



AMERICAN
SPEECH-LANGUAGE-
HEARING
ASSOCIATION

2008 ASHA Researcher Survey Section Report: ASHA Resources

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Written by the ASHA Researcher Survey Group

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Summary

In an effort to better serve the interests and needs of the communication sciences and disorders (CSD) research community, a survey was fielded on August 5, 2008, to all American Speech-Language-Hearing Association (ASHA) constituents who indicated their primary or secondary employment function as researcher as well as to individuals who expressed interest in participating based on their response to an advertisement in the ASHA Research Digest e-mail list ($n = 1,233$). Two follow-up reminders were sent to nonrespondents. A total of 303 responses were received, for a usable response rate of 24.6%. Note that of the 303 responses received, 209 individuals completed the entire survey; 94 dropped out of the survey prior to completing all questions.

The survey covered nine broad areas: education and preparation, areas of research, evidence-based practice, research mentoring, domestic and international research collaborations, publications and online tools, reviewer experiences, support for research (financial and institutional), and ASHA's role in supporting researchers.

This report focuses on the respondents' opinions and ideas about ASHA's sponsored programs, Convention activities, professional development opportunities, research dissemination via ASHA venues and forums, and ASHA's performance in meeting the needs of the discipline's and professions' researchers.

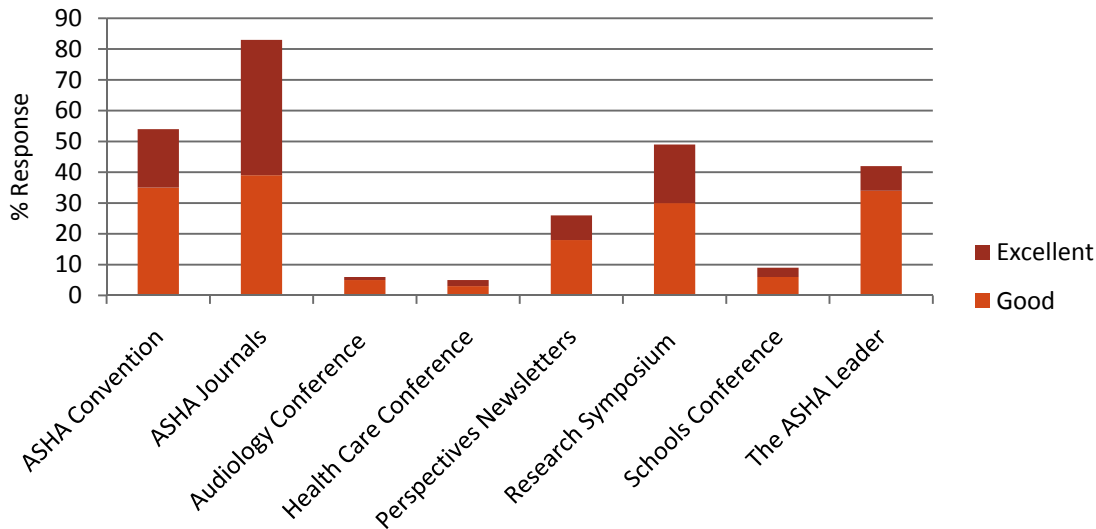
ASHA-Sponsored Programs

The respondents were asked to indicate the extent to which specific ASHA-sponsored programs served as a venue for showcasing the discipline's research. As shown in Figure 1, the ASHA journals received the highest percentage of "excellent" and "good" responses (82%), followed by the ASHA Convention (53%), the Convention's Research Symposium (49%), and *The ASHA Leader* (42%).

There appeared to be much unfamiliarity with some of ASHA's targeted workshops and programs. A high percentage of "do not know/no opinion" responses were noted for the Audiology Conference (a virtual Web conference initiated in 2006; 88%), the Health Care Conference and Business Institute (88%), and the Schools Conference (82%). This response was somewhat predictable, as these events are mainly for clinicians, and the majority of survey respondents were researchers. However, greater promotion of these programs may be shared with the research community to facilitate opportunities for collaborations with clinicians, study pools, etc.



