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Helping to Break the Communication Barrier

by Maggie Smith

(English 103)

The Assignment: Choose a profession that you both want to pursue or find interesting, and research it.

Have you ever known anyone who seems to have trouble communicating effectively? What about someone who has lost motor and oral functions due to a stroke or brain injury? According to Patricia Hicks, author of Oppurtunities in Speech-Language Pathology, “Nearly 15 million Americans or one out of every 20 persons, have a speech-language disorder” (3). I happen to have been one of those 15 million who suffered from a speech disorder.

When I was a child, I went to speech therapy. My mom told me that she received a call from my first grade teacher concerning my communication skills. She told my mom that she got the basic idea of what I wanted, but that I verbally didn’t make any sense. So for two years I worked with Mrs. Rooney, my speech therapist. She helped me communicate better by using the correct grammar. She also helped me correct the problem I had with “r” sounds. Thanks to Mrs. Rooney, I can now communicate effectively with other people.

So how did the speech language pathology profession come to be? Surprisingly, the profession of speech-language pathology (SLP) hasn’t been around that long; however, the ideas of correcting speech have. To explain the beginnings of speech-language pathology, Hicks refers to an ancient mythological story: “The beginning of the profession can be traced back as far back as the fifth century B.C. when a number of Greek writers reported the awareness of speech defects and efforts to alleviate them” (1). Hicks refers to a legend that supports this theory. She states, “One such legend describes the Athenian orator Demosthenes shouting at the sea with his mouth full of pebbles in an attempt to cure his stuttering” (1). However, the first real scientific understanding of speech disorders came to surface in the early 19th century. According to Hicks, “The primary contributors [to the field of speech-language pathology] were physicians and surgeons in France, England, Ireland, Austria, and Germany, who published reports on their methods and results for treating individuals with speech problems” (2). It wasn’t until the second decade of the 20th century that Americans really started contributing to the field, says Hicks. However, at this time no specific qualifications were necessary to practice speech-language pathology. In response, many people claimed to be able to cure speech disorders without really having any previous training or knowledge in the field. This issue was resolved when a specified course of study was introduced during the 1920’s.

The major organization that is affiliated with the profession of speech-language pathology is ASHA. ASHA stands for the American Speech-Language-Hearing Association. ASHA believes, “The mission of the American Speech-Language-Hearing Association is to promote the interests of and provide the highest quality services for professionals in audiology, speech-language pathology, and speech and hearing science, and to advocate for people with communication disabilities” (“About Our Organization” 1). In accordance with its belief,
“ASHA currently represents 118,437 speech-language pathologists, audiologists, and speech, language, and hearing scientists. And of that 118,437, about 98,334 represent speech-language pathologists, 4.5% of which are males” (“Highlights and Trends: ASHA Counts for 2004” 1).

What exactly does a speech language pathologist do? In reference to the Occupational Outlook Handbook, “Speech-Language Pathologists, sometimes called speech therapists, assess, diagnose, treat, and help to prevent speech, language, cognitive, communication, voice, swallowing, fluency, and other related disorders” (1). Hicks states that, “2 million adults and approximately 200,000 adults and children with head injuries have experienced loss in the ability to comprehend and use language because of damage to the brain” (3). Similarly, there are numerous reasons as to why a speech disorder would arise. Reasons such as stroke, brain injury or deterioration, developmental delays, cerebral palsy, cleft palate, mental retardation, and hearing impairment are all possible explanations. In addition, with modern technology, saving lives has become easier than ever before. Therefore, the number of people with communication disorders will grow because the people being saved will now be faced with oral and motor disorders.

For the most part, once a speech disorder is detected, especially at a younger age, it is easier to correct. Hicks states, “Nearly six million children under age eighteen have a speech or language disorder” (3). In addition, “Speech disorders affect up to 15 percent of preschoolers and 6 percent of children in grades one through twelve” (3). Patricia Hamaguchi, author of Childhood Speech, Language and Listening Problems, has developed a list of common behaviors found in children with speech disorders. She breaks down each age group starting at birth all the way to age twelve. Hamaguchi also makes reference to the three most common speech disorders among children. One type is phonological disorders. According to Hamaguchi, “Phonological disorders are speech problems that are more complex and pervasive than simple articulation deficits” (68). Another type of disorder consists of simple articulation problems. This is when a child has problems pronouncing particular sounds or groups of sounds together. Similarly, Hamaguchi reports, “The r and l sounds are probably the most commonly mispronounced” (72). The third type of disorder deals with oral-motor conditions. This has to do with how the mouth moves and functions. If the muscles in the mouth are weak, communicating effectively may become an issue.

