A Pathway to Protection: The Need for Child Life Academic Accreditation

Introduction

Over the past two decades, the child life profession has demonstrated substantial clinical growth (Romito et al., 2025), scholarly expansion (Boles et al., 2021; Turner & Boles, 2021), and institutional recognition. The child life profession is now supported by nearly 600 clinical programs worldwide, more than 6,400 Certified Child Life Specialists (CCLS) across the globe, and 40 known academic programs across the United States and Canada (Child Life Academic Society [CLAS], 2025; Wittenberg Camp et al., 2023). This expansion reflects not just the profession's growing workforce, but also its critical role in promoting the psychosocial well-being of pediatric patients and families.

Unlike comparable healthcare professions, child life currently lacks a formal academic accreditation system. Accreditation is an evidence-based mechanism that promotes transparency and protects students by delineating essential standards that ensure quality, consistency, and accountability across accredited academic programs (Council for Higher Education Accreditation [CHEA], 2024; Romanowski & Karkouti, 2024). Implementing accreditation for child life academic programs is a necessary next step to safeguard students, patients, and families while sustaining the integrity and advancement of the profession.

The Gap: Variability in Child Life Academic Preparation

With the growth and expansion of the profession comes imminent responsibility to ensure quality across all domains of child life education, clinical training, and certification. It has been documented that academic programs already differ in how they prepare students for internship expectations, particularly in how knowledge, skills, and abilities related to internship readiness are emphasized (Wittenberg Camp et al., 2023). Clinical supervisors and internship sites have reportedly encountered differences in student readiness, particularly with respect to clinical reasoning, application of developmental theory, and professional communication (Sisk et al., 2023). These variabilities, including observed discordance between academic and clinical perceptions of internship readiness, contribute to challenges in the training pipeline and workforce sustainability (Wittenberg Camp et al., 2023). Without standardized expectations for curriculum, instruction, and assessment, inconsistency in professional preparation is an expected and well-documented consequence (Frenk et al., 2010).

The Precedent: Accreditation Across Comparable Healthcare Professions

Systematic benchmarking conducted by the Child Life Academic Society (2026) examined accreditation programs and processes across twelve healthcare professions: spiritual care/chaplaincy, nutrition and dietetics, clinical psychology, marriage and family therapy, occupational therapy, physical therapy, music therapy, social work, nursing, recreational therapy, speech and language pathology, and child life. Synthesis of findings yielded three consistent themes across professions including 1) field-specific focus and governed by peer review, 2) quality assurance of academic programs and clinical experiences, and 3) integration with certification and/or licensure.

Most significantly, graduation from an accredited program is a required step toward credentialing in all professions examined - with child life being the sole exception (CLAS, 2026). These professions all rely on accredited academic programs to coordinate and oversee clinical placements, ensuring all students have equitable access to supervised, standards-aligned experiences required for entry into practice (CLAS, 2026). In contrast, child life students often independently identify and compete for internship opportunities without the same level of programmatic coordination or guaranteed access (Boles et al., 2024; Boles et al., 2025). This structural gap contributes to inequities in acquiring high-quality clinical training and highlights the need for an integrated, accreditation-driven approach.

Evidence-Based Educational Standards as a Foundation for Accreditation

Effective academic accreditation programs do more than standardize institutional practices; they add value by fostering continuous quality improvement in academic organizations and enhancing educational outcomes (Acevedo-De-los-Rios & Rondinel-Oviedo, 2021; Alharbi, 2024; Blouin, 2018). Across all healthcare disciplines, accreditation standards are grounded in evidence-based educational practices known to produce competent, practice-ready professionals (Alkhenizan & Shaw, 2011; Eaton, 2016; Frank et al., 2020). Three educational practices that are particularly well-documented as indicators of high-quality education include competency-based education (CBE), intentional course sequencing and scaffolding, and experiential learning. Competency-based education, as compared to time based, course-based, content-based, or apprenticeship models, has been shown to improve patient outcomes, decrease student stress, and improve clinical skills in several professional pathways (Imanipour et al., 2021; Jarrett et al., 2024; Tan et al., 2018). Intentionally sequenced curricula - or moving students from foundational knowledge to applied clinical reasoning in a progressive manner - have been found to enhance knowledge retention, clinical confidence, and professional identity formation (Falk et al., 2016; Lin et al., 2022; Masava et al., 2022). Experiential learning, embedded in accredited programs as

