

Forum / Tribune

A Comparison of the Organizational Frameworks of Canadian and American University Continuing Education Units

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ABSTRACT

In 2006, a study involving institutional members of the Canadian Association of University Continuing Education (CAUCE) was conducted by the CAUCE Information and Research Committee working in collaboration with the Research Committee of the Association of Continuing Higher Education (ACHE). The survey had been previously completed by institutional members belonging to ACHE in the United States.

This paper describes the survey findings and offers possible explanations of important differences related to respondent profile, type of institution by funding, and the extent of credit programming offered by the responding

RÉSUMÉ

En 2006, une étude où participèrent les membres institutionnels de l'Association canadienne de l'éducation permanente universitaire (ACÉPU) fut entreprise par le Comité des informations et de recherche de l'ACÉPU en collaboration avec le Comité de recherche de l'Association of Continuing Higher Education (ACHE (association de l'éducation permanente)). Les membres institutionnels de l'ACHE aux États-Unis avaient complété antérieurement ce même sondage.

Dans cet article, les auteurs décrivent les résultats du sondage et offrent des explications possibles pour les différences importantes se rapportant au profil du répondant, au type d'institution par

institutions. Differences related to learning modalities are also discussed. Further joint surveys involving CAUCE and ACHE members as well as international research initiatives sponsored by the two organizations are recommended.

subventionnement, et à la gamme de programmation accréditée offerte par les institutions répondantes. Ils y discutent aussi les différences se rapportant aux modalités d'apprentissage. Ils recommandent l'entreprise à l'avenir de sondages joints où les membres de l'ACEPU et de l'ACHE participent ainsi que des initiatives de recherche internationale parrainées par les deux organismes.

INTRODUCTION

In 2006, the Information and Research Committee of the Canadian Association of University Continuing Education (CAUCE), working in collaboration with the Research Committee of the Association of Continuing Higher Education (ACHE), conducted a study of its institutional members. Using Web-based survey methods, the study examined organizational dynamics within the continuing-education sector of Canadian universities that are also members of CAUCE. The survey was previously completed by institutional members belonging to ACHE in the United States. This article outlines the descriptive findings of the study, based on the administration and analysis of the two questionnaires, noting, where appropriate, key similarities and differences.

ORGANIZATIONAL CONTEXTS AND RELEVANT HISTORICAL BACKGROUND

Continuing education occurs in a wide variety of forms throughout the infrastructure of workplace and educational institutions. In Canada, one of the most important bodies in the promotion and support of university-level continuing education is CAUCE. Across the border in the United States, ACHE is committed to many of the same goals and principles.

CAUCE: Brief History and Mandate

In 1954, the directors of extension departments and summer schools at several Canadian universities formed an association to promote their shared interests. Coincidental with increasing membership, new demands for adult learning, and different institutional responses, the Canadian Association of

Directors of Extension and Summer School (CADESS) expanded its activities over the next two decades. In 1974, CAUCE was formed.

To achieve its mission, CAUCE not only fosters professionalism in program development, management, and administration but is also committed to the stimulation and discovery of creative ways of meeting the learning needs of adults in a climate of constant change. CAUCE likewise works to strengthen the position of its members within their institutional settings and society at large. To accomplish these goals, the association:

- promotes activities aimed at fostering a greater role for universities in responding to Canada's needs for training and retraining
- acts as an advocate in forums affecting educational policy-making
- sponsors research aimed at applying theoretical and empirical analysis to improve professional practice in continuing education and supporting the research goals of individual members as they pertain to continuing education in Canada
- recognizes, through awards and honours, outstanding contributions to the field of university continuing education
- offers conferences, professional development activities, publications, and communication networks designed to celebrate the successful efforts of individuals and institutions working in continuing education. (CAUCE, n.d.)

CAUCE members are active in a variety of forums that facilitate sharing information and research on the delivery of university continuing education in Canada.

