Speech & Language Therapy Update

November 2025

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Contents

1. Gesture screening in young infants: Highly sensitive to risk factors for communication delay

Item Type: Journal Article

Authors: Alcock, Katie;Meints, Kerstin and Rowland, Caroline

Publication Date: 2025

Journal: International Journal of Language & Communication Disorders 60(1), pp. e13150

Abstract: Introduction: Children's early language and communication skills are efficiently measured using parent report, for example, communicative development inventories (CDIs). These have scalable potential to determine risk of later language delay, and associations between delay and risk factors such as prematurity and poverty. However, there may be measurement difficulties in parent reports, including anomalous directions of association between child age/socioeconomic status and reported language. Findings vary on whether parents may report older infants as having smaller vocabularies than younger infants, for example.;
Methods: We analysed data from the UK Communicative Development Inventory (Words and Gestures); UK-CDI (W&G) to determine whether anomalous associations would be replicated in this population, and/or with

gesture. In total 1204 families of children aged 8-18 months (598 girls, matched to UK population for income, parental education and ethnicity as far as possible) completed Vocabulary and Gesture scales of the UK-CDI (W&G).; **Results:** Overall scores on the Gesture scale showed more significant relationships with biological risk factors including prematurity than did Vocabulary scores. Gesture also showed more straightforward relationships with social risk factors including income. Relationships between vocabulary and social risk factors were less straightforward; some at-risk groups reported higher vocabulary scores than other groups.; **Discussion:** We conclude that vocabulary report may be less accurate than gesture for this age. Parents have greater knowledge of language than gesture milestones, hence may report expectations for vocabulary, not observed vocabulary. We also conclude that gesture should be included in early language scales partly because of its greater, more straightforward association with many risk factors for language delay.; What This **Paper Adds:** What is already known on the subject We already know that it is possible to measure children's early communicative skills using parent-completed inventories (Communicative Development Inventories, CDIs) and that some aspects of early communication can predict which children are likely to go on to have long-lasting communicative development difficulties. We also know that most uses of CDIs include only vocabulary, not early gesture. In addition, child-related and family-related variables such as prematurity, family history of language disorder and socioeconomic status may be related to communication development. What this paper adds to existing knowledge We looked at a large sample (N = approx. 1200) of families representative of the UK population with an infant aged 8 through 18 months and asked them about their infant's comprehension and production vocabulary as well as their early gesture skills. Gesture was more closely related to possible risk factors for communication development difficulties, for example, family history of communication difficulties, prematurity and multiple birth status. Vocabulary was only related in a straightforward way to family history and had complex relationships to socioeconomic differences. Families with different economic backgrounds may approach questions about their child's development in different ways. What are the potential or actual clinical implications of this work? We suggest that clinicians need to ensure that not only vocabulary but also gesture ability is assessed when looking at very early communication skills. We also suggest that gesture may be more predictive of later communicative development difficulties, and that clinicians need to be sure that parents are clear on how vocabulary questions are asked and what exactly is required of them in answering these types of questions. (© 2025 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.)

Access or request full text: https://libkey.io/10.1111/1460-6984.13150

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=39835912&profid=ehost

2. From Clinic to Real Life: Speech-Language Therapists' Perspectives on Extratherapy Generalization in Children With Cleft Palate

Item Type: Journal Article

Authors: Alighieri, Cassandra;Bettens, Kim;Mouton, Tara;Allemeersch, Fien;De Pauw, Guy;Hens, Greet;Pereira, Valerie and Van Lierde, Kristiane

Publication Date: 2025

Journal: American Journal of Speech-Language Pathology 34(5), pp. 2813–2826

Abstract: Purpose: Extratherapy generalization, defined as the transfer of sounds learned in the training environment to spontaneous speech outside the clinical setting, is a crucial yet underexplored facet of speech therapy in children with a cleft palate with or without a cleft lip (CP ± L). This study aimed to explore how speech-language pathologists (SLPs) experience and structure treatment activities to achieve extratherapy generalization in this population.; **Method:** Fourteen SLPs, aged between 29 and 49 years, were included. They all worked in a first-line health care setting and had their own private practice. Semistructured interviews were

conducted to identify their experiences with extratherapy generalization in children with CP ± L. The data were analyzed using an inductive thematic approach. Researcher triangulation, negative case analysis, and member checking were performed to guarantee trustworthiness.; **Results:** Four major themes emerged: (a) Parental and Environmental Support, (b) The Child's Motivation, (c) Incorporating Therapy Into Everyday Life, and (d) The SLPs' Internal Feelings of Responsibility for Client Improvement. SLPs emphasized the importance of parental and environmental involvement in bridging the gap between therapy and real-life communication, while noting that negative social experiences could catalyze progress. Although external motivators (e.g., rewards) aided short-term compliance, long-term success was rooted in fostering intrinsic motivation and addressing challenges such as perfectionism. Integrating therapy into daily routines reduced the pressure of formal sessions, making learning more natural. SLPs expressed strong emotional investment in client success, often balancing clinical goals with the need to empower children to apply skills independently.; **Conclusions:** The findings suggest that a child-centered approach is more effective than a therapist-driven model. The study underscored the critical role of intrinsic motivation, emphasizing that while external reinforcement can facilitate short-term compliance, long-term success is best supported by fostering a growth mindset. By ensuring a balance between support and autonomy, SLPs can improve therapy outcomes.

Access or request full text: https://libkey.io/10.1044/2025_AJSLP-25-00139

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3. Multilingualism, Speech Disfluencies, and Stuttering: A Scoping Review

Item Type: Journal Article

Authors: Aslan, G. and Eggers, K.