Figure 1. Percentage of Excellent and Good Ratings on ASHA Venues for Showcasing Research.



n = 232

ASHA Convention

Several questions were asked specific to the ASHA Convention. We requested feedback on how the Convention could be made a more effective venue for:

- communicating with the research community;
- influencing your area of the discipline;
- promoting new areas of research;
- promoting the growth in evidence-based practice;
- providing educational sessions that develop research careers;
- showcasing the basic science of the discipline.

Ideas for *engaging in more effective communication with the research community at the ASHA Convention* included offering a research track, providing more intimate opportunities for researchers to interact with one another (e.g., topic-oriented networking meetings such as talks with investigators about their projects), strengthening the peer review process, and placing more prominence on the poster sessions. Many respondents expressed a preference for smaller venues.

Suggestions to *help make the Convention a better venue for influencing the discipline's research* included featuring more cutting-edge topics and speakers, showcasing more audiology-related research, expanding the allowable paper presentation formats (e.g., to include a presentation followed by open discussion), and inviting presenters from outside the discipline.

Respondents offered a number of creative ways in which *the Convention can be improved to better promote new areas of research*. One popular suggestion was to offer more information on funding sources. Other ideas included highlighting joint research efforts between hearing scientists and speech-language scientists, hosting interdisciplinary (virtual and/or on-site) research think tanks, and facilitating “group meetings (in a subdiscipline) where people can present what direction they are planning to take their research in the future.”

When asked *how the Convention could be a more effective venue for promoting the growth in evidence-based practice*, many respondents felt that ASHA was headed in the right direction (e.g., “This seems to be coming along nicely, from what I observe”). Suggestions for enhancement included facilitating clinician-research exchanges and collaborations, providing more courses for clinicians in this area, inviting keynote speakers on the topic, hosting roundtable discussions, and requiring clinical presentations to be evidence-based.

The fifth area in which we were seeking feedback was on *how to make the Convention a better venue for providing educational sessions that develop research careers*. Again, many felt that this was a current area of strength (“You are doing a good job of this!”). Ideas for enhancement included making “research” appear “more friendly and less elitist,” inviting sessions on “designing good research questions and methods,” making sessions more applicable to new/developing researchers, and taking these types of session proposals out of the peer review process.

Finally, the respondents were asked *how the Convention could better showcase the basic science of the discipline*. Suggestions included highlighting the topic in a keynote address, securing press coverage, encouraging the emphasis of the connection between basic science and clinical application, and inviting researchers from outside the discipline to participate.

Professional Development

The respondents were asked to rate both the importance of and their satisfaction with the job ASHA was doing in providing venues and opportunities for professional development relative to each of the following topics: assessment research, basic science, clinical trials, qualitative research, single-subject design, and treatment research.

With regard to importance, all topics were rated “somewhat important”/“very important” by at least 79% of the respondents (see Table 1). Satisfaction ratings were much lower; none of them exceeded 43% in combined “somewhat satisfied” and “very satisfied” ratings. The percentage of “do not know/no opinion” responses likely contributed to the low level of satisfaction, as for example, 45% of the respondents reported that they did not know or had no opinion about the job ASHA was doing in providing professional development opportunities on the topic of qualitative research. Forty-two percent reported the same for single-subject design.

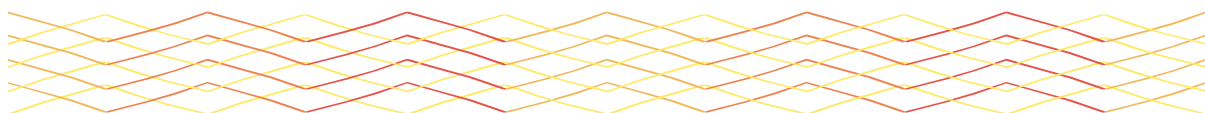


Table 1. Importance of and Satisfaction with ASHA’s Provision of Venues and Opportunities for Professional Development by Topic (combined “somewhat important” and “very important” and “somewhat satisfied” and “very satisfied” responses).

