Arthur Guilford oral history interview by Yael V. Greenberg, April 15, 2003

Arthur M. Guilford (Interviewee)

Yael V. Greenberg (Interviewer)
TOPICS OF DISCUSSION

Year of arrival
Dr. Guilford came to USF in December of 1976 as an assistant professor of communicalogy.

Circumstances that brought him here
He was a native Floridian and had strong ties to the state of Florida. He was married with one child. He was an assistant professor at Cal State University in L.A. His wife did not like California because of the possibility of earthquakes. Out of the blue, he received a call from the chair of the Department of Communicalogy at USF. The chair told Dr. Guilford that he had heard of him and had an opening and asked if he would be interested in interviewing. Dr. Guilford said yes. But, Dr. Guilford was happy at Cal State. When he came to USF for his interview, it only reinforced his dislike of Tampa. However, he did like the people at USF and knew that it was important for him and his wife to be near their families.

Did he think he would be at USF for twenty-seven years?
He told his wife not to expect him to stay for long, but only two or three years because he just did not like Tampa. He says he did not know if USF was going to be his kind of school. However, he has now stayed for twenty-seven years.

What made him stay for twenty-seven years at USF?
One major factor for him staying was seeing USF grow and change. Another factor was his success. Also, watching Tampa grow. He says Tampa went from having no performing arts center to having one of the best in the world. Another factor that helped Dr. Guilford stay was seeing the culture of Tampa and USF change. He says the diversity of both Tampa and USF have increased greatly since he arrived in 1976.

What did the surrounding area and USF look like?
“It was not nearly as beautiful as it is now. Many parts of the campus did not even have grass. There were not nearly as many trees. You would have sand blowing everywhere as you walked across campus in the blazing sun. It was not a very inviting environment.
The campus has changed tremendously. There were very few dorms. The ones we did have were already very out of date. They were not very inviting places for students to live,” states Dr. Guilford.

Why was Dr. Guilford apprehensive about moving to Tampa?
“Tampa was simply a location you drove through to get further south. I came from the capital city,” he states. His parents were living in Bradenton, Florida. They would spend long car trips driving south from Tallahassee. He says Tampa was just a place through which people passed. Also, he says the performing arts center had not opened. He and his wife are devoted to the arts and very involved in historical preservation. Also, he did not find the USF faculty as friendly as the Cal State University faculty.

Was it difficult for Dr. Guilford when he first arrived?
The Communication Department was founded in 1967. “We were out of the mainstream of what was then the real mission going on at USF. We had always been an applied program. You always get a licensed degree. We have been out of step with the mission. I no longer feel that way. But, that was some of the atmosphere that pervaded,” states Dr. Guilford. He says the 1970s were a strange time to be in academia. He graduated with his Ph.D. when he was twenty-three years old from the University of Michigan. Dr. Guilford says he was a fairly young faculty member, so maybe that tainted some of his views.

The beginning of the Department of Communication
When three colleges merged to form the college of Arts and Sciences, the Department of Communication moved into the College of Arts and Sciences. Before he arrived, the Department of Communication was actually an institute. The department was housed off campus in an apartment building across the street from the university on Fletcher Avenue. It has since been torn down. That is where the department as an institute got its start.

How the Department of Communication differed and differs from other departments
“Service has always been a major part of the department because we run a very large clinical program. Our graduates have to receive so many clinical hours before they can graduate. This was a little off the mainstream,” says Dr. Guilford. In 1976, he was also heavily involved in clinical supervision. There was not an exclusive clinical faculty like there is now. What he was doing as an assistant professor was different from what most typical assistant professors were doing. He says he wore a fourth hat, which was clinical supervision, besides teaching, service, and research.

When and why did the Department of Communication change its name to the Department of Communication Sciences and Disorders?
“The name change occurred in 1987. It occurred because we really felt that communicalogy did not show to the world what we were really about. Communication is what we are about, but there is a science that drives the profession. There is a research base that tells us what to do. We felt it was much more mainstream. It was much more
aligned with what was happening nationwide to call ourselves the Department of Communication Sciences and Disorders,” Dr. Guilford says.