Publication Date: 2025

Journal: Journal of Speech, Language, and Hearing Research : JSLHR 68(8), pp. 3869–3886

Abstract: Purpose: This scoping review examined differences in types and/or frequency of speech disfluencies between multilingual individuals who do and do not stutter. We also examined whether language dominance and/or proficiency influences the types and frequency of speech disfluencies.; **Method:** The review was performed following the Preferred Reporting Items for Systematic Reviews and Meta-Analyses extension for scoping reviews guidelines. The search was conducted using inclusive search strings related to multilingualism and speech disfluencies in Medline, Web of Science, Scopus, and Embase. The following information was extracted for each of the studies: general study information (authors, title, year, research field, geographic location), participant information (number of participants, types of study groups, age groups, language dyads), study method, types of collected speech samples, terms used for referring to disfluencies, the definition of the term "disfluency," the types of disfluencies assessed, the proposed causal mechanism of disfluencies in multilinguals, the frequency of disfluencies, and identified group differences in disfluencies. Of the 792 records screened, 68 were included in the review.; **Results:** Similar types of speech disfluencies were present in the speech of multilinguals who do and do not stutter. However, a clear difference was apparent in the frequency of stuttering-like disfluencies between groups; the frequency of other disfluencies had a similar range. Monolingual guidelines do not apply to multilingual speakers. Finally, most records reported a higher frequency of speech disfluencies in both groups' less dominant and/or proficient language.; **Conclusions:** This review provides insights on assessing stuttering in multilingual clients to avoid misdiagnosis of stuttering in this population. Research into the aspects of speech disfluencies in multilingual individuals who do and do not stutter is limited, and further research is warranted to deepen our understanding of how different aspects of multilingualism influence the manifestation of speech disfluencies in both groups. Therefore, there is a strong need for a systematic and uniform approach to define and evaluate speech disfluencies in multilinguals.; Supplemental Material: https://doi.org/10.23641/asha.29441882.

4. Benefits of a Virtual, Adapted Yoga Practice for People With Aphasia: A Pilot Cohort Study

Item Type: Journal Article

Authors: Bislick, Lauren;Dietz, Aimee;Cornelius, Karen;Duncan, E. S.;Engelhoven, Amy E. R. and Hart, Michelle K.

Publication Date: 2025

Journal: American Journal of Speech-Language Pathology 34(3), pp. 1380–1389

Abstract: Purpose: The purpose of this study was to extend previous work using a pilot delayed cohort design with a more geographically and linguistically diverse group of people with aphasia (PWA) to explore the impact of a virtual, adapted, and aphasia-friendly yoga program; expand our original outcome measures to include a self-report of aphasia impact in addition to measures of resilience, stress, sleep disturbance, and pain management; and continue programmatic development through participant feedback about the program structure.; **Method:** A delayed cohort design was used to document the benefits of a virtual, adapted, and aphasia-friendly yoga program for persons with moderate-severe aphasia, replicating our previous work with persons with mild-moderate aphasia. Fourteen PWA participated in an 8-week community yoga program. Perceived stress, resilience, sleep disturbance, pain management, and aphasia impact were assessed pre- and postparticipation in the yoga program via self-report. A brief questionnaire was given at the end of the yoga program to inform programmatic development.; **Results:** Results of group comparisons suggest that participation in an 8-week adapted yoga program may positively impact perceptions of resilience (medium effect), sleep disturbance (medium effect), perceived stress (small effect), and aphasia impact (small effect). No effect was found for pain. Overall, participants reported a positive experience and offered feedback to enhance the structure of the program.; **Conclusions:** Findings are promising and support yoga as a potent adjunct to traditional rehabilitation efforts to support resilience and psychosocial variables that impact quality of life in people with moderate-severe aphasia.; Supplemental Material: https://doi.org/10.23641/asha.28514249.

5. Perspectives on goal setting: Video-reflexive ethnography with speech-language therapists and clients

Item Type: Journal Article

Authors: Brauner, Laurien;Neijenhuis, Karin;Dalemans, Ruth;Wees, Philip J. van der and Gerrits, Ellen

Publication Date: 2025

Journal: International Journal of Language & Communication Disorders 60(1), pp. e13138

Abstract: Background: Goal setting is an essential step in the clinical reasoning process of speech and language therapists (SLTs) who provide care for children, adolescents and adults with communication

disorders. In the light of person-centred care, shared or collaborative goal setting between the SLT and client is advised in (inter)national guidelines. SLTs face challenges in implementing (shared) goal setting as theoretical frameworks and practical interventions are scarce and less applicable to use with a wide range of communication vulnerable populations.; **Aims:** A first step in developing theory and practical interventions is to explore first-hand experiences of SLTs and clients about day-to-day goal-setting practice. This study was guided by the following research question: What are the perspectives and needs of SLTs and persons with communication disorders regarding (shared) goal setting in routine SLT services?; **Methods & Procedures:** The qualitative study was carried out in the setting of routine speech-language therapy services in community practices, primary education and neurological rehabilitation in the Netherlands. Data collection followed the principles of video-reflexive ethnography, using video footage of goal-setting conversations to facilitate semi-structured, reflexive interviews. Data analysis was based on reflexive thematic analysis. A total of 12 interviews were conducted with client-SLT dyads, covering perspectives from children, parents and adults with a range of communication difficulties and their SLTs.; **Outcomes & Results**: Data analysis resulted in four themes, of which two contain subthemes. Each theme represents a central organizing concept found in SLT and client interviews. The themes were identified as: (1) goal setting is a complex process; (2) goal talk needs to be communication accessible; (3) communicative participation goals are hard to grasp; and (4) the importance of relationships. Topics such as power imbalance, communication vulnerability, effective communication strategies, and motivation and trust are explored under these themes.; **Conclusions & Implications:** SLTs are encouraged to view shared goal setting as a process that needs to be explicitly planned and communicated with clients regardless of their age or communication vulnerability. SLTs have expert knowledge and skills when it comes to supporting communication and applying these skills during goal talks might strengthen shared goal setting and foster a therapeutic relationship. There is a need to concretely conceptualize and embed shared goal setting in policy and clinical guidelines. The themes reported have tentative clinical implications for developing such policy, and shared goal-setting interventions for SLT practice, under the condition that SLTs and people with communication disorders are continuously involved.; **What This Paper Adds:** What is already known on the subject SLTs want to set meaningful goals together with their patients but lack theory and resources to effectively shape the goal-setting process. Few studies have directly reported on the perspectives and needs of SLTs and patients regarding goal setting. Patients generally perceive goal setting as a vague activity in which they minimally participate. SLTs want to involve patients in the goal-setting process and describe the potential benefits, but they also want to report barriers on the systemic and professional competence level. What this paper adds to the existing knowledge SLTs and patients perceive shared goal setting as a multifaceted process, rather than a one-off conversation. This process holds potential vulnerabilities for SLTs and patients alike, and the themes in this study propose potentially helpful ingredients to mediate this vulnerability and shape the goal-setting process. What are the potential or clinical implications of this work? To take the first steps towards effective shared goal setting, SLTs should embrace the element of discovery in goal setting and apply their expert knowledge in supporting communication. To develop practical interventions for SLTs, shared goal setting needs to be further conceptualized and embedded in policy and clinical guidelines. (© 2024 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.)