ACHE: Brief History and Mandate

The Association of Continuing Higher Education (ACHE) evolved from the Association of University Evening Colleges (AUEC) into an organization dedicated to serving the entire spectrum of continuing higher education in the United States and internationally. Founded in 1939, AUEC's early mission focused on professional development, collegiality, and personal service for administrators and faculty in evening colleges. AUEC was founded on the belief that highly qualified evening-college professionals would lead to superior evening-collegiate programs. Those same goals continue to guide the mission of ACHE (Whelan, 2004). Currently, the rapid development in higher education, the expansion of continuing education, the growth in the number of adult students, the impact of technology, and the needs of the training and retraining sectors drive ACHE's commitment to serve the professional development and growth of its members. In addition to evening programs, ACHE influences all types of continuing higher education activities across the United States and elsewhere.

ACHE meets its goals by:

- emphasizing the importance of lifelong learning and excellence in continuing higher education
- providing for and supporting the personal, professional, and career development needs of its members
- encouraging research in the field of adult and continuing higher education
- producing publications in line with the mission, aims, and objectives of ACHE
- recognizing leadership and contributions to the field of continuing higher education by members and others
- assuring ACHE's long-term viability through prudent management of its assets and careful stewardship of its resources
- cooperating with other organizations and groups whenever possible in the achievement of ACHE's goals. (ACHE, n.d.)

The association has also sought to expand its research efforts and disseminate that information to members through its newsletters, website, and the *Journal of Continuing Higher Education*.

THE LITERATURE

CAUCE: Listening to Members

CAUCE has a long-standing tradition of listening to its members. Beginning in the late 1970s, it was evident that Canadian continuing educators required formal and comprehensive methods for gathering and sharing information about their practices. Thus, in 1985, a CAUCE-supported survey was developed by a committee of six respected CAUCE members, and the results of this survey were subsequently published by Michael Brooke and John Morris in the document entitled *Continuing Education in Canadian Universities: A Summary Report of Policies and Practices* (1987). A follow-up survey of CAUCE deans and directors conducted in 1989 revealed that a second questionnaire was warranted. As a result, in 1992, the Brooke and Morris survey was revised by Morris and Potter and again distributed to CAUCE institutional members. The findings of this second study were the basis of a report called *Continuing education policies and practices in Canadian universities: An overview* (Morris & Potter, 1996).

In 2006, the CAUCE Executive agreed to support an additional iteration of the policies and practices survey. Revised by Percival and Potter, the survey was mailed to member institutions in May 2006; the findings of this third survey were documented in the report *University Continuing Education in Canada: Policies and Practices of CAUCE Member Institutions* (Percival & Potter,

2007). Taken together, these three surveys represent the commitment of CAUCE leadership to learning about and from their members.

In addition to using the three surveys administered at important junctures in the history of Canadian university-level continuing education, CAUCE members have used other resources to share their needs, practices, and observations of trends in continuing higher education. For example, various CAUCE committees, including the Professional Development Committee (Archer & Wong, 1991; Thompson & Archer, 2003) and, most recently, the Information and Research Committee, have assumed leadership roles in consulting with CAUCE members through survey-based and other methods. The good will and hard work of the members of the Information and Research Committee as they collaborated with members of ACHE's Research Committee are evident in the survey findings reported in this article. Although there was some overlap between the most recent survey by Percival and Potter and the ACHE-CAUCE initiative, the two surveys differed in the areas they explored; for example, the Percival and Potter survey collected extensive administrative detail, while the ACHE-CAUCE study solicited data regarding perceptions in the areas of governance and influence.

ACHE: Listening to Members

In recent years, three association-wide surveys have been conducted, either by the Research Committee or the Executive Committee of ACHE. The most recent was the ACHE membership survey, which was open to all institutional and individual members from October through December 2006 and was reported to the membership in 2007 via the *Journal for Continuing Higher Education* and the ACHE website (Dougherty, 2007). That instrument focused primarily on the provision of services to members, their relative level of satisfaction with those services, and their interest in particular areas of inquiry related to continuing higher education. It also included requests for respondents' personal information: gender, race, age, highest degree earned, and years of professional experience.

In Fall 2005, the ACHE Research Committee completed its second survey in as many years. The sample included all institutional representatives likely to be in the position of dean, associate dean, or director. The questionnaire focused specifically on institutional dynamics and sought to identify the key concerns, expectations, and opportunities reported by these leaders.