Fortunately, there are methods and techniques used by speech-language pathologists to help correct and/or improve speech disorders. There are a series of different written and oral tests that speech-language pathologists can use to diagnose a speech disorder. Hicks states:

There are twelve assessment tests that [a] SLP can administer to help assess the problem. They include comprehensive speech-language pathology assessment, spoken language assessment, written language assessment, augmentative and alternative communication assessment, articulation/phonology assessment, fluency assessment, voice assessment, resonance and nasal airflow assessment, swallowing function assessment, or facial function assessment, and prosthetic/adaptive device assessment. (15-16)

In addition, the Occupational Outlook Handbook reports, “For individuals with little or no speech capability, speech-language pathologists may select automated devices and sign language, and teach their use” (1). The various techniques used to help treat speech disorders are different for each patient; therefore, speech-language pathologists must create a special plan of
work for each individual patient. SLPs often deal with the families of their patients. The Occupational Outlook Handbook also states that “[t]hey work with family members to recognize and change behavior patterns that impede communication and treatment and show them communication-enhancement techniques to use at home” (1). Overall, speech-language pathologists often administer numerous tests to help identify a problem and, in return, help families work with other members who have the speech problem outside of therapy sessions.

According to the Occupational Outlook Handbook, “Of the 46 states that regulate licensing for SLP, almost all require a master’s degree or equivalent” (United States 2). There are 233 colleges and universities that offer this particular degree. In general, topics such as anatomy, physiology, development of normal speech, and psychological aspects of communication are covered. However, once in the graduate program, students will learn how to diagnose and treat speech disorders. In order to be considered a certified SLP, you must pass the national examination on SLP through the Praxis Series of the Educational Testing Service. Along with that, you must complete 300-375 hours of supervised clinical experience and nine months of post-graduate professional experience.

Along with the educational training, there are a variety of skills that are also necessary. “Occupations: Speech Pathologists and Audiologists” suggests that “Speech pathologists need to express ideas clearly when speaking or writing, understand spoken and written information, and be able to listen to others and ask questions” (4). Being able to manage time efficiently and stay organized is important. As a speech-language pathologist, you will be dealing with more than one patient. So keeping papers separated and sorted is crucial. Speech-language pathologists need to be sensitive to the needs of their patients. On this topic, “Occupations: Speech Pathologists and Audiologists” specifies, “Speech pathologists need to use several methods to learn and to teach new things to others, look for ways to help people, change behavior in relation to others actions, and be aware of others reactions and understand the possible causes” (4). Having the above skills are important to speech-language pathologists.

Being able to achieve a degree in speech-language pathology isn’t impossible, even if you are low on funds. There are numerous scholarships, grants, and loans. For example, training grants are offered by the department of education and health and human services are offered by government agencies (“Financial Aid Resources for Students” 3). The American Speech-Language-Hearing Foundation (ASHF) also offers a series of scholarships to graduate students either pursuing a master’s or doctoral degree in SLP (“Financial Aid Resources for Students” 2). In addition, “Financial Aid Resources for Students” acknowledges:

Up to ten graduate student scholarships are available annually for masters or doctoral level students in SLP or audiology. Of this, two $2000 student research grants are available, seven $5000 new investigator research grants are available, and one $5000 speech science research grant is available in alternate years to an individual. (2)

Accordingly, the majority of universities and colleges offer their own scholarships and loans to graduate students in this profession. Of course, there is always standard financial aid available, too.

There are many different environments where SLP’s can work. However, the Occupational Outlook Handbook reported that “Speech-Language Pathologists held about 94,000 jobs in 2002. About half of jobs were in educational services including preschools,
elementary and secondary schools, and colleges and universities” (United States 1). Aside from educational institutions, speech-language pathologists also work in hospitals, nursing homes, home healthcare services, adult and children daycare centers, and for individual or family services. There is also a small portion of SLPs that choose to be self-employed in private clinics or work as researchers in the profession.

There aren’t any outrageous or extreme conditions in which speech-language pathologists work. SLPs generally work either at the patient’s bedside if in the medical environment, or in the classroom if in the educational environment. While the job isn’t physically demanding, being able to pay close attention to detail and new changes in behavior are crucial. In that sense, the job may become mentally strenuous at times. As for traveling, the occasional trip to a conference or workshop may be required (“Occupations: Speech Pathologists and Audiologists” 3).

For the most part, SLPs generally hold full-time positions that consist of typical forty-hour weeks. If you work in an educational institution, you generally work on an academic calendar consisting of nine to ten months. However, annual workers work on a calendar-year basis of eleven or twelve months. The difference in pay is approximately $3,200 (United States 2). In general, “Wages for speech-language pathologists is $4,120 per month or $23.77 per hour” (“Occupations: Speech Pathologists and Audiologists” 1). For the most part, full-time SLPs receive some type of benefits package. According to “Occupations: Speech Pathologists and Audiologists,” “Benefits vary by employer. Those who work full-time for schools and government agencies usually receive benefits. Typical benefits include health insurance, paid vacation, sick leave, and a retirement plan” (2).

