

# TRENDS

Association of  
Schools of  
Allied Health  
Professions

## HIGHLIGHTS

OCTOBER 2007

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VANGUARD OF  
ALLIED HEALTH EDUCATION

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## CONNECTING TO THE WORKFORCE SYSTEM

During the past several months, Association staff have been trying to forge ties with the U.S. Department of Labor, an agency with extensive involvement in shaping the nation's workforce. This initiative entails two different lines of action.

The first involves a focus on the reauthorization of the *Workforce Investment Act*. An effort is being made to include language that would authorize the creation of pilot and demonstration projects aimed at four-year allied health academic institutions. Thus far, the Department has been successful in working with the community college sector to address workforce needs. The time now seems ripe for such attention to include training and education at baccalaureate and higher levels.

Apart from proposed legislation, a mechanism already exists through the Department's Employment and Training Administration (ETA), which includes a funding stream for such purposes. Currently, the annual formula funding level is \$3.4 billion and at least 40% is used for job training purposes. States keep 15% of all formula funding and they have broad discretion in how the money will be spent. Oversight is provided by State Workforce Investment Boards (SWIB). In each state, Board Members of the SWIBs are appointed by the governor.

The remaining 85% of funds go to the more than 600 local Workforce Investment Boards (WIB) across the nation. Both the SWIBs and the WIBs are required to have a majority of Board Members from the business community. WIB members are appointed by local elected officials, with criteria established by the governor.

A key aim for deans and directors at ASAHP member institutions is to make connections with these local workforce boards. A step in that direction was taken during the Association's recent Annual Conference in San Diego. Presentations by **John Colbert** of ASAHP's lobbying firm and **Lawrence Fitch**, President and CEO of the San Diego Workforce Partnership, Inc., were aimed at showing how such connections can be made effectively. A parallel effort is underway among Department of Labor staff. ASAHP will provide a map that shows where member institutions are located. Department staff then will prepare a map that shows contiguity between these institutions, the WIBs, and other funded projects. Another possible outcome is that ASAHP members might be appointed to WIBs. A presence at that level would make it possible for policymakers to be apprised of allied health workforce problems that need to be addressed.

## PRESIDENTS'S MESSAGE

By Linda C. Hatzenbuehler, ASAHP President



Despite my 20-year membership in ASAHP, I have kept a rather low profile, and many of you either don't know me, don't know anything about me, or both! Well, folks, for better or worse, I'm your new President! I thought it would be a good idea for me to devote my first column in *Trends* to helping you get acquainted with me. I grew up in Cleveland, Ohio (Eastside! Go Tribe!). After graduating from John Carroll University, I went to graduate school in clinical psychology at Kent State University. While there, I met my husband, Chip. We were married four months after the Kent State tragedy, when four students were shot (May 4, 1970). Yes, I was there and watched the National Guard try to disperse the crowd on the quad before they moved them with bayonets over the hill where the students died. It is an indelible mark on my memory.

My husband was a KSU American History major, who completed his Ph.D. in 1972 and got a job at Idaho State University. By then, I had completed my MA in Psychology and all of my course work toward my Ph.D., so I trailed him to ISU, in Pocatello, Idaho. Pocatello is located in Southeast Idaho (spud country!), approximately 175 miles due north of Salt Lake City. While finishing my degree at Kent long distance, I worked as a psychologist for the local state service agencies. In 1976, a last-minute faculty resignation in the Psychology Department led to my getting an offer as a full-time lecturer. I was given the opportunity to apply for the permanent position contingent upon my completing my dissertation. It was a powerful carrot, and I managed to defend my dissertation in August, 1977. While the department accepted my application for the permanent position, they offered it to someone else! Fortunately, he turned it down, and I got the job!