Topic	Somewhat or Very Important	Somewhat or Very Satisfied	Do Not Know/ No Opinion*
Assessment research	89.4%	42.9%	36.1%
Basic science	90.8%	37.0%	32.8%
Clinical trials	93.4%	35.8%	31.6%
Qualitative research	80.7%	31.6%	44.9%
Single-subject design	79.3%	30.2%	42.2%
Treatment research	96.5%	42.1%	28.9%

*Regarding satisfaction with ASHA’s provision of venues and opportunities for professional development.
n ≥ 197

Other topics suggested by respondents in written comments included large-scale, epidemiological studies, multi-interdisciplinary research, and service delivery model research. Two respondents questioned whether providing professional development opportunities on such topics was ASHA’s role. One emphasized that more rigorous research training in PhD programs was needed.

Research Dissemination

A number of questions were asked specific to ASHA’s research dissemination efforts. We requested feedback on:

- the provision of information on research-related topics via various means (articles, workshops, etc.);
- forums for publishing basic and/or clinical research;
- potential enhancements for publishing basic and/or clinical research;
- editorial decisions relative to the publication of basic and/or clinical research.

The respondents were asked to rate both the importance of and their satisfaction with the job ASHA was doing in providing articles, workshops, Convention presentations, professional development opportunities, and so on, relative to each of the following topics: clinical research considerations, for-profit research funding, intellectual property rights, patents, publishing clinical outcomes research, publishing negative outcomes, publishing treatment efficacy research, and the responsible conduct of research.

With regard to importance, all topics were rated “somewhat important”/“very important” by at least 57% of the respondents (see Table 2). Satisfaction ratings were lower; none of them exceeded 51% in combined “somewhat satisfied” and “very satisfied” ratings. Note that some topics received a high percentage of “do not know/no opinion” responses, such as patents (65%), for-profit research funding (59%), and intellectual property rights (57%).

Table 2. Importance of and Satisfaction with ASHA’s Provision of Articles, Workshops, Convention Presentations, Professional Development Opportunities, etc. by Topic (combined “somewhat important” and “very important” and “somewhat satisfied” and “very satisfied” responses).

Topic	Somewhat or Very <u>I</u> important	Somewhat or Very <u>S</u> atisfied	Do Not Know/ No Opinion*
Clinical research considerations	93.6%	51.3%	26.2%
For-profit research funding	57.3%	13.1%	59.3%
Intellectual property rights	74.7%	15.3%	57.4%
Patents	57.6%	10.4%	64.8%
Publishing clinical outcomes research	95.7%	47.0%	23.5%
Publishing negative outcomes	92.0%	22.0%	29.7%
Publishing treatment efficacy research	95.7%	43.7%	26.8%
Responsible conduct of research	90.5%	43.9%	32.4%

*Regarding satisfaction with ASHA’s provision of articles, workshops, etc.
n ≥ 187

Other topics suggested by respondents in written comments included the Federal Drug Administration approval process, how to engage other disciplines, and how to critically read and judge the quality of research articles. Two respondents questioned whether providing articles, workshops, presentations, professional development opportunities, and so forth on such topics was ASHA’s role. One suggested that it was the responsibility of universities, and that ASHA should focus its research dissemination efforts elsewhere.

The respondents were then asked to indicate how satisfied they were with the current, available ASHA forum(s) for publishing their basic and/or clinical research.

The respondents gave higher ratings to ASHA forums for publishing their clinical research than to forums for publishing their basic research (57% vs. 44% combined “somewhat satisfied” and “very satisfied” ratings; see Table 3). Percentages of “do not know/no opinion” responses were fairly high, especially for ASHA forums for publishing basic research (27%).