This 2005 survey included a question aimed at determining the institutional representatives' perceptions about the place of their units on their campuses and their expectations for growth and opportunity in continuing higher education. Another objective was the gathering demographic information related to respondents. The survey had questions about the

organization of individual continuing education units, questions that asked for information on the titles of the leaders of those units, the functions they performed, and whether they were primarily involved in the delivery of credit and/or non-credit programming. This 2005 institutional-dynamics survey was adapted by CAUCE in order to conduct the analysis presented later in this article (Brown, Campbell, Dougherty, Penland, & Wilson, 2005).

Prior to the 2005 survey, the ACHE Research Committee had surveyed the membership as a whole about their interests in research on continuing higher education. The results revealed that ACHE members were overwhelmingly interested in research on program development (both online and face-to-face), marketing and demographics, and assessment of learning outcomes. Conducted in Fall 2004, this first survey also revealed that respondents were clearly interested in learning the results of research on continuing higher education; however, they were not necessarily interested in or, in most cases, not able to devote the time necessary for conducting their own research (Dougherty, Brown, Campbell, Wilson, & Penland, 2006).

THE STUDY

Participants and Methods

The CAUCE version of ACHE's organizational-dynamics survey was delivered as an online (web-based) survey to the senior administrative leaders at each CAUCE member institution. It remained open for completion for a three-week period during the month of September 2006. The link to the survey was distributed to the CAUCE representatives through the association's Secretariat as per the recommendation of the Information and Research Committee's Chair, who collaborated with the ACHE Research Committee throughout the initiative.

The survey included Likert-scale, forced-choice, and multiple-response items, as well as open-ended invitations for respondent comments. The instrument required respondents to consider issues related to organizational structures, dynamics, and the professional experiences of leaders in continuing education. All of the findings reported in this article are based on the perceptions of each institutional respondent. The survey invitation was sent to the chief administrator in the unit, but it is possible that the survey was completed by a designate.

The CAUCE data were compared to the data generated by the previous delivery of the same survey to institutional members of ACHE. Descriptive statistics were prepared for all questions answered by the two participating groups, and areas of noticeable similarities and differences were identified. The report of the findings considered five areas:

- Type of institution and general organizational framework of continuing education within the institution
- Autonomy and centralization practices
- Programming and learning modalities used to support these programs
- Perceptions related to the acceptance and influence of continuing education within the larger institution
- Levels of experience in continuing education

The response rates for completion of the surveys by the institutional members were 35.3% for ACHE ($n=115$) and 60% for CAUCE ($n=24$).

Findings

In this section, measures from the ACHE 2005 institutional-dynamics survey are reported, first, generally and, then, by comparison with the same measures reported in the CAUCE iteration of the survey. In addition, findings are typically reported in descending order, from higher percentages to lower percentages, and tables are used where appropriate.

Type of Institution and General Organizational Framework

Differences were reported in relation to the affiliation (public/private) of home institutions. When ACHE participants were asked about their affiliation, 61% of organizations reported being publicly funded, not-for-profit organizations, while 37% were privately funded, not-for-profit organizations. A relatively small percentage of ACHE participants (2%) identified their schools as proprietary, for-profit institutions. By comparison, 96% of CAUCE respondents indicated that their institutions were publicly funded, not-for-profit organizations, and 4% reported their schools as privately funded, not-for-profit institutions. These data reflect the representative differences between higher-education institutions in the two countries: there are more private, not-for-profit colleges/universities in the United States than in Canada, just as there are more institutions in the United States that offer only undergraduate programs.

Participating institutions were also asked to identify their school by highest degree/designation offered. As Table 1 indicates, ACHE participants reported greater diversity within granted academic designations, ranging from the doctoral level to two-year community college designations.

Table 1: Type of Institution by Highest Degree/Designation

Degree/Designation	ACHE	CAUCE
Community/two-year college	6%	0%
Four-year college (bachelor's only)	5%	0%
Four-year college/university (bachelor's/master's only)	41%	29%
University (including doctoral degrees)	42%	67%
Other	6%	0%

Note: Non-responses account for categories that do not equal 100%.

When asked about the title of the chief administrator for the continuing education unit, ACHE respondents manifested greater diversity among the choices provided. Of the CAUCE respondents, however, 25% chose "other," suggesting diversity in this category. Interestingly, although the two most popular choices were the same for the two groups (dean and director), dean was the dominant choice among ACHE respondents and director among CAUCE respondents. Table 2 presents these findings.