In 1983, out of the clear blue, the then Dean of Arts and Sciences asked me to become his Associate Dean. I was already tenured in the Department of Psychology by then. We had two little kids and could use a few extra bucks, so I decided to accept the offer. I wasn't exactly sure what an Associate Dean did, but what did I have to lose? After three years as Associate Dean, my plans to return back to the Psychology Department were interrupted by a personal visit from the new President that had come to campus. His board was pressuring him to increase the number of women in executive positions; a failed search had left the Dean position open in the College of Health-Related Professions; and I was a psychologist with three years of administrative experience under my belt. His offering the position made perfect sense. Why I accepted his offer is the curiosity! My third child was two years old at the time. I guess I'm always up for a challenge, hence, my acceptance of the nomination for the presidency of ASAHP.

In addition to my work as dean, I continue to practice my profession. I am a forensic psychologist and provide psychological evaluations for local and federal courts. I also serve on several state and national committees advocating for improved services to persons and families affected by mental illness. So that's my story. I've been an allied health dean, and an ASAHP member, since 1986. I've stayed at ISU for all of these years in the interest of my family and because Idaho is a beautiful place to live. As President, you can expect a task-oriented administration. I try to leave organizations better than I found them, and I seek a work product at the end of my efforts. I like to make data-driven decisions. You will be a primary source of data during my administration. The collective wisdom of our members will drive the direction of ASAHP for the next two years. I think making ASAHP a stronger organization will help you and your programs in the long run. PLEASE make ASAHP emails a priority. I and the ASAHP Board need your help in moving ASAHP forward.

## ALLIED HEALTH IN CONTENTION ONCE AGAIN



**Senator Maria Cantwell** (D-WA), sponsor of the Allied Health Reinvestment Act that was introduced by ASAHP, was successful on October 22 in having an amendment accepted as part of the Labor-HHS spending bill that would restore \$2 million to Title VII specifically for allied health. If and when the funding stream is renewed, it will serve as a basis for adding to the amount in upcoming appropriations cycles. The following day, the Senate passed this spending bill, a measure that is in stark contrast between priorities of congressional Democrats and the Bush Administration. The President has promised to veto it because of Senate funding requests that exceed his own by nine billion dollars. It passed by a 75-19 vote, which is enough to override a veto. The Senate version would provide \$1.9 billion less in discretionary spending than the House version, a difference that needs to be resolved in a conference that may come soon. Conferencees were named immediately after passage.

Also on October 23, House lawmakers passed a six-month extension of the primary federal laws governing colleges, universities, and financial aid — postponing a long-term reauthorization until at least 2008. The bill (HR 3927) would be the third extension this year of the Higher Education Act (PL 105-244), which has not been fully renewed since 1998. Lawmakers initially expected to take up the bill, which would extend the law through April 30, on October 22, but disagreements over the extension's expiration date delayed a vote. Senate leaders had pressed for a shorter renewal to maintain a sense of urgency for a long-term reauthorization. After a College Board report (it can be accessed in the *News Across The Professions* section of ASAHP's website at [www.asahp.org](http://www.asahp.org)) showed that tuition and fees at four-year public colleges have increased by 31 percent over five years, Education and Labor Chairman **George Miller** (D-CA) reiterated his desire for an overhaul, but he has not introduced such legislation yet.

Page one of this issue of the newsletter refers to the Workforce Investment Act, another major piece of legislation that awaits reauthorization. ASAHP is working for the inclusion of language that specifically would benefit allied health.

Meanwhile, efforts continue to provide more traction for the proposed Allied Health Reinvestment Act. The Senate version (S 605) was reintroduced on February 15, 2007. Efforts are underway to have the House version reintroduced in that chamber.

### 2008-2011 ASSOCIATION CALENDAR OF EVENTS

**March 13-14, 2008**—Spring Meeting-TradeWinds Resort—St. Pete Beach, FL

**October 6-7, 2008**—Student Leadership Development Program

**October 8-10, 2008**—Annual Conference—Marriott Hotel —Baltimore, MD

Sites have been selected for other upcoming ASAHP events. The Annual Conference in 2009 will be in San Antonio, TX. That event also will be held in Chicago, IL in 2010 and in Charlotte, NC in 2011.

