

WHAT'S IN A NAME? Speech-Language Pathologist, SLP for Short

by Felicia Sison Conlan, M.S., CCC-SLP

Speech-Language Pathologists agree that public awareness of the profession needs to improve. To raise public consciousness, a name is important. What Speech-Language Pathologists don't agree on is what they are called professionally. Plain and simple, not all Speech-Language Pathologists refer to themselves as Speech-Language Pathologists. In a recent online survey conducted by the California Speech-Language Hearing Association (CSHA), many Speech-Language Pathologists admit that when they introduce themselves, they adapt to social and work settings by using a variety of other work titles such as "Speech Therapist" or "Speech Teacher". This problem of inconsistency appears rampant and is affecting the public's understanding of the profession and scope of practice. In effect, the Speech-Language Pathologist title is not uniformly used which unwittingly affects marketing, branding and professionalism.

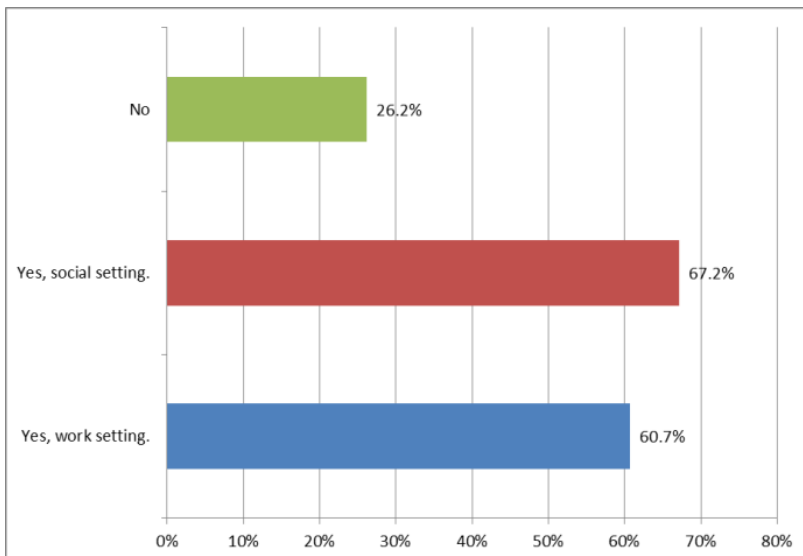
In the public's eye, the "Swallowing Lady" is not the same as the "Speech Teacher" and yet dysphagia and phonology are two areas of knowledge and training expected of SLPs. Speech-Language Pathologists know that act of naming or labeling helps develop language and cognition skills. Yet, this same technique is not being used to increase the public's knowledge and perception of the field of Speech-Language Pathology. What's in a name? Plenty.

The following stories bring this point home: While shopping one day a store clerk shared, "Oh my daughter doesn't get speech from a... what did you say you are?" "Speech-Language Pathologist," I replied. "Yeah that. She goes to a Speech Therapist." I tried to explain that they are synonymous but instead ended up applauding her efforts to provide early childhood intervention. SLPs are famous for their adaptability, flexibility and nurturing nature. Then there's the time a teacher's aide declared, "Can you believe it? The doctor wants my mother to go to a Speech Therapist for a swallow evaluation. I told him she can speak just fine!" This time, I explained that our

scope of practice included such areas as swallowing, articulation, language disorders, stuttering, and voice.

Families who have received treatment from SLPs are the best advocates. I stumbled into this profession, so I was pleasantly surprised when a friend whom I hadn't seen in a while shared, "You're an SLP? That is such an important job. An SLP helped my father when he had a stroke and we are so grateful that he is doing better. So many people benefit from your services." Words like

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these motivate you to want to do more to make a difference.

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- Dr. Patricia Prelock, ASHA President

According to the current President of The American Speech-Language Hearing Association (ASHA), Dr. Patricia Prelock, “The more we educate the public about what we are educated to do and how our services can add quality to their life, the greater chance we have of truly making a difference.”

As part of CSHA’s efforts to increase public awareness of the profession, the Media and Public Relations subcommittee of the Leadership and Marketing Committee was formed by CSHA President-Elect, Dr. Deborah Swain. She remarked, “The public just doesn’t realize the breadth and depth of our scope of practice.”