Table 2: Title of Chief Administrator of Unit

Title	ACHE	CAUCE
Vice-President	8%	0%
Vice-Provost	5%	0%
Dean	40%	29%
Director	30%	46%
Other	17%	25%

Reporting lines were considered in both the ACHE and CAUCE surveys. As Table 3 reveals, for each respondent group, there was variety in the reporting lines, although Vice-President was the most common choice for each group. Table 3 also indicates that 21% of the CAUCE continuing education units reported to some individual or office not specifically articulated in the list of possible responses, a result that may reveal some nominal difference between American and Canadian institutions in the titles used for chief academic officers.

Table 3: Reporting Lines

Reporting Line	ACHE	CAUCE
President	8%	4%
Vice-President	42%	54%
Provost	30%	12%
Vice-Provost	5%	0%
Dean	8%	9%
Other	7%	21%

Autonomy and Centralization Practices

When asked about perceived level of autonomy in their organizational unit, the participants' responses indicated that the two organizations appear to be more similar than different on this measure. Specifically, 51% of ACHE respondents and 52% of CAUCE respondents reported that their units were somewhat autonomous; 42% of ACHE respondents and 48% of CAUCE respondents indicated that their units were very autonomous; and 7% of ACHE respondents indicated that their units were not at all autonomous.

Centralization was considered from three perspectives:

- centralization of student services
- centralization of program development
- centralization of faculty hiring and development within the unit.

For each of these areas, respondents had four choices: "very centralized," "somewhat centralized," "somewhat distributed," or "very distributed." Tables 4 to 6 inclusive present the findings from the three areas. Although there was variation across the four possible choices for each of the three areas, ACHE and CAUCE institutions appear more similar than dissimilar on the measure of centralization of student services—59% of ACHE respondents and 58% of CAUCE respondents indicated that their student services were centralized (Table 4). As for the centralization of program-development services and of faculty hiring and development, differences emerged when categories were collapsed. In particular, 61% of ACHE respondents versus 84% of CAUCE respondents reported the centralization of program-development services (Table 5), while 56% of ACHE respondents versus 71% of CAUCE respondents reported the centralization of faculty hiring and development (Table 6).

Table 4: Centralization of Student Services

Centralization: Student Services	ACHE	CAUCE
Very centralized	29%	33%
Somewhat centralized	30%	25%
Somewhat distributed	23%	12%
Very distributed	18%	30%

Table 5: Centralization of Program Development Services

Centralization: Program Services	ACHE	CAUCE
Very centralized	31%	67%
Somewhat centralized	30%	17%
Somewhat distributed	18%	4%
Very distributed	21%	12%

Table 6: Centralization of Faculty Hiring and Development

Centralization: Hiring and Development	ACHE	CAUCE
Very centralized	30%	50%
Somewhat centralized	26%	21%
Somewhat distributed	10%	8%
Very distributed	34%	21%

When asked if the title of their unit had changed since its establishment, 64% of ACHE members and 70% of CAUCE members reported that the title had changed.

Programming and Learning Modalities

When asked to select all of the program types supported by their continuing education unit, the two respondent groups varied in what they reported. Most notably, as Table 7 indicates, CAUCE respondents were much less likely to offer programs leading to a degree.

Table 7: Programs Offered through Unit

Program Types	ACHE	CAUCE
Credit programs leading to a degree	73%	37%
Credit programs leading to a certificate	67%	70%
Summer credit courses for current and visiting students	53%	33%
Non-credit courses for professional development	86%	87%
Non-credit courses for personal development	62%	75%
Other	26%	29%

Similar variation existed with regard to learning modalities. Respondents were asked to indicate, from a list of choices, all of the modalities that they utilized; some of these choices reflected the more traditional tools of continuing education (such as classroom-based instruction both on and off campus), while others reflected more contemporary tools. Compared to CAUCE institutions, ACHE institutions were considerably more active in using off-campus classroom-based courses (91% vs. 75%) and video-conferencing/broadcasting (40% vs. 20%). Table 8 itemizes their responses.