Table 3. Satisfaction with Current, Available ASHA Forums for Publishing Basic and Clinical Research (combined “somewhat satisfied” and “very satisfied” and “somewhat unsatisfied” and “very unsatisfied” responses).

Type of Research	Somewhat or Very <u>S</u> atisfied	Somewhat or Very <u>U</u> nsatisfied	Do Not Know/ No Opinion
Basic research	43.8%	29.6%	26.6%
Clinical research	56.7%	25.4%	17.9%

n = 208

The respondents were then asked to indicate their interest in potential enhancements for publishing their basic and/or clinical research (an open access option, article summaries, additional content types, and structured abstracts).

At least 55% of the respondents indicated that they were “somewhat interested”/“very interested” in each of the potential enhancements (see Table 4). No more than 20% indicated that they were “not very interested”/“not at all interested” in each of the potential enhancements. Percentages of “do not know/no opinion” responses were fairly high, ranging from 21% for article summaries to 30% for additional content types.

Table 4. Interest in Potential Enhancements for Publishing Basic and/or Clinical Research (combined “somewhat interested” and “very interested” and “not very interested” and “not at all interested” responses).

Potential Enhancement	Somewhat or Very Interested	Not Very or Not at All Interested	Do Not Know/ No Opinion
An open access option	54.7%	16.9%	28.4%
Article summaries	61.3%	17.7%	21.0%
More content types	58.2%	12.0%	29.9%
Structured abstracts	56.1%	19.8%	24.1%

n = 190

Other potential enhancements suggested by respondents in written comments included shortening the time between submission and publication, longer structured abstracts, online addenda, and thorough reviews. [Note that since the survey was fielded, ASHA has added a Papers in Press collection online for each journal, which makes accepted manuscripts available typically within a month of acceptance. Also, the journals now allow online addenda (i.e., supplemental materials) and actively encourage such submissions from authors.]

Finally, the respondents were asked how satisfied they were with ASHA’s editorial decisions relative to the publication of their basic and/or clinical research.

Nearly half of the respondents were “somewhat satisfied”/“very satisfied” with ASHA’s editorial decisions relative to the publication of their basic and/or clinical research (45% and 48%, respectively; see Table 5). Percentages of “do not know/no opinion” responses were high, especially for decisions relative to the publication of basic research (37%).

Table 5. Satisfaction with ASHA’s Editorial Decisions Relative to the Publication of Basic and/or Clinical Research (combined “somewhat satisfied” and “very satisfied” and “somewhat unsatisfied” and “very unsatisfied” responses).

Type of Research	Somewhat or Very Satisfied	Somewhat or Very <u>U</u> nsatisfied	Do Not Know/ No Opinion
Basic research	45.3%	18.1%	36.7%
Clinical research	48.4%	23.4%	28.1%

n = 201

Meeting the Needs of Researchers in the Discipline

A number of questions were asked specific to ASHA’s performance in meeting the needs of researchers in the discipline. We requested feedback on:

- how well ASHA currently addresses the needs of researchers in specific areas;
- the job ASHA has done in addressing the needs of researchers in the past 5 years;
- the likelihood of respondents recommending ASHA membership to a nonmember researcher whose research is related to the discipline;
- reasons for not recommending ASHA membership.

Overall, the respondents gave ASHA higher ratings for meeting the needs of researchers in the area of clinical speech-language pathology (45% combined “good” and “excellent” ratings) than in other areas (see Table 6). Percentages of “do not know/no opinion” responses were quite high (ranging from 34% for clinical speech-language pathology to 60% for clinical audiology).

Table 6. How well ASHA currently addresses the needs of researchers in the discipline in specific areas (combined “good” and “excellent” and “poor” and “fair” responses).

