

Speech and Language Therapy Publications: Are They Adequate?

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Abstract

Scientific publications in the area of speech and language therapy are meant to communicate to the scientific and practice community and policy-makers new developments (in theories, research and practice). Where there is a dearth of publication, teaching, research, and policy development in the field of study suffer. The aim of this paper is to find out whether publications in the area of speech and language therapy are adequate. A computer-aided electronic search was made using Ebscohost database. Scientific articles published within 2011 and 2016 in the area of speech and language therapy were sought in three representative developed as well as three developing countries. Results show that publications in the area of speech and language therapy are not adequate. It is therefore recommended that speech and language therapists should endeavour to not only practice but also spare time for publications of their experiences for proper teaching, research and policy making.

Key Words: *Speech, Language, Therapy, Publications.*

Introduction

Speech and Language therapies are those techniques, activities and exercises which are designed to help someone cure a language or speech defect (e.g., stuttering) or to help someone to regain their use of speech after having suffered speech loss (e.g. after a stroke). Speech therapists, also at times called speech pathologists, studied speech abnormalities and disorders such as aphasia and stuttering, and are trained to treat them. (Richards, Platt & Weber, 1985). Their educational background may be Arts (Language), Education, Social Sciences, or Medicine.

Speech therapy focuses on receptive language, or the ability to understand words

spoken, and expressive language, or the ability to use words to express oneself. It also deals with the mechanics of producing words, such as articulation, pitch, fluency, and volume. Adults may need speech therapy after a stroke or traumatic accident that changes their ability to use language; for children, it generally involves pursuing milestones that have been delayed (Mauro, 2016). Some children only need help with language, others have the most problems with the mechanics of speech, and some need every kind of speech help there is.

Most autism behavioural intensive therapy programmes include speech-language therapy. With a variety of techniques, speech-language therapy

addresses a range of challenges often faced by persons with autism. For instance, some individuals on the autism spectrum do not speak, while others love to talk but have difficulty using conversational speech and/or understanding the nuances of language and nonverbal cues when talking with others.

Some speech and language problems:

Aphasia (at times also called *Dysphasia*): It is loss of the ability to use and understand language, usually caused by damage to the brain. The loss may be total or partial, and may affect spoken and/or written language ability. There are different types of aphasia, and they are as follows: *Agraphia* is difficulty in writing. *Alexia* is difficulty in reading. *Anomia* is difficulty in using proper nouns. *Agrammatism* is difficulty in using grammatical words like prepositions, articles, etc. (Richards, Platt & Weber, 1985).

Stuttering (also called *Disfluency*): It is an experience of break in speech, manifested as repetitions of words, syllables, or prolonged sounds.

Frontal lisps: It is common among children. It is a situation where a child pronounces an "s" sound more like a "th" than an "s".

Auditory processing or repetitive language deficit: It is a defect where one has trouble processing a conversation or understanding what has been said.

Some Speech-Language Therapy Techniques:

Speech-language therapy starts with gathering and analysing information about a person's linguistic, speech and physical abilities (as related to speech/communication). It also looks at the ways in which the individual's environment influences these abilities (Morales, 2016). Speech-language therapy is designed to coordinate the mechanics of speech with the

meaning and social use of language. Such a programme begins with an individual evaluation by a speech-language therapist/pathologist to assess an individual's verbal aptitudes and challenges. From this evaluation, the therapist/pathologist sets goals that may include mastering spoken language and/or learning nonverbal communication skills such as signs or gestures. In each case, the goal is to help the person communicate in more useful and functional ways.

The professional in charge of a child's speech therapy, called a speech-language pathologist, speech therapist, speech teacher, or whatever combination of these words the school district pastes together, will work to find fun activities to strengthen the child in areas of weakness. For mechanics, this might involve exercises to strengthen the tongue and lips, such as blowing on whistles or licking up Cheerios. For language, this might involve games to stimulate word retrieval, comprehension, or conversation (Mauro, 2016).

Speech therapy may be provided by the child's school as a part of the Individualized Education Plan (IEP). The speech therapist should be part of the child's IEP team, both for evaluating the child's speech and language abilities and deciding how therapy should be administered -- in a group or individually, in class or as a pull-out, once or twice a week or more.

Augmentative and Alternative Communication:

Nonverbal persons with autism can benefit from a variety of augmentative and alternative communicative (AAC) devices and methods. The Picture Exchange Communication System (PECS) is among the most commonly used with children and adults who have little or no verbal ability.

Therapists, teachers and parents help the child or adult build a vocabulary and consistently articulate desires, observations and feelings through pictures. This system can be taught and used at home, in the classroom and a variety of other settings.

At the start of a PECS programme, the instructor teaches the child or adult to exchange a picture for an object—for instance, a picture of an apple for an actual apple. With instruction, the person learns to distinguish pictures and symbols and use both to form sentences. Although PECS is based on visual tools, the programme emphasizes and reinforces verbal communication. Caregivers can purchase standard PECS images as a part of a manual or simply gather photos from everyday sources such as newspapers, magazines and books. (Autism Speaks, 2016) Other augmentative and alternative communicative devices include specially programmed computers, iPads, and iPhones.