Access or request full text: https://libkey.io/10.1111/1460-6984.13138

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=39636242&profid=ehost

6. Outcomes of an Advanced Speech and Language Therapist-Led Low-Risk 2-Week Wait Clinic for Suspected Head and Neck Cancer: A UK-Based Pilot Study

Item Type: Journal Article

Authors: Butler, Jen;Sellstrom, Diane;Eastwood, Natalie;Hamilton, David and O'Hara, James

Publication Date: 2025

Journal: Journal of Voice : Official Journal of the Voice Foundation 39(4), pp. 1138.e1–1138.e7

Abstract: Objectives: To describe outcomes of a pilot Speech and Language Therapist led (SLT-led) 2-week wait (2WW) assessment clinic for head and neck cancer (HNC).; **Study Design:** A prospective 3-month pilot clinic was conducted. All referrals were triaged by an otolaryngologist. Referrals for unilateral symptoms, palpable neck lumps and/or ear pain were excluded. SLTs performed initial assessment. All patients received oral and neck examinations, and a videolaryngoscopy, including therapy trials. All images and management plans were discussed with an otolaryngologist within one week of the clinic. Images of suspicious lesions were reviewed within 24 hours. Data were collected consecutively for all patients attending the clinic between December 2021 and March 2022. Data included demographics, smoking history, perceptual voice ratings (GRBAS), validated patient-reported outcome measures (PROMs), diagnoses, and clinical plans. Descriptive statistics were conducted within Excel and inferential statistics within SPSS.; **Results:** Over 3 months, 218 patients were seen, 62% were female and the mean age was 63 years. Most patients (54%) opted for "patient initiated follow-up" and 16% received further investigations. No patients required Ear, Nose and Throat (ENT) outpatient review for second opinion. Most (65%) received a functional diagnosis. The diagnostic yield of cancer was 5% (n = 11) and high-grade dysplasia was 3% (n = 6). At the time of writing, no patients had been re-referred to the service. There was a positive relationship between risk of diagnosis and mean GRBAS score (P < 0.01), and VHI-10 score (p=0.013). Patients with higher-risk diagnoses tended to be male, older, and had a history of smoking. PROMs suggested that laryngeal symptoms, regardless of underlying pathology, affect quality of life.; **Conclusion:** Experienced SLTs working alongside otolaryngologists safely led assessment and directed treatment planning for patients referred to ENT on the 2WW pathway. The rate of high-risk diagnoses was low. Higher GRBAS and VHI-10 scores may be useful indicators for higher risk diagnoses. (Crown Copyright © 2023. Published by Elsevier Inc. All rights reserved.)

Access or request full text: https://libkey.io/10.1016/j.jvoice.2023.02.007

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=37024351&profid=ehost

7. The Role of Speech and Language Therapists (SLTs) in International Stroke Teams: A Systematic Review

Item Type: Journal Article

Authors: Charalambous, Marina;Pierce, John E.;Pastou, Georgia;Kola, Erasmia and Savitz, Sean I.

Publication Date: 2025

Journal: International Journal of Language & Communication Disorders 60(4), pp. e70062

Abstract: Background: Current published guidelines suggest that speech and language therapists (SLTs) should be part of stroke teams, but their involvement and roles according to country income are unknown.; Aims: This review aims to (1) investigate the level of involvement of SLTs in acute stroke management, rehabilitation, and long-term care, and (2) examine whether the roles and contributions of SLTs in stroke care vary according to a country's income level.; **Methods:** A systematic review methodology was conducted by an expert librarian and three independent researchers based on the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines. This systematic review was registered on the PROSPERO website. The search strategy involved using MESH Terms 'speech and language therapy' AND stroke AND team* across six databases as follows: MEDLINE Complete, APA PsycInfo, CINAHL Plus, PubMed, Embase, and Scopus. The review was conducted using the Covidence software.; Results: Out of 1142 titles identified, 42 studies met the criteria: 34 studies (80%) were from high-income countries, five (12%) were from upper-middle-income countries, and three (8%) were from low-middle-income countries. No studies were published in low-income countries.; **Conclusion:** Lack of SLTs reported in stroke and rehabilitation teams in low- and low-middle-income countries raises concern for patients' access to specialized SLT services. Healthcare

policy should highlight the need for greater investment in SLT resources and the role of SLTs in managing aphasia, dysphagia, and chronic rehabilitation needs to improve patient outcomes.; **What This Paper Adds**: What is already known on the subject Stroke is a leading cause of acquired disability with rehabilitation requiring a multidisciplinary approach. Speech and language therapists (SLTs) play a significant role in stroke care, addressing communication, swallowing, and cognitive disorders. Despite the recognized importance, SLTs' involvement in stroke care teams varies significantly across healthcare systems, especially in lower-income countries. What this paper adds to existing knowledge This study reveals global discrepancies in SLT involvement in stroke care, with high-income countries benefiting from structured, specialized roles across all phases of rehabilitation, while low- and middle-income countries face ad hoc, limited involvement due to systemic changes. The findings highlight the need for standardized protocols and greater investment in SLT resources to ensure equitable stroke rehabilitation services worldwide. What are the potential or actual clinical implications of this work? The clinical implications of this study are as follows: (a) integrating SLTs in stroke teams, especially in underrepresented regions, is essential to improve rehabilitation outcomes, (b) advocacy efforts prioritize equal access to SLT services globally, supported by policy changes and education and (c) participatory research must involve patients as equal partners to address community-specific rehabilitation priorities as involving stroke survivors and caregivers in the design of rehabilitation services has been shown to identify local barriers to access and shape more culturally appropriate interventions. (© 2025 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.)

