

Letter to the Editor

Speech language pathology services in a time of pandemic

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American Speech Language Hearing Association (ASHA) is one of many organizations to affirm that communication is a "human right."¹ The right to communicate is contained in Article 19 of the Universal Declaration of Human Rights.² Though few would argue that communication should be a human right, access to communication opportunities through face-to-face interaction is severely impacted by the ongoing crisis of the novel coronavirus. Limitations on face-to-face interaction also negatively affect the provision of speech-language pathology services.

The speech language pathologist (SLP) seeks to unlock access to communication for those who struggle to communicate, regardless of age or type and severity of communication disorder. This has become more challenging for speech language pathologists to do during the pandemic caused by the novel coronavirus. As nations around the globe close schools, clinics, and businesses due to COVID19, many who need speech language therapy may find themselves cut off from a lifeline to communication- a lifeline that was leading them to enhanced communication and life participation before the pandemic. From students barred from attending school, to older adults with new grandchildren they cannot visit or hold, to individuals who live alone forced to isolate and shelter at home, the pain is widespread. According to the Centers for Disease Control and Prevention (CDC), feelings of social isolation and loneliness affect many during a pandemic. Despite the fact that COVID19 restrictions aim to prevent exposure to infection and save lives, extended living under these restrictions can affect both physical health and mental health.³

Interaction in person is a primary mode of communication people use throughout their lives. Due to the pandemic, people across the world need to calculate risk to their health and life just to shop for food or visit relatives and gather with friends. Sitting in close proximity to a client or patient during a speech language therapy session is considered risky during this time when it is not possible to know who may be an asymptomatic carrier of the virus.

Given the current pandemic's universal impact on the safety of engaging in social contact with even close friends and relatives in groups, accessing needed speech language pathology services could become just one more casualty of the coronavirus era if adaptations are not made. Speech language therapy sessions typically present clients with a special time of the week where an understanding skilled clinician hears, understands, encourages, and values their communication efforts while addressing specific treatment goals. Therapy sessions are a safe place to work on difficulty acquiring speech and language for those with developmental communication disabilities. For those with acquired communication disorders caused by problems like stroke, brain injury, or neurodegenerative disease, these sessions may be the only time each week the client receives direct assistance and encouragement to continue the struggle to regain once effortless speech and language skills.

How and where does speech language therapy fit into this new world of hopefully temporary, but necessary, social distancing and sometimes social isolation? Depending on one's location, the answer varies. Conducting speech therapy service remotely, or "telepractice," is defined by ASHA as using telecommunications technology to deliver speech language pathology and audiology professional services at a distance to provide assessment, intervention and/or consultation.⁴

Telepractice is no longer just the option for persons living in remote rural areas. Due to the pandemic, SLPs across the U.S. are now regularly providing speech language therapy via telepractice to very young children through adult ages to provide services safely. University training programs for speech language pathology students are also striving to maintain their students' training opportunities via telepractice, with very few attempting to reopen on-campus clinics due to the high costs associated with supplying the needed personal protective equipment. For those who want to hold therapy sessions in person, the protocols for establishing and maintaining health and safety in the context of the coronavirus can be costly and challenging.

Since March of 2020, ASHA has provided clinicians with printed resources, virtual town halls, webinars, free online courses, and tips for clients and families for SLP services in a coronavirus world,⁵ For those working in medical settings, safety, and adequate access to appropriate personal protective equipment is an ongoing concern for assisting hospitalized patients with stroke and dysphagia, for example.⁶ Using video conferencing platforms like Zoom and techniques such as "sharing the screen" during a therapy session are now familiar to SLPs practicing in schools, private and medical settings. Clinicians are treating children with communication disorders such as articulation and language disorders, stuttering, and autism with telepractice. Outpatients with aphasia, apraxia of speech, dysarthria, or cognitive communication disorders are also able to receive both individual and group speech language therapy through telepractice.

Still, the ability of clients and families to access service through telepractice cannot be assumed and is affected by one's location and economic opportunity. Receiving speech language services remotely requires consistent access to internet and a computer or laptop or other devices with a built-in web camera and audio for teleconferencing. For children and adults with disabilities, it is also critical that a primary caregiver is present to provide technological or other support if needed to access the therapy session and successfully complete it. Speech language pathologists need to continue reminding clients and caregivers of the statement widely used about the coronavirus: "We're all in this together." Prioritizing the importance of access to communication practice through speech language therapy in

a safe manner during a pandemic is an important way to get there.

References

- American Speech Language Hearing Association. (2020). About the American Speech Language Hearing Association: Vision. Retrieved at: <u>https://www.asha.org/about/</u>
- 2. United Nations (1948) Universal Declaration of Human Rights. Retrieved at <u>https://www.un.org/en/universal-declarationhuman-rights/</u>
- 3. Centers for Disease Control and Prevention. (2020). Pandemics can be stressful. Retrieved at: <u>https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/managing-stress-anxiety.html</u>
- 4. ASHA. (2020) Telepractice. Retrieved at https://www.asha.org/practice-portal/professionalissues/telepractice/.
- American Speech Language Hearing Association (ASHA) (2020). COVID 19 Resources for your clients and patients. Retrieved at: <u>https://www.asha.org/public/COVID-19-Resources-for-Your-Clients-and-Patients/</u>
- ASHA. (2020). SLP Service delivery considerations in healthcare during Coronavirus/COVID19. Retrieved at: <u>https://www.asha.org/SLP/healthcare/SLP-Service-Delivery-Considerations-in-Health-Care-During-Coronavirus/</u>