

Research Article

Barriers Faced in Public and Private Special Education Centers: Speech Language Pathologist's Perspective

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Abstract

Background: Speech language pathologists besides clinical setups also work in cross-sector setups. They work to assess and manage speech language as well as cognitive issues and face barriers while performing their duties. These barriers are a cause of concern and frustration and may affect their work, hence this study was conducted.

Objective: To determine the barriers encountered by speech language pathologists in special education centers.

Methods: This Cross-sectional survey using purposive sampling recruited N=100 speech language pathologists of both genders aged 23 to 60 years. The sample was collected from special education centers and schools of Islamabad and Punjab, Pakistan over a period of 6 months. Basic demographic sheet and a standard school survey questionnaire was used for data collection and analysis was done using SPSS Version 21.

Results: Fifteen barriers were identified of which Limited parental involvement and support (73.34%) was the commonest followed by High workload/caseload (68.5%), Large amount of paper work (67.92%), Budget constraints (63%) and Inadequate work space and facilities (58.34%). There was a difference in barriers faced in the private and public sector which was statistically significant with $p < 0.05$.

Conclusion: Speech language pathologists working in special education centers face a number of barriers, with the most common being Limited parental involvement and support, High workload/caseload, Large amount of paper work, Budget constraints, Inadequate work space and facilities.

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Introduction

Speech Language Pathologists (SLP) in addition to clinical setups work in cross-sector setups like special education centers (SEC) alongside the special education teachers (SET) for assessment, diagnosis, management and prevention of cognitive, communication, speech and language and swallowing disorders and are special contributors to the curriculum as well.¹ According to Glover A et al.² cooperation

between SLP's and SET's is helpful for the communicational requirements and academic and pragmatic skills of these children. SLPs face a number of barriers in performance of their duties in these education setups which includes barriers/factors like lack of personal resource, shortage of fiscal resource, workload, Level of stress and complexities in scheduling classes, thus affecting SLT's work of enhancement of the performance of

special children.^{2,3} According to Pampoulou, the individual's knowledge of one's own and other professional's role; and meetings and support from staff in the position of authority has impact on outcome.⁴ In a questionnaire-based study by Glover A et al, involving both SLT's and teachers, it was noted that both were frustrated over the shortcomings as regard to financial, personnel and other resources and need for more training, collaboration and knowledge.² Muncy MP et al.⁵ also reported barriers like lack of experience and training. Also lack of time and access to other professionals were barriers to collaboration.⁵

In spite of the presence of a large number of mainstream and special education schools catering to the needs of the special children in Pakistan, the communicational needs of special children remain unmet, in spite of the presence of a speech therapist at most schools.⁶ It was reported by Farooq MS, that there are gaps in communication and funding; and parent carelessness affected the sustainability of the intervention and management for children with special needs.⁷

Therefore, the current study was designed since it was felt that a number of barriers are being faced by SLPs in the special education setups which hinder the provision of effective services for the children with special communicational needs. This study has significant importance since no such study has been carried out to assess the barriers and lack of such literature from this part of the world. Therefore this information may help the educational administrators to improve the speech therapy services in these centers. This will also act as a foundation to initiate further research. Therefore the present study was conducted to determine the Barriers encountered by speech language pathologist's in special education centers.

Methods

A cross sectional survey was carried out to determine the barriers encountered by speech language pathologist in special education centers. The study recruited a sample of N=100 SLPs of both gender, aged 23 to 60 years using Purposive sampling technique. 60 SLPs were recruited from the public sector and 40 from private sector special education

centers of Islamabad and Punjab, Pakistan over a period of 6 months from 1st June 2018 till 31st November 2018. SLPs working in normal schools, clinics and hospitals and those working on other positions were excluded.

Data collection was done using a basic demographic sheet and a standardized school survey questionnaire⁸, however questions that were not applicable in Pakistan due to cultural and social variations were excluded. After taking consent for inclusion in the study, the questionnaire was administered on the sample population by the researcher to investigate the barriers being faced by SLP's.

Data collected was subsequently coded and statistical analysis was done using SPSS 21. Variables studied included gender, age, type of institution and barriers and presented by frequency and percentage. Chi-square test was used to see any association of barriers identified with age, gender and type of institution.

Results

Sample population (N=100 SLPs) included 60 from public and 40 from private SECs with a male to female ratio of 1:9, with majority i.e., 56%, in the age group of 33-42 years (Figure 1). Table 1, depicts the barriers identified by SLP's in different special education setups, which shows that Budget constraints, Large amount of paperwork, Limited parental involvement and support, Medical billing, Out-of-pocket professional expenses, Personal storage were common barriers with no statistically significant difference between the two groups. While Ethical challenges, High workload/ caseload, Inadequate works space and facilities, incorporating optimal service delivery models, limited support for administration, limited understanding of SLPs role by others and travel/ distance between school, were statistically predominant in the Public sector with p-value < 0.05. However Limited time for collaboration and Low salary predominated in the Private sector and the difference was statistically significant with p-value 0.001.