Access or request full text: https://libkey.io/10.1111/1460-6984.70062

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=40536137&profid=ehost

8. Experiences and perspectives of UK speech and language therapists on telehealth assessment with people living with post-stroke aphasia

Item Type: Journal Article

Authors: Comer, Amanda;Northcott, Sarah;Behn, Nicholas;Roper, Abi;Devane, Niamh and Hilari, Katerina

Publication Date: 2025

Journal: International Journal of Language & Communication Disorders 60(2), pp. e70018

Abstract: Background: Stroke care in the UK was significantly affected by the COVID-19 pandemic, with many services switching to telehealth. Post-pandemic, a UK survey of speech and language therapists (SLTs) working with people with aphasia (PWA) showed the vast majority planned to continue to use telehealth alongside in-person intervention. Telehealth is considered a cost-effective and feasible method of service delivery; however, there is limited evidence to support its use in the assessment of people with post-stroke aphasia.; Aims: To investigate what barriers and facilitators SLTs experience when administering telehealth assessments to PWA and to explore SLTs' perspectives on what makes for a positive patient experience.; **Methods & Procedures:** Focus groups (dyadic/triadic) were conducted via videoconferencing. Transcripts were analysed using framework analysis. Inclusion criteria for participants were SLTs working in the UK with PWA, with experience of using telehealth assessment.; **Outcomes & Results:** A total of 14 SLTs participated across six groups. Seven themes were identified: assessment; technology; factors specific to PWA; factors specific to family, carers and their environment; factors specific to SLTs; benefits of telehealth assessment; and what telehealth would look like in an ideal world. Facilitators to telehealth assessment included good internet connectivity, access to a helper, adapted assessments, preparation and training PWA to use telehealth platforms. Barriers included reduced control over the environment, having a cognitive impairment, aphasia severity, low beliefs in competence using technology and challenges with managing the emotional needs of PWA during telehealth assessment. A strong therapeutic relationship, offering choice and flexibility in assessment administration, promoted a positive patient experience.; **Conclusions & Implications:** This study

provides new insights into the current use of telehealth assessment with PWA by SLTs in the UK. Barriers and facilitators identified can support the implementation of telehealth assessment in SLT services. Providing a positive patient experience when using telehealth assessment is important to SLTs, with patient choice a key factor. Further research is indicated to increase the range of standardized assessments for telehealth assessment and investigate the efficacy of a hybrid model approach to service delivery.; What This Paper Adds: What is already known on the subject There is emerging evidence for the use of telehealth assessment as a feasible and appropriate means of service delivery for SLTs. However, little is known about SLTs' experience of delivering telehealth assessments to PWA. What this paper adds to existing knowledge This study identified both the facilitators and barriers experienced by SLTs when using telehealth assessment with PWA. Practical advice and considerations for telehealth administration are provided. What are the potential or actual clinical implications of this work? Resources are required for the implementation of SLT telehealth assessments, particularly in training for both PWA and SLTs, assessments designed for telehealth and accessible telehealth platforms. A hybrid approach to assessment could be beneficial for both PWA and clinicians, retaining the advantages with the acknowledgement that telehealth may not be suitable for all. (© 2025 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.)

Access or request full text: https://libkey.io/10.1111/1460-6984.70018

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=39987559&profid=ehost

9. A Longitudinal Investigation Into the Relationship Between Working as a Speech and Language Therapist and Wellbeing

Item Type: Journal Article

Authors: Ewen, Claire;Jackson, Craig A. and Galvin, John

Publication Date: 2025

Journal: International Journal of Language & Communication Disorders 60(3), pp. e70046

Abstract: Background: Healthcare workers risk stress, burnout and fatigue from time pressures, insufficient workload control and ineffective support. Unaddressed, these issues can lead to the attrition of the workforce. Retention of speech and language therapists (SLTs) is an ongoing concern, but little is known about the relationship between SLT wellbeing and their workplaces.; **Aims:** The aims of the present study were therefore to: (1) Explore the levels of job satisfaction and general wellbeing of SLTs working clinically. (2) Describe the occupational environments of SLTs working clinically. (3) Investigate the relationship between job design and wellbeing outcomes. (4) Establish whether job satisfaction and general psychosocial wellbeing levels were consistent over time. (5) Explore whether personal changes/changes to work made by participants over a 3-month period impacted their job satisfaction and/or general wellbeing.; **Method:** All SLTs practising clinically in the UK were eligible to participate. Participants were recruited via selective sampling (advertising in Royal College of Speech and Language Therapists publications) and snowballing (using social media). A longitudinal study, using an online survey at two time points (P1 and P2), approximately 3 months apart, measured work stressors of SLTs, job satisfaction and general wellbeing, using the Speech-language Pathologist Stress Inventory, Generic Job Satisfaction Survey and General Health Questionnaire-28 (GHQ-28). Relationships between job types, wellbeing and subsequent changes were analysed using multivariate analysis of variance.; **Results:** Of the 632 participants at P1, 98% were women, 95% were white and the average age was 38.7 years. Ninety-one percent were working in England, and 85% were organisationally employed. At P1, 53.3% of participants who completed the GHQ-28 reported anxiety, depression, somatic symptoms of stress and social dysfunction. Those in high-demand, low-control, and low-support ('Isostrain') jobs (n = 105) had the lowest job satisfaction (p < 0.001, partial η 2 = 0.383) and poorest wellbeing (p < 0.001, partial η 2 = 0.210). Wellbeing scores were stable from P1 to P2 (n = 295). Making 'positive personal changes' had no impact on job