*How has the Department of Communication Sciences and Disorders changed?*  
They have become one of the largest departments in the College of Arts and Sciences. He has thirty-four faculty members and about twenty part-time faculty members. When he took over as chair they had ten faculty members. The department has about 150 graduate students in speech language pathology, and forty-five graduate students in audiology. The department also has a very large undergraduate program. When he first came to the Department of Communication he there were three degree programs, but they were considered five-year degree programs. Students entered as a junior and if they made a “B” or better in junior level courses and scored an 850 or better on the GRE they could enter graduate school as a senior. If everything went well they would have a master’s degree in five years. However, fifteen years ago the program was phased out. The department felt they would attract a stronger level of students if they attracted students post-baccalaureate. Now they have a bachelor’s degree program, a master’s degree program, a doctoral of audiology, and a Ph.D. program. They cover the entire continuum now. He thinks they are much more aligned with the university’s academic mission.

*Dr. Guilford talks about the atmosphere at USF during the 1970s*
Dr. Guilford states, “We were at the end of the Vietnam War. We were in a turbulent time in our society. We had constant bomb threats. Every final exam period I would be marching my students out to the grass because the security system would be going off. The bomb threat problems particularly occurred if we taught in a larger building like in Cooper Hall. Our particular building, then Classroom Building A, only had two classrooms in it, so we didn’t have quite as much trouble. But, it was constant in Cooper. There were not a lot of jobs in academia. There was a prevailing feeling among the administration here that if you got a job you were lucky. At the time, USF was undergoing many things. It was trying to establish its own identity. There were battles going on between town and gown and what the role of residents would be in the community. We were wondering whether or not we would ever have our own teaching hospital, and it was decided then that we would not. There were debates about where our department should be housed. Are we central to the College of Arts and Sciences’ mission? Should we be in applied health or should we be in a professional college?” Dr. Guilford says all these issues were going on in the 1970s.

*How many people were in the Department of Communication when Dr. Guilford first arrived, and how has that changed since then?*  
There were about eight or nine faculty members when he arrived in 1976. When he took over as chairman in 1990 and the department began its own bachelor’s degree program, and later the doctoral of audiology program, and most recently the Ph.D. program, the department really started to grow.
What kinds of courses were offered in 1976 and how has that changed?
“Well, because we are a nationally accredited program, there has to be a core curriculum that addresses certain features of the professions. Standards have changed over the period of time. More courses have come in, and our scope of practice has broadened over the last thirty years. But, there are certain core courses that have remained the same. The knowledge basis of the neuro-cognitive sciences and the neuro-motor sciences has greatly increased,” states Dr. Guilford.

How has the audiology program changed over the years?
“Another area in which our scope of practice has changed is audiology. Audiology did not dispense hearing aides in the early days. That was not a part of the scope of practice, but now the dispensing of hearing aids has become the primary money-maker for audiologists,” he states.

How has the speech language pathology program changed over the years?
“Another area that has changed is speech language pathology. We are now dealing with patients that are critically ill. We deal with babies in the neonatal intensive care unit, with critically ill elders, and with swallowing disorders. We work in radiology now with the swallowing problems of patients. The practice of the profession has just absolutely blossomed and skyrocketed. The practice changes constantly,” he states.

New standards for both the audiology and speech pathology programs
Dr. Guilford says new standards for audiology go into effect in 2007. The new standards will require a doctor of audiology as the minimal entry requirement for the practice of the profession. He began the doctoral of audiology program four years ago because he knew standards would have to be met. In 2005 speech pathology standards will change as well. “It has gotten to be a more exciting area to be in,” he states.

What does it take to begin a new doctoral program at the university?
“It is a time-intensive process. You have to have faculty buy-in. Without faculty buy-in, no chair should go forward. I had good strong faculty buy-in. The faculty felt we had to add the doctoral program. We could no longer meet the needs of the audiology students just with a master’s degree,” states Dr. Guilford. He had the support of then dean, Dr. Stamps. Then the faculty began to do a feasibility study. He knew that in 2007 the new standards for audiology were going to be mandated. “So we would either close up shop since the master’s degree would no longer be an appropriate entry-level degree or we would go forward. So I had that as an impetus behind it. We did questionnaires all over the state and nation trying to find out who would be interested in the program. We mapped out our curriculum,” states Dr. Guilford.