## ANNUAL CONFERENCE HIGHLIGHTS



Shown at the 2007 ASAHP Fellows Awards Luncheon (From L-R): ASAHP Past President David Gale, Randall Lambrecht, Gregory Frazer, Gary Neiman, and ASAHP President Linda Hatzenbuehler



Peggy Valentine, recipient of the 2007 ASAHP *Cultural Pluralism Award*, and ASAHP Immediate Past President David Gibson



Members and faculty in the 2007 ASAHP Leadership Development Program.

## ASAHP AWARD WINNERS

The following individuals were honored during the Awards Banquet at the 2007 ASAHP Annual Conference in San Diego, CA on October 17-19:

*Darrell Mase Presidential Citation*

**David D. Gale** (Dean, Eastern Kentucky University)

*Distinguished Service and Achievement Award*

Former U.S. **Senator George S. McGovern** (U.N. Global Ambassador on Hunger)

*Outstanding Member Board Award*

**Gary S. Neiman** (Dean, Ohio University)

*Cultural Pluralism Award*

**Peggy Valentine** (Dean, Winston-Salem State University)

*Legacy of Excellence Award*

**Lawrence Abrams** (ASAHP President 1988-1990)

*Fellows Program Award*

**Gregory H. Frazer** (Dean, Duquesne University)

**Randall S. Lambrecht** (Dean, University of Wisconsin at Milwaukee)

**Gary S. Neiman** (Dean, Ohio University)

*J. Warren Perry Award for Best Articles in the Journal of Allied Health*

**William L. Siler** and **Charlotte Brasic Royeen** (Saint Louis University)

**Kimberly K. Cleary** (Eastern Washington University) and **Dana Howell** (Eastern Kentucky University)

## SCHOLARSHIP OF EXCELLENCE WINNERS

Once again, the names of winners of the Association's *Scholarship of Excellence* were publicized during the Annual Conference. This year's recipients are:

**Katie Micco** (Duquesne University)

**Christopher Ferreira** (Massachusetts College of Pharmacy & Health Sciences)

**Katherine Lankford** (Northern Arizona University)

**Mary Platek** (University at Buffalo, The State University of New York)

**Gretchen Magee** (The University of Oklahoma Health Sciences Center)

**April Cheung** (The University of Tennessee Health Science Center)

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## HIGHER EDUCATION ACCESS

According to the Pathways to College Network, too few low-income and minority students are prepared to enroll and succeed in college. Not only do they enter colleges and universities at lower rates than their higher income peers, but they also are significantly less likely to complete their degree. In addition, financial aid has not kept pace with increasing college costs: The maximum Pell Grant award of \$4,050—the primary source of federal financial aid for low-income students—pays for only one-third of the cost of attending a four-year public institution. Only 47 percent of high school graduates from the bottom U.S. income quartile enter higher education institutions, compared with 85 percent of high school graduates from the top income quartile. In 2002, only 41 percent of African-American students and 38 percent of Hispanic students completed high school with necessary math and reading skills to continue on to college. While 80 percent of high-income students entering college in 1992 finished a degree by 2000, only 43 percent of low-income students finished a degree program in a similar amount of time. Additional information can be accessed on the Web at <http://www.pathwaystocollege.net/pdf/FactSheet.pdf>.

## ADVANCES IN COMPARATIVE EFFECTIVENESS RESEARCH

A series of articles on new approaches and advances in comparative effectiveness research are compiled in a special edition of *Medical Care* sponsored by the Agency for Healthcare Research and Quality (AHRQ). The supplement, “Emerging Methods in Comparative Effectiveness and Safety,” contains 23 articles authored by AHRQ-funded researchers nationwide. Articles in the new supplement address practical issues confronting researchers, including methodological challenges to studying patient safety, analyzing observational data, and how to study prescription drug use with Medicaid claims data. The new *Medical Care* supplement does not endorse specific research methods, but represents experts' current thinking on how science can utilize growing sources of electronic health information to improve health care. The articles can be accessed on the Web at <http://effectivehealthcare.ahrq.gov/reports/med-care-report.cfm>.