satisfaction, although changing jobs did (t (16) = -3.225, p < 0.01).; **Conclusion and Implications:** Over half the participants in this study reported psychosocial ill health associated with the demands, control and support in their jobs. Psychosocial risks are embedded within work organisation, suggesting that employers and managers of SLTs consider the overall psychosocial design of jobs, with a view to improving retention. The use of a step-by-step risk assessment and intervention approach is recommended. Further research may corroborate the results and ensure better psychosocial risk management.; What This Paper Adds: What is already known on the subject The extant literature on speech and language therapist (SLT) wellbeing reports various levels of job satisfaction and burnout. While this has been associated with several job factors, there is yet to be a comprehensive analysis of how job design impacts wellbeing. This study aimed to investigate this and provide a starting point for improving wellbeing through the consideration of job design. What this paper adds to the existing knowledge Results of this study indicate that, before the onset of COVID-19, just over one in two SLTs working clinically in the UK were at risk of being psychologically vulnerable to anxiety, depression, experiencing somatic symptoms of stress, and social dysfunction. Those who experienced high demand, low control and low support at work were more likely to experience psychological distress and low job satisfaction. What are the potential or actual clinical implications of this work? This study has revealed a combination of potential workplace features that are associated with SLT wellbeing, suggesting employers consider the overall psychosocial design of SLT jobs, instead of viewing occupational factors individually. The JDCS model proved a suitable framework for describing SLT jobs; it could be used in the future to gain detailed knowledge about different elements that constitute particular SLT jobs. It is essential that the voices of SLTs who are primarily clinical are heard and used to inform this appraisal; collaboration between managers and clinicians is necessary for success in this endeavour. (© 2025 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.)

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10. Adult stuttering prevalence II: Recalculation, subgrouping and estimate of stuttering community engagement

Item Type: Journal Article

Authors: Gattie, Max;Lieven, Elena and Kluk, Karolina

Publication Date: 2025

Journal: Journal of Fluency Disorders 83, pp. 106086

Abstract: Purpose: Epidemiological research of stuttering has frequently focused on children, with a relative paucity of population level data specific to adults. Prevalence data for adults are reassessed here, including a breakdown of whether stuttering is overt or covert, and whether onset was in childhood or adulthood. The engagement of adults who stutter with stuttering communities is also estimated.; **Methods:** Prevalence calculations were based on data from studies having the strongest designs, following the systematic review of Gattie, Lieven & Kluk (2024, this issue). Original data for engagement with stuttering communities were gathered from English language internet stuttering support groups, a national stuttering charity in the UK and a regional stuttering support group in Manchester, UK.; **Results:** Adult stuttering prevalence was estimated at 0.96% (95% CI 0.65, 1.44). This can be broken down to 0.63% overt stuttering (95% CI 0.46, 0.79) comprising 0.53% childhood onset and 0.10% adult onset; and 0.33% covert stuttering (95% CI 0.19, 0.58) comprising 0.28% childhood onset and 0.05% adult onset. Covert stuttering will have been overestimated, and may often be very mild. Engagement with stuttering communities was estimated at 0.99% internationally, 0.63% nationally and 1.01% regionally. Actual engagement will have been lower due to attrition and overcounting.; **Conclusion:** The adult stuttering prevalence estimate of 0.96% is consistent with the widely-cited all ages

stuttering prevalence estimate of 1%. Of adults who stutter, fewer than 1% engage with stuttering communities.

Access or request full text: https://libkey.io/10.1016/j.jfludis.2024.106086

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=39706110&profid=ehost

11. Comparing Patient Outcomes in Aphasia Rehabilitation: Intensive Comprehensive, Modified Intensive Comprehensive, and Usual Care Models

Item Type: Journal Article

Authors: Griffin-Musick, J.;Off, C.;Scharp, V.;Fahey, D.;Slovarp, L. and Quindry, J.

Publication Date: 2025

Journal: Journal of Speech, Language, and Hearing Research : JSLHR 68(8), pp. 4006–4030

Abstract: Purpose: Aphasia negatively impacts functional communication, communicative participation, and psychosocial well-being in stroke survivors, requiring novel models of rehabilitation that are person centered and holistic. This study aimed to evaluate the feasibility and preliminary efficacy of three service delivery models: intensive comprehensive aphasia program (ICAP), modified intensive comprehensive aphasia program (mICAP), and usual care (UC).; **Method:** This Phase I quasirandomized study investigated three models of service delivery for stroke survivors with post-acute aphasia: a 4-week, 84-hr ICAP; a 2-week, 24-hr mICAP; and an 8-week, 24-hr UC condition. A sample of 18 participants was recruited and quasirandomly assigned to one of the three conditions (ICAP: n = 8, mICAP: n = 6, UC: n = 4). Outcome measures assessed the constructs of language, functional communication, psychosocial well-being, and quality of life through individual, within-group, and between-group comparisons.; **Results:** Overall, participants in the ICAP and mICAP groups demonstrated greater positive changes across multiple outcome measures compared to those in the UC condition. All 18 participants completed their respective programs with no attrition, with adherence rates highest in the ICAP group, followed by the mICAP and then UC.; **Conclusions:** This Phase I pilot study provides initial feasibility and efficacy data directly comparing ICAP, mICAP, and UC service delivery models. Findings support the continued exploration of ICAP and mICAP models to address the diverse needs of individuals with aphasia.