Table 8: Modes of Delivery Used

Learning Modalities	ACHE	CAUCE
Classroom-based instruction on campus	90%	95%
Classroom-based instruction off campus	91%	75%
Video-conferencing and broadcasting	40%	20%
Web-based partial	79%	62%
Web-based full	79%	70%
Other	6%	16%

Perceptions of Acceptance and Influence of Continuing Education

Continuing education units in both organizations were more widely accepted by the administration than by faculties. As Table 9 indicates, 64% of ACHE respondents and 55% of CAUCE respondents reported that their units were “widely accepted” by their institution’s administration. In contrast, as noted in Table 10, just 33% of ACHE respondents and 14% of CAUCE respondents reported that their units were widely accepted by faculty. Further data on these kinds of acceptance are found in Tables 9 and 10.

Table 9: Acceptance of Unit by Administration

Level of Acceptance	ACHE	CAUCE
Widely accepted	64%	55%
Tolerated	34%	45%
Ignored	2%	0%
Disliked	0%	0%

Table 10: Acceptance of Unit by Faculty

Level of Acceptance	ACHE	CAUCE
Widely accepted	33%	14%
Tolerated	57%	59%
Ignored	7%	27%
Disliked	3%	0%

As for influence on governance structure, a greater proportion of ACHE respondents reported that their units had some or a significant level of influence at the institutional level (38% for ACHE vs. 18% for CAUCE). Table 11 presents the full range of responses.

Table 11: Influence on Governance

Level of Influence	ACHE	CAUCE
Significant	8%	9%
Somewhat	30%	9%
Very Little	45%	35%
Not at All	17%	48%

Levels of Experience in Continuing Education

Respondents from the two groups revealed some differences in their levels of continuing education experience in general, in their institutions, and in their current positions, as well as some differences in their level of education. Tables 12 and 13 present the relevant data.

Most noticeably, only 22% of ACHE respondents had 10 or fewer years of experience in continuing higher education, while 40% of CAUCE respondents reported 10 or fewer years of experience. On the other end of the career continuum, 56% of ACHE respondents versus 26% of CAUCE respondents had served over 20 years in the field (Table 12).

With respect to educational attainment, more ACHE respondents (61%) reported completing a PhD/EdD compared to CAUCE respondents, only 37% of whom held similar degrees (Table 13). Given the small number of respondents in the CAUCE survey, application of non-parametric tests such as chi-square to determine if differences between the two groups were statistically significant was not appropriate.

Table 12: Respondent’s Length of Time in Adult/Continuing Education

Length of Time	ACHE	CAUCE
1–5 years	12%	14%
6–10 years	10%	26%
11–15 years	6%	4%
16–20 years	16%	30%
21–25 years	31%	4%
More than 25 years	25%	22%

Table 13: Highest Degree Earned by Respondent

Degree	ACHE	CAUCE
PhD	37%	33%
EdD	24%	4%
MA/MS	27%	21%
BA/BS	4%	17%
Other	9%	25%

DISCUSSION

When considering the differences between CAUCE and ACHE respondents, three phenomena are particularly noteworthy: differences relative to respondent profile, the extent of credit programming offered by responding institutions, and the type of institution by funding. Differences related to learning modalities are also of interest.

Reflecting on respondent profile, the administrative leaders in ACHE institutions appear to have had more experience in continuing education and were more likely to hold terminal degrees compared to their CAUCE colleagues. The histories of institutionally based continuing education in the United States and Canada may explain this difference to some extent; for instance, the early work in continuing education by universities in Canada included more extension programs than university-level credit work.

However, this difference may also relate to the types of programs offered by the two groups. As an example, the reported offering of full-credit programs leading to a degree was higher among the ACHE group than the CAUCE group. When credit programs are the mainstay of a continuing education unit, it follows that the leader of the unit may be a dean rather than a director. Simultaneously, many continuing education units at Canadian universities do offer credit courses. The study of policies and practices in continuing education among CAUCE institutional members by Percival and Potter (2007) suggested that 65.2% of institutions represented in that study offered degree-credit courses (p. 27). Given the findings of the Percival and Potter study, the CAUCE participants' responses about credit programming in the ACHE-CAUCE study may not accurately reflect the credit courses being delivered by Canadian-based continuing education units. Since the question about programs did not include an option to identify credit courses except as "elective credits in summer programs," it is probable that not all credit offerings were captured in the CAUCE data. At best, the data suggest that CAUCE continuing education units offer, by percentage, fewer full-credit programs than ACHE units.