practicums, simulations, service-learning courses, and internships, bridge the gap between academic preparation and clinical practice in ways that traditional classroom instruction cannot (Burch et al., 2019; Duchatelet et al., 2024; Frenk et al., 2010). An academic accreditation program for the child life profession can move preparation beyond isolated course completion toward a developmental framework centered on measurable competencies, progressive skill acquisition, and authentic clinical application.

Call to Action

The absence of a rigorous, evidence-based, and formal academic accreditation program in child life is no longer a gap the profession can afford to leave unaddressed. Accreditation would establish clear curricular and competency expectations, ensure alignment with certification requirements, promote excellence and equity in student preparation, and reinforce the profession's standing within the broader healthcare community. The Child Life Academic Society, established by full-time CCLS academic faculty and uniquely positioned to lead this effort, is equipped to develop a field-specific, peer-driven accreditation system grounded in the precedent set by comparable healthcare professions and decades of research. Academic accreditation is the next necessary step in securing the future of child life, for practitioners, students, and most importantly, all children and families served.

References

Acevedo-De-los-Ríos, A., & Rondinel-Oviedo, D. R. (2021). Impact, added value and relevance of an accreditation process on quality assurance in architectural higher education. *Quality in Higher Education, 28*(2), 186–204. https://doi.org/10.1080/13538322.2021.1977482

Alharbi, N. S. (2024). Evaluating competency-based medical education: A systematized review of current practices. *BMC Medical Education, 24*, 612.

Alkhenizan, A., & Shaw, C. (2011). Impact of accreditation on the quality of healthcare services: A systematic review of the literature. *Annals of Saudi Medicine, 31*(4), 407–416. https://doi.org/10.4103/0256-4947.83204

Allouch, S., Ali, R. M., Al-Wattary, N., Nomikos, M., & Abu-Hijleh, M. F. (2024). Tools for measuring curriculum integration in health professions' education: A systematic review. *BMC Medical Education, 24*(1), 635. https://doi.org/10.1186/s12909-024-05618-5

Accreditation of medical education programs: Moving from student outcomes to continuous quality improvement measures. *Academic Medicine, 93*(3), 377–383.

Boles, J., Daniels, S., Burns-Nader, S., Hammond, B., & Wilkins, S. (2024). "Being a child life student has definitely been difficult": A mixed methods study exploring the experiences of emerging professionals. *The Journal of Child Life: Psychosocial Theory and Practice, 5*(1). https://doi.org/10.55591/001c.91153

Boles, J.C., Fraser, C., Bennett, K., Jones, M., Dunbar, J., Woodburn, A., Gill, M., Duplechain, A., Munn, E., & Hoskins, K. (2020, January). The value of Certified Child Life Specialists: Direct and downstream optimization of pediatric patient and family outcomes (Full report). Retrieved from: https://www.childlife.org/docs/default-source/the-child-life-profession/value-of-cclss-full-report.pdf?sfvrsn=5e238d4d_2

Boles, J., Keller, B., Maher, G., Jones, K., & Murphy, L. (2025). An examination of factors associated with child life internship acquisition. *The Journal of Child Life: Psychosocial Theory and Practice, 6*(1). https://doi.org/10.55591/001c.142176

Burch, G. F., Giambatista, R., Batchelor, J. H., Burch, J. J., Hoover, J. D., & Heller, N. A. (2019). A meta-analysis of the relationship between experiential learning and learning outcomes. *Decision Sciences Journal of Innovative Education, 17*(3), 239–273. https://doi.org/10.1111/dsji.12188

Child Life Academic Society. (2025). Child life academic programs in North America (Unpublished internal report).

Child Life Academic Society. (2026). Summary of benchmarking accreditation logistics (Unpublished internal report).