Access or request full text: https://libkey.io/10.1044/2025_JSLHR-24-00806

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=40679377&profid=ehost

12. Economic Evaluations of Speech and Language Therapy Interventions: A Scoping Review

Item Type: Journal Article

Authors: Hill, James;Kulkarni, Amit;Moll, Deborah;Meteyard, Lotte;Shelley, Louise;Chugg, Grace;Jones, Gemma;Benedetto, Valerio;Harris, Catherine;Doherty, Alison;Harrison, Joanna and Clegg, Andrew

Publication Date: 2025

Journal: International Journal of Language & Communication Disorders 60(4), pp. e70091

Abstract: Background: With constrained funding and increasing demand, the pressures on health and care

services globally continue to grow. Given the challenges faced, it is imperative that services and interventions demonstrate cost-effectiveness, as well as patient/service-user and societal benefits, to maximize impact. Research has started to explore the cost-effectiveness of speech and language therapy (SLT) interventions, but little is known about this body of evidence overall. Given the increasing demand for economic information by different decision-makers, an overall understanding of the current evidence base is needed. Such an evaluation should map and assess the current evidence to identify key gaps, areas of strength, and recommendations for future economic evaluations of SLT.; **Aim:** To identify the extent and type of economic evaluations assessing the cost (including cost-effectiveness) of SLT interventions.; **Methods:** A scoping review was conducted identifying studies across seven key databases from date of inception to 20 October 2023. Studies were included if they assessed any type of cost of an intervention which was primarily delivered (directly or indirectly) by a speech and language therapist. A narrative synthesis was undertaken and clustered around common populations of interest, including adults post-stroke, adults with aphasia or dysarthria, adults with Parkinson's disease, adults with head and neck cancer, and children, young people, and adults with a range of conditions.; **Outcomes and Results:** This scoping review identified 52 studies which have been published over three and a half decades. Recently, there has been a notable increase in the number of studies, specifically cost-effectiveness and cost-utility analyses; however, there were limited internal citations and a substantial variation in populations and interventions assessed by these studies. Economic evaluations were carried out alongside various effectiveness study designs, using different units of analysis, time horizons, and perspectives.; **Conclusion:** Although a small number of studies have begun to explore the economic aspects of SLT, evidence in this area remains relatively scarce, highlighting the need to prioritize further economic evaluations. Given the substantial heterogeneity and limited interconnectivity within the existing evidence base, it is crucial to strategically organize and coordinate efforts to optimize future research. Future economic evaluations of SLT interventions should ideally run alongside randomized controlled trials and use decision-analytic modelling techniques to strengthen the economic evidence base.; **What This Paper Adds**: What is already known on the subject As pressures grow on health and social care services, it is increasingly important that the care and support provided is shown to be both effective and cost-effective, informing those who plan, provide, receive and pay for the services. Although some research has begun to examine the cost-effectiveness of speech and language therapy (SLT) interventions, the overall extent and depth of this body of evidence remain unknown. What this study adds to the existing knowledge This scoping review offers an overview of the maturity, depth, and extent of the evidence assessing the costs and cost-effectiveness of interventions provided by SLT. Although the evidence base continues to grow, it appears to lack coherence in its development, necessitating a strategically planned approach to optimize and coordinate efforts to the benefit of the service and those using it. What are the potential or clinical implications of this work? This scoping review has identified 52 studies which assessed the cost of SLT. The evidence from these studies can help us better understand the economic value of SLT. However, given the relative immaturity of the evidence base and lack of coordination across the findings, further research is required. This research should draw from the findings of this review and would ideally be part of a coherent, coordinated effort to develop a full understanding of the economic value of SLT across different clinical areas. (© 2025 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.)

Access or request full text: https://libkey.io/10.1111/1460-6984.70091

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=40650407&profid=ehost

13. Access to communication support for community-dwelling people with dementia: A mixed methods study exploring local perspectives within the United Kingdom context

Item Type: Journal Article

Authors: Hockley, Anna;Moll, Deborah;Littlejohns, Jemima;Collett, Zoe and Henshall, Catherine

Publication Date: 2025

Abstract: Introduction: Communication difficulties occur in all dementia subtypes. This can affect individuals' identity, relationships, and quality-of-life of people with dementia and their relatives. Professional guidelines recommend access to communication intervention, for example through speech and language therapy (SLT) services, but anecdotal evidence suggests that the type and availability of this provision varies.; **Aims:** This study aimed to explore the communication needs of people with dementia, their quality-of-life impact, and local and national service provision.; **Methods:** This mixed-methods study comprised three phases:Data was analysed using descriptive statistics and thematic analysis.; **Results:** Four main themes were identified: dementia-related communication changes; accessing support for communication; identifying communication strategies; and service considerations. The survey identified inconsistent or absent communication input for many people with dementia. Interview and focus group findings highlighted diverse dementia-related communication needs which impacted quality-of-life and support required. Participants suggested service-level considerations for addressing these needs.; **Conclusion:** Dementia-related communication impairments are diverse and can considerably impact quality-of-life of people with dementia and their relatives. Communication intervention service-provision varies widely, resulting in unmet needs. These findings add to the growing evidence-base on dementia-related communication difficulties, and highlight a need to develop clinical services. (© The Author(s) 2025. Published by Oxford University Press on behalf of the British Geriatrics Society.)

Access or request full text: https://libkey.io/10.1093/ageing/afaf150

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=40459345&profid=ehost

14. Structural Priming for Sentence Production in Aphasia: What Does Oral Repetition Do?

Item Type: Journal Article

Authors: Lee, J.;Man, G.;Christ, S. and Zhang, P.