Funding differences between the two groups in the ACHE-CAUCE initiative also require consideration. In particular, 37% of ACHE respondents described their organizations as privately funded, versus only 4% of CAUCE respondents. Although the notion of isolating publicly supported United States institutions and including only those in the analysis was considered, comparing only publicly funded continuing education institutions would potentially misrepresent the scope and practice of continuing education in the United States. At the same time, because the goal of the current study was to compare the activities and characteristics of post-secondary institutions that belong to the two organizations, it is simply noted that the United States has a large number of privately funded universities compared to Canada.

In terms of the modalities associated with the delivery of continuing education, the study data revealed that educational technologies, including Web-enhanced learning, are playing an ever-increasing role in continuing education. Additionally, broadcasting and video-conferencing are used more extensively in the United States than in Canada, perhaps suggesting an area of upcoming growth in Canada. Percival and Potter (2007) also recognized the “presence and importance of distance education in all aspects” (p. 61) of contemporary continuing education by including a separate section on this topic in their study.

A further point of comparison related to reporting structure should be noted in relation to the ACHE-CAUCE study and the Percival and Potter (2007) study. Interestingly, over 80% of respondents in the Percival and Potter study identified that their continuing education units reported to the Vice-President (p. 8), while only 54% of respondents in the ACHE-CAUCE survey did so. This irregularity may be tied to the knowledge base of the respondents; it may also be a limitation of the survey’s reporting structure, as suggested in the next section.

Limitations

This article draws comparisons between CAUCE and ACHE respondents based on descriptive information. It does not include tests of independence or correlations comparing differences between CAUCE and ACHE as groups or within either the CAUCE or ACHE populations. While we agree that a number of statistical tests between and within CAUCE and ACHE are possible, the number of respondents in each group, CAUCE in particular, raises some questions regarding the application of tests of significance. It is also clear that differences exist between the two groups that can, and perhaps should, be explored via statistical testing.

By way of example, one interesting difference between CAUCE and ACHE respondents emerges when testing their perceptions of opinion of the administration and faculty at their institutions concerning their continuing education units. As Tables 14 through 17 indicate, CAUCE and ACHE members manifest statistically significant differences with respect to perception of administration’s acceptance of their programs at their home institutions. However, when asked about their faculties’ perceptions, the same differences are not evident. Most importantly, the finding of a statistically significant difference in perceptions of administrators’ acceptance of CE units is itself suspect, as the sample size for CAUCE respondents fails to meet some of the basic assumptions of Chi-Squared tests of independence. A larger CAUCE sample size would make such comparisons more meaningful.

Table 14: Administration's Perception of CE Units

	ACHE	CAUCE	Total
Ignored	2	6	8
Tolerated	39	13	52
Widely Accepted	72	3	75
Total	113	22	135

Table 15: Chi-Square Test of Independence of Administration's Perception of CE Units

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	31.412*	2	.000
Likelihood ratio	27.357	2	.000
N of valid cases	135		

* 1 cell (16.7%) has an expected count less than 5. The minimum expected count is 1.30.

Table 16: Faculty's Perception of CE Units

	ACHE	CAUCE	Total
Ignored	2	0	2
Tolerated	39	10	49
Widely Accepted	72	12	84
Total	113	22	135

Table 17: Chi-Square Test of Independence of Faculty's Perception of CE Units

	Value	DF	Asymp.Sig. (2-sided)
Pearson Chi-Square	1.246*	2	.536
Likelihood Ratio	1.540	2	.463
N of Valid Cases	135		

* 2 cells (33.3%) have expected count less than 5. The minimum expected count is .33.

As with any study that uses self-reported data, one limitation of the current study stems from the inability to determine whether or not the information shared is completely accurate. At best, the data reported represents, for each institution, one person's perceptions, although we can presume some level of expertise given the respondents' status as CAUCE institutional representatives. At the same time, the utilization of forced choice and Likert scale responses limits the capacity for respondents to share their own expertise in continuing higher education. Finally, the ACHE iteration of the study is limited by the low response rate by ACHE institutional members (35%).

