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Message from the Editor-in-Chief

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How We Became “Unethical”



Modern policies are often based on long-standing and sometimes archaic points of view or funding practices. For example, in audiology, many of the services currently provided are based on how these services were paid for in the past. It was not unusual to find an audiology practice specializing in one area simply because it received adequate remuneration, and at the same time, other practice areas of audiology were not as prevalent, based on its historical lack of funding. Aural rehabilitation, for example, comes to mind.

And many regulatory, and in some cases, non-regulatory policies led to restrictions in practice. When I first began in this field, it was the policy of both the ASHA and its Canadian sister, CSHA – the Canadian Speech and Hearing Association, now SAC, that audiologists should not dispense hearing aids at the risk of losing their certification (in the case of ASHA) or membership (in the case of CSHA). Neither these organizations nor their successors had regulatory powers despite some states requiring an “eligibility” to be a member of ASHA, and some Canadian institutions requiring CSHA membership. At least in Canada, this has changed to requiring registration with provincial regulatory bodies in most provinces, and the policies regarding the scope of practice have thankfully kept up with the times.

Our cover feature article entitled “How I became unethical” has been written by a delightful man Jim Curran, who I had plenty of contact with in the 1980s. From his article:

“Most university audiology programs in the early years had relatively few or no faculty members with expertise in technical, calibration or acoustic matters, much less in hearing aid selection and fitting. Speechreading and auditory training techniques were felt to be of more value in hearing rehabilitation than amplification. For a professor, teaching hearing aid classes became the least desirable assignment; the practicum was often left in the hands of graduate assistants, and few

students selected amplification as their major field of interest."

Jim worked for a hearing aid manufacturer and provided technical input to the development of an entire generation of hearing aids and traveled the world teaching audiologists what they perhaps should have learned in school about amplification. For this, he was initially ridiculed and later thanked.

Another article is reprinted here that appeared originally in 1994 about the state of affairs from 25 years before that, by Marjorie Skafte. Marjorie was the editor of *Hearing Instruments*, and later the first editor of *Hearing Review*. This was sent to us courtesy of Marjorie's protégé and current editor of Hearing Review, Karl Strom. The title says it all: "Dispensing audiologists — they once walked a lonely road." They were labelled as "unethical" audiologists and became the pioneers of the field of dispensing audiology.

As part of the 1993 American Auditory Society meeting, the Carhart Lecture was delivered by Earl Harford (among other things, the father of the CROS hearing aid), where a link was argued between dispensing hearing aids and the independence of audiology from merely being an employee. Dispensing hearing aids provided the financial basis and security for audiologists to be able to function in their own facilities and to expand those aspects of audiology that were of interest to them, regardless of the financial remuneration (or lack there-of) of certain non centre-of-the-road elements of audiology that are now considered to be within our scope of practice. It would be safe to say that without policy changes that initially acted as a prohibition against hearing aid dispensing, audiology would not be the independent profession we have today.

We also have other articles from the distant past, but enough about that… just read this issue of a "blast from the past" in CanadianAudiologist.ca!

I wish you all a pleasant and healthy holiday season.

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