Research Question

It is obvious that speech and language related problems exist all over the world. It is also known that these problems are being managed or treated with some kinds of speech and language therapy methods by therapists. The question however is whether many speech and language therapists document and share their therapeutic experiences with colleagues, students of speech and language therapy and the intellectual world, in form of journal publications. Are they just concerned with the treatment of speech and language disorders without considering it necessary to publish their new experiences and discoveries, for the purpose of cross-pollination of ideas and advancement of knowledge in the speech and language therapy? This paper sets out to address this question.

Method

The author made use of a computer connected to the internet and searched for recent (2011-2016) journal publications in the area of Speech and Language Therapy. The search limited itself to journal publications stored in Ebscohost Database. Contained in the Ebscohost database are very relevant electronic storehouses for publications, like Academic Search Complete, AHFS Consumer Medication Information, Eric Educational Resource Centre, Health Source (Nursing/Academic Edition), Master File Premier, and Medline. Journal publications in the area of Speech and Language Therapy in the past five years were sought. The search was also limited to three African (developing) countries (Nigeria, South Africa and Kenya) and three developed countries (Great Britain, Canada and USA) the search was done in the month of October 2016.

Result

The Table below shows the number of recent journal publications in the area of Speech and Language Therapy found in the six countries.

Table 1: The number of recent journal publications in the area of Speech and language Therapy found.

Country	Type of Country	Number of Publication (2011-2016)	Percentage
Nigeria	Developing	3	12.50
South Africa		3	12.50
Kenya		4	16.67
Great Britain	Developed	8	33.33
Canada		2	8.33
USA		4	16.67
Total		24	100.00

Details of the publications from Nigeria can be read from Aghukwa and Aghukwa (2011), Aremu, Afolabi, Alabi, and

Elemunkan (2011), and Babudoh (2014); those from South Africa can be read from Ostrofsky and Seedat (2016), Pascoe and Norman (2011), Torre, Cook, Elliott, Dawood, and Laughton (2015); and those Kenya from Bunning, Gona, Buell, Newton, and Hartley (2013), Carter, Murira, Gona, Tumaini, Lees, Neville, and Newton (2012), Gona, Newton, Hartley, and Bunning (2014), and Haruo, Yukihiro, Haruo, Izumi, and Kenya (2011). The publications from Great Britain can be read from Bruce, Braidwood, and Newton (2013), Cavenagh, Brockbank, Miller, Owen, and Patterson (2015), Costelloe, Davis, and Howell (2015), Evans, Canavan, Foy, Langford, and Proctor (2012), McGowan, Ward, Wall, Shellshear, and Spurgin (2014), Miller, Deane, Jones, Noble, and Gibb (2011), Palmer, Cooper, Enderby, Brandy, Julious, Bowen, and Latimer (2015), and Oozeer, Corsar, Glore, Penney, Patterson and Paleri (2011); those from Canada can be read from Cunningham and Rosenbaum (2015), and Planchou, Clement, Beland, Cason, Motte and Samson (2015); and those from United States of America in McCrea (2013), Shah (2011), White (2011), and Levy (2012).

Table 1 shows that, although 33.33% of the published cases came from Great Britain, it cannot be generalised that the speech and language therapists in the developed countries publish their experiences more than the therapists in the developing world. Speech and language Therapists in Nigeria, South Africa and Kenya published their experiences more than those in Canada.

Discussion

Generally speaking, publications in the area of speech and language therapy appear to be very low both in the developed and the developing worlds. In the past five years, for a leading country in Europe (Great Britain, with assumingly hundreds if not thousands

of practicing speech and language therapists) to have only 8 publications, and leading countries in Africa (Nigeria and South Africa who have assumingly hundreds qualified speech and language therapists) to have only 3 publications, is an indication that much needs to be desired in the area of publications in the area of speech and language therapy.

The results of this study shows that there is a dearth of publications in the area of speech and language therapy worldwide. This does not imply that there are not many speech and language therapists practicing, especially in the developed countries; rather it implies that many of them are just concentrating on their practice, without finding it necessary to share their experiences with other speech and language therapists and students of speech and language therapy. Cross-pollination of ideas is a very important factor in the development of any nation.

Culture is dynamic and times are changing. This implies that speech and language therapists should constantly share their experiences with younger generations and with professional in different cultures. The world is now a global village and information-sharing is part of the globalisation process. Speech and language therapists should not be left out in the process of globalisation.

Limitations of study

The literature search is limited to journal publications. Books and other forms of publications were not considered. If they were included in the search, more publications may be found. The search was also limited to three developed and three developing countries. If other countries are included, it may throw more light on the situation. Although Ebscohost database is very reliable and inclusive of many other database, if more other database were also

used in the search, it may bring more results. There is also a need to establish a benchmark for the number of publications that would be considered adequate for developed as well as developing countries within a period of time. This will assist in assessing the adequacy of the number of publications in the area of speech and language therapy for a country.

Recommendations

The limitation of this study notwithstanding, it is recommended that speech and language therapists should endeavour to not only practice but also spare time for publication of their experiences for their colleagues and future colleagues to learn from. Proper teaching, research and policy-making in the area of speech and language therapy are guided by the publications. It is also recommended that future research should take into consideration the above-mentioned limitations.

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