Abstract: Purpose: Structural priming-speakers' unconscious tendency to reuse previously encountered sentence structures (primes) in future production-facilitates access and learning of grammatical representations in persons with aphasia (PWAs). However, it remains unclear which components of structural priming tasks are essential to consistent and lasting effects, a discovery critical for cost-effective clinical translation of research. We examined the effects of orally repeating versus listening to primes on immediate and lasting sentence production in PWAs and controls.; **Method:** In a collaborative priming task, participants took turns with the experimenter, describing transitive and dative event pictures. One group of PWAs and controls listened to the experimenter's descriptions (primes) before they described their own picture, whereas the other group orally repeated their interlocutor's prime sentences before the target picture descriptions. In Experiment 1, the target picture description was elicited immediately after the prime (0-lag, immediate priming). In Experiment 2, two filler trials (2-lag) intervened between prime and target, examining longer term priming.; **Results:** At both immediate and longer term priming, significant priming effects were observed in both groups, as indicated by increased productions of passives following passive versus active primes and increased productions of double-object dative sentences following double-object than prepositional object dative prime sentences. However, orally repeating prime sentences did not reliably and consistently enhance the magnitude of priming effects across lags and groups. Additionally, PWAs' repetition abilities did not result in higher degrees of priming effects.; **Conclusion:** These findings suggest that opportunities for processing syntactic representations that shared between prior (prime) and current (target) utterances is a rather essential ingredient for positive structural priming in PWAs, while repeating prime sentences is an optional

ingredient that can be removed or modified.; Supplemental Material: https://doi.org/10.23641/asha.28291949.

Access or request full text: https://libkey.io/10.1044/2024_JSLHR-24-00216

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=40042914&profid=ehost

15. "They don't realise how hard he has to try every day": The rewards and challenges of parenting a child with developmental language disorder

Item Type: Journal Article

Authors: Leitão, Suze;St Clair, Michelle,C.;Botting, Nicola;Gibson, Jenny and Jackson, Emily

Publication Date: 2025

Journal: International Journal of Language & Communication Disorders 60(2), pp. e70003

Abstract: Background: An emerging body of literature explores the impact of living with developmental language disorder (DLD) on children, individuals and families. This work has identified a range of challenges and strengths. However, there is limited evidence from the DLD community about the impacts of living with DLD in relation to parenting.; **Aims:** We explored the perspectives of caregivers in response to an open-text survey question: "What is most rewarding and challenging about being a parent to a child with DLD?"; **Methods & Procedures**: Respondents were caregivers of children with DLD who had signed up to Engage with Developmental Language Disorder. Qualitative content analysis was used to explore the open-ended responses from 112 parents who completed the yearly survey (child average age = 9.6 years; SD = 3.5 years, 46.9% female). Most caregivers lived in the United Kingdom, but we also had responses from around the world.; **Outcomes & Results:** For 'rewards', 52 codes and seven higher-order categories were identified. These comprised the many rewards experienced from caring for a child with DLD, including seeing and celebrating progress, celebrating their child's personality and being proud to be their child's parent. Caregivers mentioned the positives gained from learning about DLD and working together with their child to help them achieve their potential. They reflected on the supportive nature of the 'right' environment, in particular the school context and social connectedness. For 'challenges', 84 codes and 11 higher-order categories were identified. Caregivers often noted the lack of awareness of DLD amongst the community and professionals in general, within the school system and amongst teachers. Caregivers reported support and information about DLD were difficult to find and were impacted by a constant need for advocacy. They reflected on the increased time needed to support their child and worried about their child's social and community participation. Many commented on the impact of DLD on the family and the mental health and well-being of both them and their children.; **Conclusions & Implications:** Hearing the views of caregivers of children with DLD is key because shared decision-making is central to client-centred care. Furthermore, 'client perspectives' are a cornerstone of evidence-based practice. There is much to take from the responses and for professionals to reflect on and use. Collaboration with children, young people and families is needed for effective advocacy, and to develop awareness of DLD.; What This Paper Adds: What is already known on the subject An emerging body of literature has explored the impact of living with developmental language disorder (DLD) on the child, the individual and the family. This work has identified a range of challenges and strengths. These are important considerations to support the evidence-based practice of those working with the DLD community from planning treatment goals to designing and providing services. What this paper adds to existing knowledge Caregivers highlighted a range of rewards in parenting a child with DLD. They also identified a wide range of challenges, including a lack of awareness and support from professionals, the constant need for advocacy and the impact on the family as well as the impact on the mental health of their child and themselves as parents. What are the potential or actual clinical implications of this work? Shared decision-making is central to client-centred and family-centred care, and client perspectives are a key aspect of evidence-based practice. There is much for clinicians and practitioners to take from this data set of parent perspectives. The findings from this study will guide researchers and clinicians to reflect on how to work in collaboration with individuals with DLD

and their families, including in their design and delivery of services and advocacy to continually raise awareness of DLD. (© 2025 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.)

Access or request full text: https://libkey.io/10.1111/1460-6984.70003

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=39970424&profid=ehost

16. Speech-Language Therapists' Training, Confidence, and Barriers When Serving Bilingual Children: Development and Application of a National Survey

Item Type: Journal Article

Authors: McKenna, Meaghan;Soto-Boykin, Xigrid;Larson, Anne and Julbe-Delgado, Diana

Publication Date: 2025

Journal: American Journal of Speech-Language Pathology 34(5), pp. 2632–2648

Abstract: Purpose: Most pediatric speech-language therapists (SLTs) will serve bilingual children. This article reports findings from the National Survey of SLTs' Training, Confidence, and Barriers When Serving Bilingual Children . This survey was created for SLTs to self-report training, confidence, and barriers when assessing and delivering interventions to bilingual children.; **Method:** The 58-question survey was developed using commonly accepted procedures for questionnaire development to establish content validity: (a) identification of the purpose of the survey, (b) creation of a blueprint of items, (c) expert panel review, and (d) cognitive interviews with end-users. Upon completing initial development, 567 bilingual and monolingual SLTs responded to survey items. Internal structure validity was assessed using a confirmatory factor analysis. A three-factor model with the following dimensions-linguistically matched, not linguistically matched, and barriers when not linguistically matched-resulted.; Results: Descriptive findings uncovered an ongoing need for SLTs to receive training to support bilingual children on their caseload, especially to communicate with families who speak languages other than English and embed children's home language in therapy sessions. While bilingual SLTs were more confident in serving bilingual children than monolingual SLTs were, both groups identified inadequate resources, along with other barriers that impacted their perceived confidence and competence.; **Conclusions:** Survey results reveal the continued need to support preservice and practicing SLTs to enhance their competence and confidence when assessing and treating bilingual children. The findings from the present study have the potential of informing American Speech-Language-Hearing Association's leadership, institutes of higher education, and continuing education initiatives.; Supplemental Material: https://doi.org/10.23641/asha.29409923.