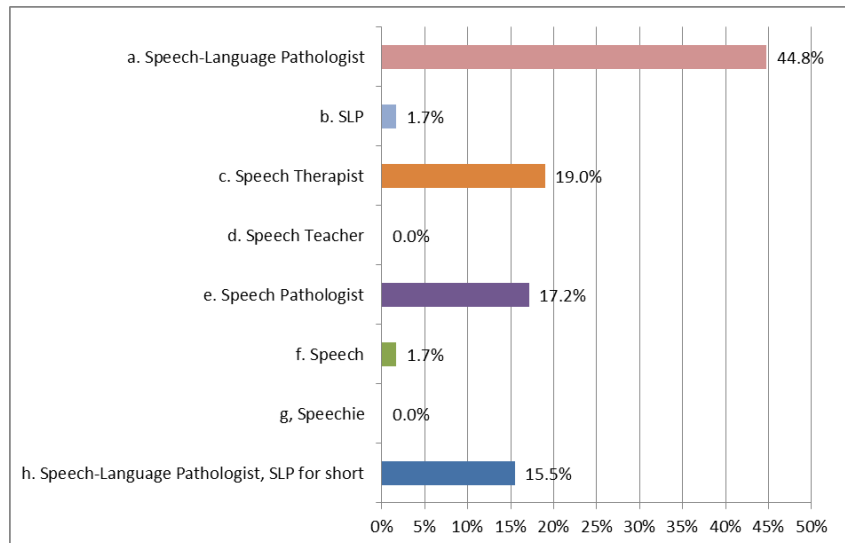
In the survey, an overwhelming 90% of the participants indicated that it would be beneficial for the profession to use a standard title. However, several admitted that they use a variety of names to introduce themselves, including “Speech Therapist”, “Speech Pathologist”, “SLP”, “Speech Teacher”, and “Speechie.” The majority said that others introduce them as a “Speech Therapist”. Less than half indicated that they preferred to be called “Speech-Language Pathologist”, followed by “Speech Therapist”, “Speech Pathologist”, “SLP”, and lastly, “Speech Teacher” and “Speechie”. Clearly Speech-Language Pathologists are

divided and can’t decide uniformly what to call themselves. This dilemma may not seem a problem to some but it is affecting each one of us who worked hard to earn the degree(s) and deserve the respect which comes along with it.

Sherry Foldvary, Coordinator of the Distance Learning Program at California State University, Northridge and CSHA District 7 volunteer feels that public awareness of the field of Speech-Language Pathology has improved since the 1980s but there is still a ways to go. “I always compare us to Physical Therapy; when people hear Physical Therapy they know exactly what the profession is about. When people hear Speech-Language Pathology they aren’t always sure. I think Audiology has less of a name/identify/public perception issue. Granted, there aren’t as many Audiologists as there are Speech-Language Pathologists but the name “Audiology” is more descriptive and more easily defined.”

An SLP who works in a hospital setting acknowledged that sometimes, before a swallow evaluation, patients and nurses call her: “Food Person”; “Food Doctor”; and her least favorite, “Swallow Lady.” Other SLPs use the names “Voice Clinician” or “Communication Disorder expert” to fit their expertise.

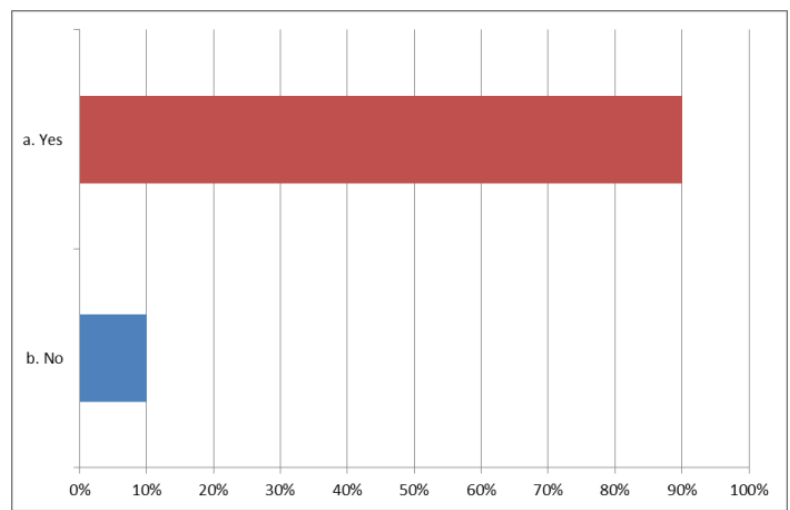
What would you prefer to be called?



During a Professional Development seminar, Stephanie Lewis, Therapy Supervisor of Outpatient Rehabilitation Services at Cedars-Sinai, indicated that names such as Speech Correctionist, Elocutionist, Speech Doctor, Logopedist, Speech Specialist, and Quacks Mdash were also associated with the profession as it evolved.¹ “Quacks Mdash” were people who falsely claimed they had a secret technique or cure for particular speech disorders.”²

In a 2010 *ASHA Leader* article, former ASHA President, Tommie L. Robinson, Jr., stressed the importance of a name. He suggested the simplest and most direct way to stake claim on a professional title is through education and advocacy. “We need to understand the impact of the use of our professional names on our practice and on the professions as a whole. Other professional cultures do not accept the diminishment of their providers. We need to create a similar culture, and make a paradigm shift to embrace our professional identities fully. The bottom line is this—we should not allow people to tell us who we are. We need to start by naming ourselves in a clear and consistent way.”³

Do you feel it would be beneficial for our profession to have a standard title?



