

Directions in Optometric Education

In the previous Think Tank, Ken Seger, OD, MSc, FAAO, and Michael J. Giese, OD, PhD, wrote about what they consider to be some of the most important questions facing optometric education.¹ What kind of faculty members are best-suited to meet the needs of an ever-changing profession? From where should the schools and colleges get these faculty members? Whose responsibility is it to train faculty for the future? What makes a good composite faculty? Would it be beneficial to expand the definition of vision science to include areas such as molecular biology, microbiology, pharmacology, immunology or any other “ology” relevant to the profession? Do the schools and colleges need faculty members with advanced degrees?

Optometric Educators Respond

Jamie Althoff, OD
Assistant Professor
Nova Southeastern University
College of Optometry

First, I am not convinced that an optometry school’s curriculum should contain more emphasis in areas that are peripherally related to optometry. Undoubtedly, anyone who works in health care will benefit from more knowledge of microbiology, immunology, psychology, etc. However, it is not feasible for all healthcare professionals to have in-depth knowledge of every healthcare subject, which is precisely why we have separate professions and even specializations within these professions. It may be more feasible to let our optometry students focus on subjects that are closely related to the visual system, and give them enough knowledge of other fields so they know when and from where to seek more information. Perhaps a deeper study of many of these “ologies” belongs not in a standard optometry curriculum, but rather afterward, when the optometrist begins to develop a more specific area of interest.

Second, I can offer my personal perspective as a faculty member who was hired as a “newly minted residency-trained OD” less than five years ago. I recently began teaching Geometric

and Physical Optics lectures and labs. Although I do not hold an advanced degree in optics, I do feel that my residency training and strong interest in the subject have been sufficient in allowing me to teach effectively. Also, the fact that I am a practicing optometrist allows me to emphasize clinically relevant concepts with credible and practical examples. I have begun coursework toward an advanced degree; however, it is not because I think it is necessary for teaching the class successfully. Rather, working toward another degree simply goes hand-in-hand with my strong interest in and enthusiasm for optics. In other words, I believe it is the enthusiasm that matters, not necessarily the degree.

As my research interests begin to take shape, I do look to our non-OD PhD faculty for inspiration and support. While I can say the same regarding many other senior faculty members without advanced degrees, I do think that PhDs are good for the program because they provide depth and expertise in certain subjects and can help less senior faculty who are interested in further study or research. I would not expect that all PhDs at optometry colleges would also be ODs because, again, specializing in one area might come at the cost of an in-depth knowledge of another area, in this case optometry.

I believe that in order for this system of hiring faculty directly out of residency to produce a “well-educated clinical professorate,” we need to look for evidence of certain traits in potential faculty. Some that come to mind are an innate desire to always improve and move forward, a curious nature, a tendency to become stimulated in response to challenges, and an enjoyment of contributing to the success of others. If we hire faculty with traits such as these and help them to do what they are most interested in, I would expect a natural and gradual progression from newly minted, to relatively experienced, to mentor.

Reference

1. Seger K, Giese MJ. Directions in optometric education. *Optometric Education*. 2013 Winter-Spring;38(2):48-49.

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