## INFORMING THE FUTURE: CRITICAL ISSUES IN HEALTH

*Informing the Future: Critical Issues in Health, Fourth Edition* highlights the groundbreaking reports released by the Institute of Medicine (IOM) over the past two years and explores the policy areas that will be critical to the nation's well-being in years to come. This booklet illustrates the work that IOM committees have done in several topic areas, describes IOM's convening and collaborative activities, and provides a comprehensive bibliography of all IOM reports published since 2005. In addition, it contains a CD-ROM featuring executive summaries of recent reports. A complimentary copy of the report may be obtained by sending an e-mail message to the IOM's Office of Reports and Communication at [ORAC@nas.edu](mailto:ORAC@nas.edu) or by calling Tel: 202-334-2659.

## U.S. INVESTMENT IN HEALTH RESEARCH

Research!America has been tracking and analyzing the various streams of funding that make up the total U.S. investment in health research for a decade. Trends indicate that the U.S. is headed in the wrong direction. In 2006, an estimated \$116 billion was spent on research to improve health. While spending on health overall in 2006 grew by 6.8% to more than \$2 trillion, the investment in health-related research grew by a modest 4.2%. For every dollar spent on health overall, 5.5 cents went to research in 2006, the smallest portion since 2001. This decline continues a trend that started in 2005, following a flattening in federal research spending that began in 2004. The report can be accessed on the Web at <http://www.researchamerica.org/publications/appropriations/healthdollar2006.pdf>.

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## AVAILABLE RESOURCES ACCESSIBLE ELECTRONICALLY

### Accountability And Transparency In Higher Education

As an example of a response to a call by the Secretary's Commission on the Future of Higher Education for greater accountability and transparency, the National Association of Independent Colleges and Universities (NAICU), which has challenged the Bush administration's efforts to expand its data collection activities in higher education, launched its own consumer-friendly Web site. It is called the *University and College Accountability Network (U-CAN)*, comprised of profiles of hundreds of private colleges. It can be accessed on the Web at <http://www.ucan-network.org/>

### Panel Discussions On Higher Education Accreditation

An event at the American Enterprise Institute (AEI) in Washington, DC on September 21 featured a keynote address by **Charles Miller**, chairman of the Commission on the Future of Higher Education- known as the Spellings Commission,- who talked about the group's recommendations and the need for reform. In the first panel, **Judith Eaton**, president of the Council for Higher Education Accreditation; **Sara Martinez Tucker**, under secretary of education at the U.S. Department of Education, who is also a Spellings commission member; and **Arthur Rothkopf**, former president of Lafayette College and a current senior vice president of the U.S. Chamber of Commerce, discussed the current state of the accreditation system and whether it really needs to be changed. AEI's **Richard Vedder**, who also was a member of the Commission on the Future of Higher Education, served as moderator. In the second panel, Indiana University law professor **William Henderson**, who has conducted research on law school rankings and on the data used to accredit law schools; **Anne D. Neal**, president of the American Council of Trustees and Alumni; and **Jeff Sandefer**, a higher education entrepreneur and the founder of the Acton MBA, reviewed and discussed possible substitutes for the existing process. **Candace de Russy**, a former trustee for the State University of New York, was the moderator. An audio version of that day's events can be accessed on the Web at [http://www.aei.org/events/eventID.1564,filter.all,type.past/event\\_detail.asp](http://www.aei.org/events/eventID.1564,filter.all,type.past/event_detail.asp).