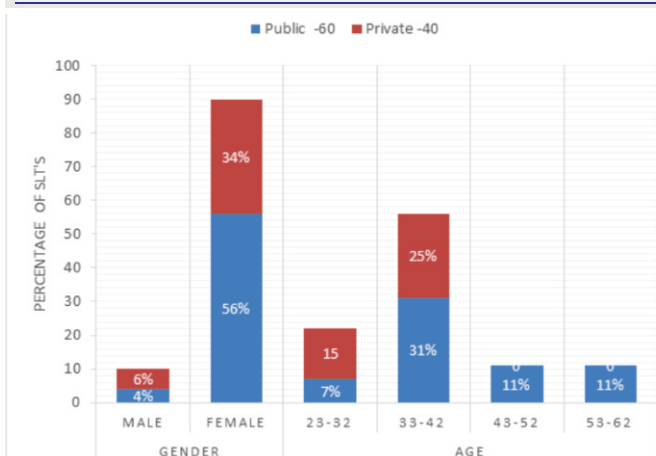
Gender wise there was a difference in reporting of barriers with more females reporting all the barriers as shown in table 2, however it was statistically significant only in case of High workload/caseload

Table 1: Percentage of Barriers/ Challenges Reported by SLPs *Type of Institution & Chi Square P-Value. Cross Tabulation (n=100)

No	Subjects	Total	Public	Private	X ²	P=value
1	Budget	63%	61%	65%	0.114	0.753
2	Ethical challenges	33.75%	55%	12.50%	18.40	0.001
3	High workload/caseload	68.5%	80%	57%	5.90	0.015
4	Inadequate work space and facilities	58.34%	71.67%	45%	7.17	0.007
5	Incorporating optimal service delivery models	22.09%	41.67%	2.50%	24.03	0.001
6	Large amount of paperwork	67.92%	63.33%	72.50%	0.912	0.34
7	Limited support from administration	42.5%	60%	25%	11.84	0.001
8	Limited understanding of my role by others	31.25%	45%	17.50%	8.09	0.004
9	Limited parental involvement and support	73.34%	66.67%	80%	21.12	0.146
10	Limited time for collaboration	36.25%	2.50%	70%	19.83	0.001
11	Low salary	52.5%	10%	95%	70.37	0.001
12	Medical billing	5%	5%	5%	0.00	1.00
13	Out-of-pocket professional expenses	7.92%	8.33%	7.50%	0.23	0.88
14	Personal storage	7.92%	8.33%	7.50%	0.23	0.88
15	Travel/distances between school	6.92%	11.33%	2.50%	5.69	0.017

Table 2: Barriers/ Challenges Identified/ Reported by SLPs with Gender Correlation (n=100)

No	Barrier	Females	Males	X ²	P=value
1	Budget	57%	6%	0.043	0.836
2	Ethical challenges	37%	1%	0.369	0.054
3	High workload/caseload	67%	4%	5.18	0.023
4	Inadequate work space and facilities	56%	5%	0.565	0.452
5	Incorporating optimal service delivery models	25%	1%	2.17	0.337
6	Large amount of paperwork	63%	4%	3.66	0.056
7	Limited support from administration	42%	4%	0.161	0.688
8	Limited understanding of my role by others	32%	2%	0.970	0.325
9	Limited parental involvement and support	64%	8%	0.353	0.553
10	Limited time for collaboration	38%	5%	0.222	0.637
11	Low salary	37%	7%	3.04	0.081
12	Medical billing	5%	0%	0.585	0.444
13	Out-of-pocket professional expenses	8%	6%	0.966	0.326
14	Personal storage	7%	1%	0.060	0.806
15	Travel/distances between school	12%	0%	1.51	0.218



where 67% females reported it as barrier as against 4% males with p-value of 0.023.

Chi-square analysis revealed that there was statistically significant ($p < 0.05$) difference between different age groups with younger age groups reporting more barriers, including Limited support from administration, Limited understanding of my role by others, Limited time for collaboration, Low salary, Out-of-pocket professional expenses and Travel/distances between schools (table 3).

Figure 1: Demographic Information

Table 3: Barriers/ Challenges Identified/ Reported by SLPs with Age Correlation (n=100)

No	Subjects	23-32	33-42	43-52	53-62	X ²	P=value
1	Budget	12%	41%	4%	6%	6.86	0.076
2	Ethical challenges	7%	22%	6%	3%	2.21	0.530
3	High workload/caseload	16%	36%	11%	8%	5.76	0.124
4	Inadequate work space and facilities	12%	32%	9%	8%	3.37	0.337
5	Incorporating optimal service delivery models	4%	14%	5%	3%	6.15	0.406
6	Large amount of paperwork	18%	37%	7%	5%	4.57	0.206
7	Limited support from administration	11%	21%	11%	3%	16.23	0.001
8	Limited understanding of my role by others	8%	16%	9%	1%	15.04	0.002
9	Limited parental involvement and support	14%	45%	8%	5%	6.55	0.088
10	Limited time for collaboration	14%	24%	5%	0%	12.14	0.007
11	Low salary	15%	27%	0%	2%	17.24	0.001
12	Medical billing	0%	4%	0%	1%	2.66	0.446
13	Out-of-pocket professional expenses	3%	2%	3%	0%	8.95	0.030
14	Personal storage	1%	4%	1%	2%	1.98	0.577
15	Travel/distances between school	1%	5%	5%	1%	13.40	0.004

Discussion

The present study investigated the barriers encountered by Speech Language Pathologists (SLPs) in Special Education Centers (SECs) in Public and Private sectors. Fifteen barriers were identified of which the most significant were Limited parental involvement and support 73.34%, High workload/caseload 68.5%, Large amount of paper work 67.92%, Budget constraints 63%, Inadequate work space and facilities 58.34%.

