

## **The Importance of the (Endangered) Clinical Scholar to the Future of Dental Education**

Dear Dr. Alvares:

The clinical scholar organizes courses and clinical programs, manages clinics for identified cohorts of patients, is active in protocol-driven published research, is nationally involved in policymaking in a clinical discipline, writes books and chapters, articulates the scientific basis for clinical protocols, serves on editorial boards, etc. A robust cadre of clinical scholars will influence the direction of dentistry. The clinical scholar will anchor the essential dental faculty spectrum from the clinical teacher/practitioner on the one end to the research-intense R-01 scientist on the other. The clinical scholar as described probably will not have an R-01 award.

In my opinion, the clinical scholar is endangered. Reasons include the evolving limitations of the promotions process, the demands on clinical productivity, and the increasing standards for the program director. In schools with the full spectrum of faculty (or in particularly research-intense schools), the clinical scholar is now struggling to get tenure. So what? The issue has been settled that to be part of a level one research university, professional schools need to be active in the best science, with the National Institutes of Health as the gold standard in peer

review. I agree! Increased demands for patient care lead to demands on faculty involved in clinical teaching and direct patient care. I agree with the need for patient-centered teaching and direct patient care. Perhaps the crucible of the issue is with the specialty program director because of the multiple demands from program administration, gaining tenure, and remaining active in the individual's respective specialty organizations and specialty boards. In an ADEA symposium last year, many were surprised to hear of the limited or secondary role specialty boards may play in gaining tenure.

In my role as ADEA president this year, I think one of our biggest unresolved philosophical questions is the role of dental schools and dental education in influencing the direction of dentistry if the activities performed by the clinical scholar go away. It is my opinion that professional schools *do* need to influence the direction of their respective professions. I submit that influencing the direction of dentistry will strengthen our teaching and our research. A strong cadre of clinical scholars performing the above list of activities gives us an excellent position to influence the direction of dentistry. The current system/environment may not nurture the clinical scholar. A first step in addressing the problem is to acknowledge its existence. I am not sure we have a consensus on the problem.

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