### Health and Aging Trends

Up-to-date information on trends in the health of the older U.S. population is available on the Web from the Centers for Disease Control and Prevention (CDC). A major part of the website consists of tables on important topics in health and aging. The data come from a variety of sources in the federal government and are in easy-to-use Beyond 20/20 tables. The site can be accessed at [http://www.cdc.gov/nchs/about/otheract/aging/first\\_aging\\_.htm](http://www.cdc.gov/nchs/about/otheract/aging/first_aging_.htm).

### Guide To Clinical Preventive Services, 2007

The *Guide to Clinical Preventive Services* includes U.S. Preventive Services Task Force (USPSTF) recommendations on screening, counseling, and preventive medication topics and includes clinical considerations for each topic. This new pocket guide provides an authoritative source for making decisions about preventive services. The Guide can be accessed on the Web at <http://www.ahrq.gov/clinic/pocketgd07/pocketgd07.pdf>.

### Racial And Ethnic Disparities In Access To And Quality Of Health Care

A new policy brief examines the prevalence and causes of racial and ethnic disparities in health care access and quality. According to the brief, racial and ethnic disparities are pervasive but not universal, with Hispanics facing the largest access disparities. The brief can be accessed on the Web at [http://www.rwjf.org/pr/synthesis/reports\\_and\\_briefs/pdf/no12\\_researchreport.pdf](http://www.rwjf.org/pr/synthesis/reports_and_briefs/pdf/no12_researchreport.pdf).

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## BOARD ACTIONS

- ◆ Members of the ASAHP Board of Directors participated in a meeting on October 15-16 in San Diego, CA. The following actions were among those taken:
- ◆ Approved the Minutes of conference calls on August 13 and September 10.
- ◆ Approved allocating one-half of the excess revenues over expenditures in the operational account at the end of fiscal year 2007 to the *Helen Hickey Fund* and one-half to the *Board Fund*. The Hickey Fund has been used to cover the costs of the leadership development program and the Board Fund is used to cover a wide variety of purposes, including the cost of government relations activities.
- ◆ Agreed that a draft paper of the “*Recommendations of the Task Force on Clinical Education*” should be modified and distributed to regional accrediting bodies, the Council of Graduate Schools, and the Council for Higher Education Accreditation. ASAHP’s Education Committee will be charged with the task of developing a complementary document, involving such aspects as hallmark characteristics of clinical doctorate programs and indicating what these programs should be trying to achieve from the perspective of affecting the workforce, access, and diversity.
- ◆ Approved having only an online version of the Association’s *Annual Report*. A small number of printed copies will be produced primarily for archival purposes.
- ◆ Assigned Board Members to serve as liaisons to the various ASAHP committees and task forces.
- ◆ Tabled a request from another organization to help finance a public relations effort until more is known about the kinds of materials that will be used.
- ◆ Tabled a request to modify the criteria for Lifetime Membership in the Association until more is known about how other professional organizations deal with this category of membership.
- ◆ Agreed to appoint a task force to determine criteria for selecting ASAHP Fellows.
- ◆ Charged the Education Committee with doing a feasibility study to determine whether ASAHP also should develop an online leadership development program.
- ◆ Approved a motion to hold the 2010 Annual Conference in Chicago, IL and the 2011 Annual Conference in Charlotte, NC.

## BRANDING ALLIED HEALTH

During the Deans’ Council Meeting at the Annual Conference in San Diego, following a lively discussion on the topic of branding allied health, participants agreed that ASAHP should form a task force to determine what kinds of steps need to be taken to heighten the visibility of allied health. The term is an elusive one because of the vast number of professions that usually are considered to be embraced by the rubric. Even within the community of institutional members belonging to ASAHP, the vast majority of schools do not have the term in their respective names, unlike other kinds of schools such as medicine, which have the name medicine in their title. The lack of a commonly accepted and visible brand adds to the challenge of successfully attracting resources and other forms of external assistance from governmental agencies and foundations.