The audiology doctoral program begins
The doctoral program was implemented about four years ago. The Board of Regents had to approve the program. Some external reviewers said the department could not go forward because the audiology equipment would be obsolete very soon. They had to get a pledge of support for upgrading the equipment. Also, at the time, the department was starting the building process of a new building. He knew they would have a percentage
of that money allocated for equipment and furniture. Dr. Guilford was able to tell the reviewers that money for new and upgraded equipment was available. They were able to proceed with the plans. Dr. Guilford states that now the department has state of the art equipment.

**Who approved the Ph.D. program in the Department of Communication Sciences and Disorders?**
The last board of regents meeting was held on the USF campus, and the last doctoral program they approved was USF’s doctoral program in Communication Sciences and Disorders.

**How has the number of students in the Department of Communication Sciences and Disorders changed over the years and why?**
“It has changed tremendously in our department. In the field of speech language pathology, the passage of IDEA occurred. This opened the public schools to be major employers of speech language pathologists. Services were now to be provided to all children with special education needs in the least restrictive environment. That meant you could not keep putting the children out in centers. Now children were to be in regular educational classrooms. In 1977, with the passage of IDEA, the demand for speech language pathologists greatly increased. The schools still don’t have enough speech language pathologists. The change in public education law dramatically changed the field of speech language pathology in the late ‘70s. The change in state laws in the ‘80s now allowing audiologists to dispense under our license as audiologists dramatically increased the number of students who wanted to get into audiology because the salary base increased and there was also an increase in the need for the consumer to have a better educated provider of services,” Dr. Guilford states. He says the department has always had a good student body, but in the 1970s the number of students in the department greatly increased.

**The Department of Communication Sciences and Disorders faces a faculty shortage**
“We are about to face a real critical shortage of faculty. Most faculty members are in their mid fifties. Many are in their sixties. We have not had students coming in to Ph.D. programs who want to remain in academia. Academic salaries have not kept pace with the professional salaries in hospitals, VA hospitals, and private practices. We don’t have the number of students coming in who seem to be dedicated to the academic process or to research. This is not just at USF. It is nationwide,” he says.

**When the department became part of the College of Arts and Sciences was there resistance among the faculty in the department?**
“Change is a very difficult thing. There was some fear. Will they know our mission? Will we be central to their mission? I said, well, it is my belief to educate the dean’s office to what we do, and to force the centrality of our department in the College of Arts and Sciences,” he states. Dr. Guilford says he had known the dean at the time, Dr. Stamps, for a long time. Dr. Guilford simply made it his task to call him, and see him, to bring him over to show him the department’s strengths and blemishes. “I think those
fears quickly dissipated. Change is never easy for so many faculty members no matter what we do,” he says.

When and why did Dr. Guilford go from being an assistant professor to the chair of the department?
The teaching aspect for him was not difficult since he had experience at previous institutions. Three years after arriving at USF, he was promoted to associate professor and tenured. He was then promoted to professor. When the chair of the department retired, Dr. Guilford was asked to be the chair. Dr. Guilford felt that looking outside of the department for a chair was best. They did in 1987. It was not a good match for the department. The dean and the faculty asked Dr. Guilford if he would agree to be elected as chair. He took over as chair in 1990. He says since he had time in the department and did not become chair upon arriving at USF, the transition was easier for everyone. Also, Dr. Guilford says he felt better about taking the position since the department had tried to hire someone outside of the department.

As chair what is Dr. Guilford most proud of that he helped to initiate?
The department just opened a new building. He was involved in the whole building process for ten years. Dr. Guilford says building a new building at a state university requires an enormous amount of time. Dr. Guilford says he has always been interested in design, and people sometimes say he is a frustrated architect. The department had to put in words all the things that they wanted the building to have, and describe the functions of all the rooms. He is very proud that they have a $26.2 million building on campus. “It is truly a state of the art for our department and for the department of psychology. I am also proud of the faculty growth that we have had, from ten to thirty-four faculty members. We have strong research minds now. And to have young faculty members who are very excited about the research process and the teaching process is great,” he states.