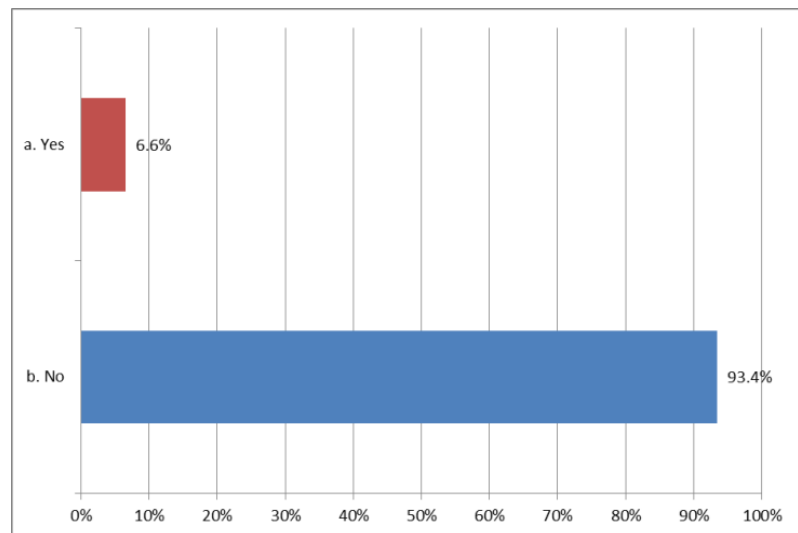
Interestingly enough, 67% of the respondents in the survey admit that they adjust or vary their professional title due to social settings and 61% due to work settings. One survey participant commented, “So many people have no idea what a Speech-Language Pathologist is. I am ashamed of myself for taking the shortcut of saying "Speech Therapist" in social settings, but it really does help!” Another said, “I usually say Speech Therapist because I think people will be more likely to know what that is. But if I talk to other people in the field, I'll say Speech-Language Pathologist.” An ever-accommodating SLP confessed, “I base my title on how I read people and think if they'll understand my formal term/job.” Perhaps the most telling of all responses was the following: “When I am with people who work in schools or hospitals, I will refer to myself as an SLP because they know what it is. When I am telling young children in schools who I am, I will call myself a Speech Teacher. When I worked in a Skilled Nursing Facility (SNF), I would call myself a Speech Therapist. However, when I am meeting a parent, patient, caregiver, administrator, or doctor for the first time, I always introduce myself as a Speech-Language Pathologist.” There lies the problem. Why don't we all use our standard title all the time no matter what the occasion, setting or situation? As communication/swallowing

specialists/speech practitioners, we tend to accommodate others rather than satisfy ourselves. It's no wonder public awareness is insufficient. After all, we manage to confuse the public on a daily basis.

Additional comments from survey participants demonstrate the angst professionals feel due to the public's misconception of what Speech-Language Pathologists do. “Many people that I meet assume that I just correct lisps all the time. The language part of Speech-Language

Pathologist seems to be unknown to a lot of people.” “People often don't realize we treat cognition and language as well as speech.” A survey participant complained, “Working in a hospital and being a specialist in swallowing is very confusing to patients, doctors, family, and other hospital staff. Our title doesn't match what we do.” Another SLP shared, “I work mainly in the acute care setting. People are always confused about what I do there, assuming I must work with children (I don't) or that I primarily work with stroke patients (no). They're always perplexed that I mostly work with swallowing issues.” A solution was suggested, “There's very limited awareness of how big our scope of practice is. We as SLPs have to just continue sharing the awareness as much as possible with others.”

Do you feel there is sufficient public awareness of your profession?



The Speech-Language Pathology profession has made some strides in gaining public exposure. There is no shortage of new students wanting to study Speech-Language Pathology to earn a Master’s degree. Dr. Edward Hall, who is both a Speech-Language Pathologist and Audiologist,

leads orientation meetings monthly for students interested in the Communication Disorders and Sciences program at California State University, Northridge. He has noticed a dramatic increase in interest over the past year and half. According to him, the numbers of potential students inquiring about the program have more than doubled, and meetings are often standing room only. Dr. Hall tells them they need to “be willing to live the Tibetan Monk lifestyle to achieve a more rewarding and productive life in the future.” He outlines the challenges of the program at CSUN which has a strong reputation nationally and internationally. It is one of the largest Communication Disorders and Sciences program in the state of California. They admit 50 students per year in the Residential program and another 60 in the Distance Learning Program. According to him, “The SLP job itself holds a tremendous pull for those interested in helping people with life impacting disabilities. The graduate SLP meets

these problems large and small and has the tools to deal with them, applies these tools and right before their eyes, the problems of their clients diminish and their lives are changed forever. How rewarding can it get?”

SLPs wish for more public awareness of the field of Speech-Language Pathology yet many unknowingly inhibit progress by neglecting to use the professional name of “Speech-Language Pathologist” and settle on the nicknames that are easier for others

to remember. One high school student commented that the name “Speech-Language Pathologist” is too long and too complex to remember. “SLP is a good nickname. It’s short and easier to say.”

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Perhaps he has a point. Although the problem goes beyond having a consistent name, it’s a start and each SLP can do their part. Speech-Language Pathologists can make a difference in their own professional lives by deciding to fully

embrace their professional title, abbreviated as SLPs. Every day there is an opportunity to educate the public, our workplaces, parents, teachers, advocates, students, patients, and each other. Accept no substitutes and safeguard the identity of our profession. Simply put, “I am proud to be a Speech-Language Pathologist. SLP for short.” Are you?



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