Area (All Respondents)	Good or Excellent	Poor or Fair	Do Not Know/ No Opinion
Basic hearing	22.1%	23.1%	54.9%
Basic speech	34.2%	20.2%	45.6%
Basic language	35.5%	20.7%	43.8%
Clinical audiology	24.7%	14.9%	60.3%
Clinical speech-language pathology	45.4%	21.1%	33.5%

n ≥ 193

The respondents practicing in the area of audiology gave ASHA higher ratings for meeting the needs of researchers in clinical audiology than in basic hearing (43% vs. 31% combined “good” and “excellent” ratings; see Table 7).

Table 7. How well ASHA currently addresses the needs of researchers in the discipline in specific areas (combined “good” and “excellent” and “poor” and “fair” responses).

By Area in Which They Practice (Audiology)	Good or Excellent	Poor or Fair	Do Not Know/ No Opinion
Basic hearing	30.7%	53.8%	15.4%
Basic speech	24.5%	8.2%	67.3%
Basic language	22.5%	8.2%	69.4%
Clinical audiology	43.4%	41.5%	15.1%
Clinical speech-language pathology	28.0%	2.0%	70.0%

n ≥ 49

The respondents practicing in the area of speech-language pathology gave ASHA higher ratings for meeting the needs of researchers in clinical speech-language pathology than in basic speech or basic language (53%, 36%, and 41% combined “good” and “excellent” ratings, respectively; see Table 8).

Table 8. How well ASHA currently addresses the needs of researchers in the discipline in specific areas (combined “good” and “excellent” and “poor” and “fair” responses).

By Area in Which They Practice (Speech-Language Pathology)	Good or Excellent	Poor or Fair	Do Not Know/ No Opinion
Basic hearing	17.1%	6.3%	76.6%
Basic speech	36.0%	23.4%	40.5%
Basic language	40.5%	26.1%	33.3%
Clinical audiology	14.5%	5.4%	80.0%
Clinical speech-language pathology	53.1%	34.5%	12.4%

$n \geq 110$

The respondents practicing in the area of speech, language, or hearing science gave ASHA higher ratings for meeting the needs of researchers in clinical speech-language pathology (46% combined “good” and “excellent” ratings) than in any other area (see Table 9).

Table 9. How well ASHA currently addresses the needs of researchers in the discipline in specific areas (combined “good” and “excellent” and “poor” and “fair” responses).

By Area in Which They Practice (Speech, Language, or Hearing Science)	Good or Excellent	Poor or Fair	Do Not Know/ No Opinion
Basic hearing	18.3%	28.2%	53.5%
Basic speech	34.3%	31.4%	34.3%
Basic language	33.4%	29.2%	37.5%
Clinical audiology	20.9%	16.7%	62.5%
Clinical speech-language pathology	46.4%	21.1%	32.4%

$n \geq 70$

The respondents were then asked, based on their experiences in the past 5 years, to indicate what kind of job the Association has done in addressing the needs of researchers. Respondents in all areas of the discipline, with the exception of those in the “Audiology only” area, gave higher ratings for “Poor and Fair” than for “Good and Excellent.” The percentage of “Not enough experience to judge” was highest (30%) in the “Audiology only” area (see Table 10).

Table 10. Based on respondents’ experiences in the past 5 Years, the kind of job the Association has done in addressing the needs of researchers (combined “good” and “excellent” and “poor” and “fair” responses).

	<i>n</i>	Good or Excellent	Poor or Fair	Not Enough Experience to Judge
All respondents	204	35.3%	47.1%	17.6%
Audiology only	54	37.0%	33.3%	29.6%
Speech-language pathology only	117	34.2%	53.0%	12.8%
Speech, language, or hearing science	75	33.4%	50.7%	16.0%

The respondents were also asked to indicate how likely they would be to recommend ASHA membership to a researcher who did not belong to ASHA and whose research was related to the discipline. Respondents in all areas of the discipline gave higher ratings for “definitely would not” and “probably would not” than for “probably would” and “definitely would” (see Table 11).