How did USF differ from the other institutions where Dr. Guilford had been (Cal State and the University of Michigan)?
“The University of Michigan was a highly ranked research institution. It was clear that your primary focus was to be research. That is why I felt too bogged down. It was a highly structured research institution. Cal Sate, at the time, was a teaching institution. You had very high teaching loads. You always taught three to four classes a term. There was no time for research. USF was just coming in to its own. Research was important, but you really had to teach. It was clear that teaching was one of USF’s missions. USF has transitioned very dramatically in the past years that I’ve been here. The mission has moved clearly into a research focus. We have not lost our focus on teaching. We will always be involved with teaching. But, I think the University has realized that research is what moves you forward on a national and international level,” states Dr. Guilford.

What is the department faculty like?
With support of the dean and provost, the department has two different types of faculty: clinical and academic. He hires one group who either holds master’s degrees, Ph.D.’s, or educational specialists degrees. This group is hired on non-tenure earning instructor
lines. They are twelve-month faculty and their full time assignments are clinical instruction of the students in the doctoral program of audiology, or in the master’s speech pathology program. The other group is an academic faculty. They hold Ph.D.’s, and they are on tenure earning lines. They are given teaching and research assignments. His department runs the largest speech language and hearing program in the Tampa Bay area on the USF campus. The department sees over 300 clients a week through their facility. They are a major community-based department. They have received community initiated grants.

“We have a great faculty. They are very dedicated to the university. We have the people that have been here for a number of years, and then we also have new faculty members,” he says.

*What are the facilities like in the department’s new building?*

The department occupies four floors of the Psychology and Communication Sciences and Disorders building. The first and second floors are devoted to a clinical program. All the rooms on the first and second floors are observable and are on closed circuit television. Dr. Guilford found a donor while they were erecting the building. Dr. Guilford was able to add two additions to the building before it was finished. One of the additions is a branch of the United Cerebral Palsy Center. The center provides physical and occupational therapy and speech language services. The center’s emphasis is birth to three years. All of the department’s students can do rotations through that facility at no cost to the department. The other addition is a branch of the VA hospital, which has a small program of audiologists. “It has been a tremendous boom to have these two branches added because it is almost like adding new faculty,” he states. Dr. Guilford ultimately does not control their assignments.

*Who is coming from the community to the department for help and assistance?*

They see clients from all over the Tampa Bay area for hearing aid fitting and cochlear implant work. They work with individuals in the community from as young as eighteen months to senior citizens. They work with children who are at risk for communication disorders or have known risk factors. They run three preschool programs. In April of 2003, the department dedicated the playground they built. They had donors and grants to help build the playground. The department often uses the playground for educational purposes with children.

*Research will be done on the playground*

Dr. Bowers will be doing research on the playground. People with copular implants cannot slide down slides because when they slide down, the plastic generates static electricity, which would mess up the copular implants. Dr. Bowers will be working with the department to experiment with sprays that can be put on the slides or copper strips that can be put on the slides to dissipate the static electricity.

*Are there students or faculty in the department who are hearing impaired?*

They have a number of students and faculty who have significant hearing loss. He has some faculty who are deaf. One of the roles of the department central to the university is
that the department teaches American Sign Language classes. Many of the departments on campus will allow American Sign Language to be used as meeting the exiting requirements for the language courses. The department offers from twenty-six to thirty sections of American Sign Language a semester. He employs two full time deaf faculty members to teach in the sign language classes. They also employ six to eight part time adjunct faculty members who are deaf and who teach the sign language classes. They have several students who have significant hearing loss and who are in the audiology program. Also, there are two faculty members in the audiology program who wear hearing aids and have significant hearing loss.

Are there students with other disabilities in the department?
“We have students who enter the speech language pathology program who have other disabilities. They have physical handicapping conditions and learning disabilities. We have some students in the speech pathology program who have extremely limited vision,” he states.

Dr. Guilford’s last words that he would like to leave behind
Dr. Guilford says, “Believe in USF. It is a very good place to be.”

End of Interview