The current study revealed that in the opinion of SLPs they have to face limited parental involvement and support (73.34%) with SLPs in the private sector reported it as a barrier with a higher frequency compared to the public (80% vs. 66.67%) but the difference was not statistically significant. In a study Mahuro GM et al, assessed improvement in students due to parental participation and reported that parenting and communication improves numeracy scores by 6-10 percentage points and literacy scores by 6-12 percentage points respectively.⁹ However SLP parent communication rating as indicated by parents in a study by Ebert KD, reported that parents of children in school treatment services lower ratings than in other settings.¹⁰

High workload/caseload was reported to be a major barrier faced by SLPs (68.5%), in the current study with SLPs in the public sector compared to private sector schools were facing higher workload/ caseload

(80% vs. 57%) and the difference was statistically significant with $p < 0.05$. Comparable results were reported in a number of studies. In a large study responses revealed that high workload was a cause of dissatisfaction 8. In contrast in a study by Smith BK et al. conducted in Missouri University of science and technology, reported that 24% of SLPs had caseload exceeding allowed limits by state regulations and was a factor causing discontentment¹¹. Keeping in view the workload, institutions are considering shifting from workload to caseload. Initially in 1993, American Speech-Language-Hearing Association (ASHA), recommended a case of 40, however later on in 2002 they suggested “workload analysis approach” that includes all activities performed by SLP from pre-referral to dismissal of the case.¹²

ASHA Survey also revealed that the majority (85.9) of SLPs had to perform large amount of paper work in the school.⁸ In contrast an even larger population of SLPs in the present study (67.92%) reported large amount of paper work required to be done which was a significant barrier.

Budget constraints in the special education centers were also reported as a barrier in this study by 63% of the SLPs. Evidence shows that SLPs face a low budget as a barrier.¹³

Inadequate workspace and facilities were reported as a barrier in the current study with frequency of 58.34% which emerged as a profound barrier in the

public sector compared to private sector schools at 71.67% vs. 45% respectively and the difference was statistically significant with $p < 0.05$. Similar precedence has been witnessed in other international studies indicating lack of necessary facilities¹³ and work space inadequacy by 95%, in school setting¹⁴.

ASHA Survey also reported Low salary and role ambiguity as barriers resulting in dissatisfaction of SLPs.⁸ Similarly in the present study low salary was reported as a barrier by 52.5%, and limited understanding of the role by 31.25%. However in the current study compared to the public sector Low salary appeared as a major barrier in the private sector and the difference was statistically significant with a p-value of 0.001. Also low salary has been reported in 41.8% in settings involving preschools and 25.5% in secondary school.¹⁵ In our setups, the difference in private and public sector might be due to job security in the public sector with permanent pensionable jobs as well as other fringe benefits compared to low paid contract jobs in the private sector in Pakistan. Though overall the role ambiguity was reported as a barrier by 31.25% of SLPs, however in public sector role ambiguity was reported by 45% while in the private sector it was just 17.5% and the difference was statistically significant with $p < 0.05$.

In this study in the private sector Limited time for collaboration (70%) was also a common barriers compared to the public sector and the difference was statistically significant with $p = 0.001$. In a study by Ocampo and Kennedy concluded that significant correlation is present between job collaboration and job satisfaction.¹⁶ According to Archibald LM collaboration between SLP's and educators can help with phonological awareness and vocabulary of students¹⁷. Pfeiffer DL et al. reported that commonest barriers to the collaboration of SLP's include time constraint (48%), other professional's resistance (23%) and lack of support (11%).¹⁸ While in the public sector Ethical challenges (55% vs.12.5%), Incorporating optimal service delivery model (41.67% vs. 2.5%), Limited support from administration (60% vs. 25%) were more common compared to the private sector with $p < 0.05$. In the present study differences in the perception of SLPs working in different institutions i.e. private and public varied significantly for some barriers as discussed above. Similarly in ASHA 2016 SLP School Survey, data revealed that responses

varied with the type of facility i.e, special day/residential, Preschool, Elementary, Secondary, etc.⁸ Present study has significant importance, being the only study conducted in the region, however large scale studies are recommended.

Conclusion

It can be concluded that speech language pathologists (SLPs) working in SECs in both public and private sectors face a number of barriers preventing them from successful implementation of better evidence-based speech therapy services including; Limited parental involvement and support; High workload/caseload; Large amount of paper work; Budget constraints; and Inadequate work space and facilities. There was a statistically significant difference in the level of barriers faced by SLPs in private and public sector special education centers.

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