Table 11. Likelihood of recommending ASHA membership to a researcher who did not belong to ASHA and whose research was related to the discipline (combined “probably would” and “definitely would” and “definitely would not” and “probably would not” responses).

	<i>n</i>	Probably or Definitely Would	Definitely or Probably Would Not
All respondents	201	46.8%	53.3%
Audiology only	53	37.8%	62.2%
Speech-language pathology only	116	46.5%	53.4%
Speech, language, or hearing science	74	41.9%	58.2%

Respondents who said that they would not recommend ASHA membership to a nonmember researcher were asked to explain why. Common explanations included:

- ASHA is geared more for clinicians than researchers (i.e., it is more of a professional organization than a scientific one);
- ASHA does not provide strong support for basic research;
- ASHA membership dues are too high for the benefits received;
- the ASHA Convention is lacking in scientific rigor.

Suggestions for ASHA

The respondents were asked to offer any suggestions that they might have for ASHA to further/better address the needs of researchers in the CSD discipline, advance the science of the discipline, and facilitate practice-based research.

Their suggestions to *further/better address the needs of researchers in the CSD discipline* included:

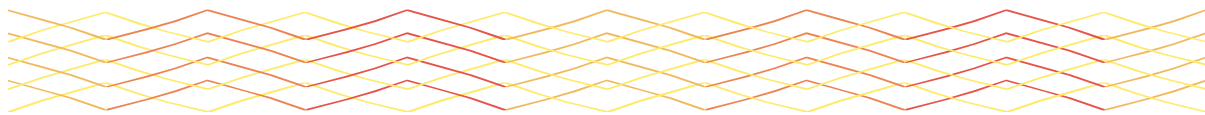
- emphasize research at the ASHA Convention and other conferences;
- provide networking opportunities to facilitate communication among researchers;
- provide mentoring programs related to research needs;
- foster interdisciplinary research teams;
- encourage scientific societies such as the Acoustical Society of America and the Society for Neuroscience to support the CSD discipline;
- provide funding and/or assist members in obtaining funding from NIH and private funding sources.

Their suggestions to *advance the science of the discipline* included:

- work to recruit better students;
- increase support for initiatives designed to address the PhD shortage;
- have higher standards for presentations and posters at the ASHA Convention;
- provide funding and advocate to other potential funders;
- ensure that ASHA publications have criteria that help to advance the science;
- encourage collaboration among scientists of different disciplines.

Their suggestions to *facilitate practice-based research* included:

- encourage collaborations between clinicians and researchers;
- provide funding and other resources in support of this type of research;
- encourage evidence-based practice, which goes “hand-in hand” with practice-based research;
- provide mentoring opportunities at the ASHA Convention and other events;
- publish more applied research in the ASHA scholarly journals.



Additional Information

Additional Survey Reports

Companion reports are also available on the ASHA Web site:

- *Executive Summary*
- *Respondent Demographics*
- *Areas of Research*
- *Research Processes*
- *Support for Research*

Citation

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Project Team

The project team comprised Gail Brook, Research Analyst and Technical Writer; Joanne Jessen, Director of Publications (retired); Lemmietta McNeilly, Chief Staff Officer for Speech-Language Pathology; Sharon Moss (project director), Director, Scientific Programs and Research Development (former); Loretta Nunez, Director, Academic Affairs; Jim Potter, Director, Government Relations and Public Policy (former); Margaret Rogers, Chief Staff Officer for Science and Research; and Sarah Slater, Director, Surveys and Information.

Questions?

Questions regarding this report may be directed to Gail Brook at gbrook@asha.org, or Sarah Slater at sslater@asha.org.

Thank You

Without the generous cooperation of the members who participate in our surveys, ASHA could not fulfill its mission to provide vital information about the professions and discipline to the Association membership and public. Thank you!