Council for Higher Education Accreditation. (2024). What is accreditation? https://www.chea.org/what-is-accreditation

Duchatelet, D., Cornelissen, F., & Volman, M. (2024). Features of experiential learning environments in relation to generic learning outcomes in higher education: A scoping review. *Journal of Experiential Education, 47*(3), 400–423. https://doi.org/10.1177/10538259231211537

Eaton, J. S. (2016). Accreditation and competency-based education. *The Journal of Competency-Based Education, 1*(1), 2–8. https://doi.org/10.1002/cbe2.1006

Falk, K., Falk, H., & Jakobsson Ung, E. (2016). When practice precedes theory—A mixed methods evaluation of students' learning experiences in an undergraduate study program in nursing. *Nurse Education in Practice, 16*(1), 14–19. https://doi.org/10.1016/j.nepr.2015.05.010

Frank, J. R., Taber, S., van Zanten, M., Scheele, F., & Blouin, D. (2020). The role of accreditation in 21st century health professions education: Report of an International Consensus Group. *BMC Medical Education, 20*(Suppl. 1), 305.

Frenk, J., Chen, L., Bhutta, Z. A., Cohen, J., Crisp, N., Evans, T., Fineberg, H., Garcia, P., Ke, Y., Kelley, P., Kistnasamy, B., Meleis, A., Naylor, D., Pablos-Mendez, A., Reddy, S., Scrimshaw, S., Sepulveda, J., Serwadda, D., & Zurayk, H. (2010). Health professionals for a new century: Transforming education to strengthen health systems in an interdependent world. *The Lancet, 376*(9756), 1923–1958. https://doi.org/10.1016/S0140-6736(10)61854-5

Imanipour, M., Ebadi, A., Ziarat, H. M., & Mohammadi, M. M. (2021). The effect of competency-based education on clinical performance of health care providers: A systematic review and meta-analysis. *International Journal of Nursing Practice, 28*(1), 1–18. https://doi.org/10.1111/ijn.13003

Jarrett, J., Elmes, A., Keller, E., Stowe, C., & Daugherty, K. (2024). Evaluating the strengths and barriers of competency-based education in the health professions. *American Journal of Pharmaceutical Education, 88*(6), 1–10. https://doi.org/10.1016/j.ajpe.2024.100709

Lin, W. T., Yu, C. Y., Chou, F. H., Lin, S. Y., & Lee, B. O. (2022). The effects of sequencing strategies in teaching methods on nursing students' knowledge acquisition and knowledge retention. *Healthcare, 10*(3), 430. https://doi.org/10.3390/healthcare10030430

Masava, B., Nyoni, C. N., & Botma, Y. (2022). Scaffolding in health sciences education programmes: An integrative review. *Medical Science Educator, 33*(1), 255–273. https://doi.org/10.1007/s40670-022-01691-x

Romanowski, M. H., & Karkouti, I. M. (2024). United States accreditation in higher education: Does it dilute academic freedom? *Quality in Higher Education, 30*(1), 97–111. https://doi.org/10.1080/13538322.2022.2127165

Romito, B., Jewell, J., Jackson, M., & AAP Committee on Hospital Care. (2021). Child life services. *Pediatrics*, *147*(1), e2020040261. https://doi.org/10.1542/peds.2020-040261

Sisk, C., Cantrell, K., & Wittenberg Camp, B. (2023). Child life internship readiness: Perspectives of child life training coordinators and supervisors. *The Journal of Child Life: Psychosocial Theory and Practice, 4*(1). https://doi.org/10.55591/001c.74170

Tan, K., Chan, C. M., Subramaniam, P., & Ping, W. L. (2018). The effectiveness of outcome-based education on the competencies of nursing students: A systematic review. *Nurse Education Today, 64*, 180–189. https://doi.org/10.1016/j.nedt.2017.12.030

Wittenberg Camp, B., Cantrell, K., & Sisk, C. (2023). Child life internship readiness: Perspectives of child life academics. *The Journal of Child Life: Psychosocial Theory and Practice, 4*(2). https://doi.org/10.55591/001c.87911