RECOMMENDATIONS AND IMPLICATIONS FOR THE FUTURE

Given the relative ease of replicating the original ACHE survey for CAUCE members, further joint surveys by the organizations are recommended. In addition, both associations may wish to consider partnering with continuing education associations in other countries to replicate their efforts and, thus, facilitate the comparative international study of continuing education.

Clearly, CAUCE and ACHE members will benefit from joint educational and research work relating to the new learning modalities of continuing education, such as online (Internet) learning, webcasting, and video-conferencing. Continuing education units that have changed their organizational configuration—for example, from a centralized to a decentralized model—will benefit from discussions with colleagues who have experienced similar changes.

Administering the survey internationally will also benefit Canadian and American continuing education units and practitioners. Although some strong similarities may exist naturally between Canada and the United States in the profession of continuing education, these same similarities may not exist in other countries. Moreover, as the lines between distance and continuing education continue to blur with the ongoing emergence of technology-enabled communication and educational tools, Canadian and American leaders in continuing education will need to know how continuing education is conducted throughout the world. It is also the case that Canada and the United States stand to benefit from emerging international continuing-education markets. Although, historically, continuing education in Canada and the United States has focused mainly on serving regionally and nationally situated learners, the market is expanding. As a result, the face of continuing education may need to change in order to position itself for new times.

REFERENCES

- Association of Continuing Higher Education (ACHE). (n.d.). *About ACHE: Institutional members, history, mission and goals*. Retrieved June 23, 2008, from <http://www.acheinc.org/>
- Archer, W., & Wong, A. (1991). Professional development needs of CAUCE members: Some highlights from a recent survey. *Canadian Journal of University Continuing Education*, 17(1), 39–44.
- Brooke, W. M., & Morris, J. F. (1987). *Continuing education in Canadian universities: A summary report of policies and practices*. Ottawa, ON: Canadian Association for University Continuing Education.
- Brown, P., Campbell, R. W., Dougherty, B. C., Penland, L. C., & Wilson, E. F. (2005, October). *Leadership and authority in continuing education: A retrospective look at changing roles and responsibilities*. Paper presented at the Designing Our Destiny: Creative Responses to Change in Continuing Higher Education conference, Association for Continuing Higher Education, Madison, WI.
- Canadian Association of University Continuing Education (CAUCE). (n.d.). *About CAUCE*. Retrieved June 23, 2008, from <http://cauce-aepuc.ca/>
- Dougherty, B. C. (2007). The 2006 ACHE membership survey: Understanding what members value. *Journal of Continuing Higher Education*, 55(2), 32–36.
- Dougherty, B. C., Brown, P. A., Campbell, R. W., Wilson, E. F., & Penland, L. (2006). Evaluating the Association for Continuing Higher Education members' interest in research: A report from the Research Committee. *Journal of Continuing Higher Education*, 54(2), 49–52.
- Morris, J. F., & Potter, J. (1996). *Continuing education policies and practices in Canadian universities: An overview*. Ottawa, ON: Canadian Association for University Continuing Education.
- Percival, A., & Potter, J. (2007). *University continuing education in Canada: Policies and practices of CAUCE member institutions*. Saskatoon, SK: Canadian Association for University Continuing Education.
- Thompson, G., & Archer, W. (2003). A survey of the professional development needs and interests of CAUCE members. *Canadian Journal of University Continuing Education*, 19(3), 73–84.
- Whelan, W. L. (2004). A history of continuing education. *Journal of Continuing Higher Education*, 52(1), 2–10.

BIOGRAPHIES

This paper was prepared by an inter-organizational team of colleagues from CAUCE and ACHE: Lorraine Carter, Chris Dougherty, Edna Wilson, and Ray Campbell.

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Ray Campbell est directeur du Lifelong Learning and Professional Development (éducation continue et développement professionnel) à Kutztown University à Kutztown dans l'état de la Pennsylvanie. Campbell est un membre actif de l'ACHE depuis 1984, qui comprend son terme au conseil de direction.

The team expresses appreciation to the memberships and executives of both organizations for their participation in this important initiative.

Cette équipe exprime son appréciation aux membres et aux conseils de direction des deux organismes pour leur participation à cette initiative importante.