have an ever-increasing knowledge and experience base. There are also increased responsibilities resulting from the expanded role of audiology in areas such as newborn hearing screening, selection and prescription of hearing aids and cochlear implants. With advanced diagnostic capabilities, audiologists are becoming even more involved in the delivery of service to special populations including individuals with auditory processing disorders, auditory dys-synchrony, vestibular disorders, tinnitus and hyperacusis. The results of such developments have led to greater autonomy in the profession of audiology as well as increased requirements for further specialized knowledge.

In October 2004, federal, provincial and territorial Ministers of Health approved a new process to manage proposals to change entry-to-practice credentials for medical and health professions. A new process was necessary as Deputy Ministers of Health had concerns that previous changes to entry-to-practice credentials had proceeded without a full appreciation of the potential impact on the supply of various medical and health

professionals. As well, they realized that medical and health professions are evolving in response to changes and advancements in the delivery of health care which may result in revisions to their entry-to-practice requirements. Any professions wanting to change their entry-to-practice credentials will have to follow this new process. At the present time, the minimum entry level of education to practice audiology in Canada is a Master's degree in audiology (or equivalent).

Some provinces/territories have developed statements on the use of the title doctor (Dr.) for those audiologists who have earned a doctoral degree. For example, two provincial associations, Alberta and Ontario, have position statements on the use of the title Doctor as it relates to audiologists. The Alberta College of Speech Language Pathologists and Audiologists (ACSLPA) reviews applications to use the title 'doctor' on an individual basis. They have criteria and a process for both the academic (e.g. PhD) and professional (e.g. AuD) doctoral degrees.

In Ontario, members of the College of Audiologists and Speech-Language Pathologists of Ontario (CASLPO) may refer to their formal training or degrees, e.g. AuD, PhD, or other doctorates, on business cards and reports in the course of providing health care. However, they are precluded from calling themselves "Dr. Smith", when they are providing health care regardless of their qualifications. Members may consult the appropriate regulatory body or provincial/territorial association for further information.

To supplement the CASLPA position paper review, all five audiology programs in Canada participated in an informal university survey conducted by telephone and e-mail in 2006. The survey included questions regarding:

- the university programs' perceptions of entry level qualifications for the profession of audiology in Canada
- the need for an AuD program in Canada
- whether or not Canadian audiology programs were exploring the possibility of developing an AuD program
- whether or not such programs were being planned in the near future

With regard to the question on best option for entry level to the profession of audiology, four of the five programs indicated that the master's degree was adequate however all four agreed that there was a need to improve current programs. One university stated that the AuD should become the necessary training for entry to practice. Another program felt that there was a need for a clinical doctorate which would be taken in addition to the master's degree.

Two of the five programs felt that there was value in considering the AuD due to the need to improve current training programs in Canada and because of the changes in entry to practice in the United States. Two of the five programs indicated that they were exploring the implementation of an AuD program within the next five years. Both of these programs indicated that they planned on retaining their master's program while offering

the clinical doctorate to their master's students. A third university program also stated it will explore the need for a clinical doctoral program.

All university programs were unanimous in stating that if the AuD became the entry level to practice audiology in Canada, all current master's degree clinicians should be entitled to continue to practice without having to complete the AuD. Some felt, however, that these clinicians should pursue continuing education courses (e.g. internet courses).

Regarding the development of future educational programs, Canadian universities suggested a coordinated approach to address the educational needs of future audiologists by applying similar standards for all programs across the country. The Council of Accreditation of Canadian University Programs in Audiology and Speech-Language Pathology (CACUP-ASLP) should be involved if standards are developed for new clinical doctorate programs. Collaboration with the Canadian Council of University Programs in Communication Sciences and Disorders (CCUP-CSD) would also be beneficial.

In summary, while the results of the current survey indicate that there is a trend toward revising current training programs, there is no consensus regarding the model(s) that should be adopted. It is clear from the survey and discussions with professionals in the field that decisions regarding future programs should include input from current professionals, professional associations, university training programs, regulatory bodies and other identified stakeholders. The current survey indicates an increase in support for the AuD as entry level to the profession of audiology as long as existing professionals maintain their right to practice with the master's degree.

The committee responsible for the development of this position paper recommends that the position be reviewed in two years.

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