Finding a job as a speech-language pathologist will never be an issue. In regard to “Occupations: Speech Pathologists and Audiologists,” “In Illinois, employment of speech pathologists and audiologists is expected to grow about as fast as average through 2012. About 250 job openings are expected each year. The rate at the national level is the same” (2). There are several reasons why there will always be such a high demand for speech-language pathologists. The advancement of medical technology is helping people to survive strokes and premature babies with certain birth defects live. “Occupations: Speech Pathologists and Audiologists” also states that “Federal law promises services to children with special needs” (2). In return, there will always be positions to fill in schools. The Occupational Outlook Handbook also states, “Greater awareness of the importance of early identification and diagnosing of speech, language, swallowing, and hearing disorders will also increase employment” (United States 2). Overall, the job outlook for speech-language pathologists is very promising.

There is only one current problem in the field of speech-language pathology. This is the shortage of PhDs in the field. According to Susan Boswell, author of “Where have all the PhDs gone?,” “The field never had an abundance of PhDs, and now a second generation PhDs are rapidly approaching retirement age” (1). Boswell states that “for the first time in 14 years, the number of research doctorates awarded by U.S. universities declined, dropping by 3.6% in 1999, according to the University of Chicago’s National Opinion Research Center” (2). Boswell also reports that “approximately 50% of all graduate students who enter PhD programs do not complete them and most leave the first year” (2). However, there are several reasons why there is this shortage.

Geographic region is one cause. Cheryl M. Scott and Kim Willcox, authors of “The PhD in CSD” suggest that “Geographic distribution of PhD-granting programs is uneven. For example, Ohio has six PhD programs, California has only one, and 13 states have none at all”
Also, Scott and Willcox state, “Of 300 academic programs in CSD in the United States, only 61 offer a research PhD. The vast majority, (75%) of CSD graduate programs offers the master’s or professional doctorate only” (1). As a result, being able to support and maintain PhD programs is hard. Scott and Willcox also report, “Maintaining and even expanding programs to educate students at the PhD level is very difficult. It requires laboratories, funding, and academic culture that values the effort and facilitates the needed activities” (2). Without adequate funding for PhD programs, the situation is going to become worse. Boswell reports, “At the doctoral level, even fewer programs exist—there are less than 50 traditional doctoral programs culminating in a PhD” (2). The overall fear of not having enough PhD holders in the field is that fewer researchers and a decline in research productivity may lead to a void in clinical and basic research from other fields, such as linguistics or psychology, conducting research. This decline in research conducted by doctorally prepared faculty in our discipline may in turn lead to a loss of clinical application, research autonomy, and funding sources in communication sciences and disorders (CSD), says Boswell. (1)

However, the most significant factor has to do with the students themselves. How they feel about the programs offered to them at the PhD level is less than satisfying. Scott and Willcox report, “One of the major reasons why students leave PhD programs is because they feel isolated, disconnected, and generally unsupported” (3). Keeping in mind that the field of speech-language pathology and audiology is composed mainly of women, for this reason, money has also become a factor (Boswell 1). Boswell states, “Women in academia continue to face gender-related challenges. In CSD, women comprise 67% of faculty, but male faculty had a base salary of $13,435 more than females” (3). This fact only discourages women from pursuing their PhD in speech-language pathology.

There have been some suggested solutions to help solve this problem. According to Scott and Willcox, “There is evidence from several fields that students who begin their doctoral studies at an early age and progress through a program at a faster rate are more likely to complete their programs and assume an academic position” (3). Another solution is offered from Debra Busacco. She believes, “Students may be unaware of the multiple career tasks for those with a PhD degree and of the ability to combine responsibilities in teaching, research, clinical service, administration, and consulting” (qtd. in Boswell 2). The final attempt to solve this issue is a program that the communication sciences and disorders (CSD) department at Howard University came up with (Boswell 3). Boswell states, “In 1994, Howard University began the program Preparing Future Faculty (PFF), a national model designed to prepare the next generation of faculty members” (3). Orlando Taylor, director of the PFF program at Howard University, says, “Students have a chance to prepare for the professorate as they go behind the scenes to see what a professor’s day is like and get hands-on teaching experiences” (qtd. in Boswell 4). PFF currently is composed of 338 different institutions (Boswell 3). This may be the most promising solution to the problem of PhD shortages.

Becoming a speech-language pathologist is a rewarding career. Just think about that one family member or friend who suffers from some type of speech problem. Don’t you wish you could help them out? Well, thanks to speech therapists, they can help your friend or family member. Personally, I am grateful for my speech therapist. She changed my life for the better.
and now I communicate effectively. Speech-language pathologists improve the quality of life for hundreds of people. Being able to make a lifelong difference in another person is an incredible achievement.

Works Cited


Hicks, Patricia L. Opportunities in Speech-Language Pathology Careers. Lincolnwood: VGM Career Horizons, 1996.