Access or request full text: https://libkey.io/10.1044/2025_AJSLP-24-00498

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=40638662&profid=ehost

17. Conflicting Evidence for a Motor Timing Theory of Stuttering: Choral Speech Changes the Rhythm of Both Neurotypical and Stuttering Talkers, but in Opposite Directions

Item Type: Journal Article

Authors: Meekings, S.;Eijk, L.;Stankova, S.;Maruthy, S. and Scott, S. K.

Publication Date: 2025

Abstract: Purpose: Talking in unison with a partner, otherwise known as choral speech, reliably induces fluency in people who stutter (PWS). This effect may arise because choral speech addresses a hypothesized motor timing deficit by giving PWS an external rhythm to align with and scaffold their utterances onto. This study tested this theory by comparing the choral speech rhythm of people who do and do not stutter to assess whether both groups change their rhythm in similar ways when talking chorally.; **Method:** Twenty adults who stutter and 20 neurotypical controls read a passage on their own and then a second passage chorally with a neurotypical partner. Their speech rhythm was evaluated using Envelope Modulation Spectrum (EMS) analysis to derive peak frequency, a measure of the dominant rate of modulation in the sound envelope, as well as peak amplitude (the amplitude of the peak frequency), across several octave bands associated with different features of speech.; **Results:** The two groups displayed opposing patterns of rhythmic change during choral reading. People with a stutter increased their EMS peak frequency when they read chorally, while neurotypical talkers' choral speech was characterized by reduced peak frequency compared to solo reading.; **Conclusions:** Our findings show that the choral speech rhythm of PWS differs from that of neurotypical talkers. This indicates limited support for the hypothesis that choral speech addresses a motor timing deficit by giving PWS a rhythmic cue with which to align.

Access or request full text: https://libkey.io/10.1044/2024_JSLHR-24-00405

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=39772710&profid=ehost

18. Approaches to Training Speech-Language Pathologists to Work With People With Aphasia: A Systematic Review

Item Type: Journal Article

Authors: Musaji, Imran;O'Bryan, Erin,L. and Bowen, Aaron

Publication Date: 2025

Journal: American Journal of Speech-Language Pathology 34(3), pp. 1454–1492

Abstract: Purpose: The aim of this systematic review was to analyze the published research on training approaches for preparing current and future speech-language pathologists (SLPs) to work effectively with people with aphasia (PWA). The review addresses key questions regarding the described training approaches, their key features, research quality, and efficacy.; **Method:** The review was conducted in accordance with Preferred Reporting Items for Systematic Reviews and Meta-Analyses guidelines and registered with International Prospective Register of Systematic Reviews (CRD42024453742). The literature search spanned nine databases. Eligibility criteria included peer-reviewed publications in English that reported on training programs involving current or future SLPs working with PWA. Studies were assessed for research quality using the American Speech-Language-Hearing Association's (ASHA's) levels of evidence framework. Narrative synthesis was used to identify key features in the training programs.; **Results:** A total of 920 citations were identified, with 50 studies meeting the inclusion criteria for analysis. Included studies represented a broad range of training approaches, research designs, and research quality. The 50 studies fell into ASHA levels of evidence Ib, IIa, IIb, III, and IV. Statistical meta-analysis was not possible because of variability in research design and outcome measures, but the studies revealed statistically significant findings relevant to the question of what makes training effective for preparing clinicians to work with people with aphasia.; **Conclusions:** The current literature related to training of clinicians to work with PWA is heterogeneous in approach, outcome metrics, and methodological quality. There is evidence supporting several recommendations for training clinicians including integrating direct interactions with PWA during training, combining didactic and experiential learning, and incorporating reflective practices. Overall, the review

highlights the need for well-described evidence-based training standards for speech-language pathology students working with PWA. Future research should aim to develop and validate comprehensive training guidelines to improve care quality for individuals with aphasia.

Access or request full text: https://libkey.io/10.1044/2024_AJSLP-24-00350

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=40053876&profid=ehost

19. The PD COMM Process Evaluation: Describing Interventions and Implementation in a UK Pragmatic Randomised Controlled Trial of Speech and Language Therapy for People With Parkinson's-Related Dysarthria

Item Type: Journal Article

Authors: Nicoll, Avril;Brady, Marian C.;Masterson-Algar, Patricia;Burton, Christopher;Beaton, Gillian;Dickson, Sylvia;Caulfield, Maria;Smith, Christina H.;Clarke, Carl E.;Ives, Natalie;Jowett, Sue;Rick, Caroline;Woolley, Rebecca and Sackley, Catherine M.

Publication Date: 2025

Journal: International Journal of Language & Communication Disorders 60(4), pp. e70084

Abstract: Background: As people with Parkinson's experience progressive communication changes, effective, implementable speech and language therapy (SLT) interventions are needed. Process evaluations alongside pragmatic randomised controlled trials (RCTs) are of clinical value if they describe, compare and understand the implementation of trial interventions. This paper reports the PD COMM process evaluation. PD COMM was a large, UK multi-centre phase III pragmatic RCT of SLT in the National Health Service (NHS). It recruited 388 people with Parkinson's who were randomised to Lee Silverman Voice Treatment (LSVT), Standard NHS SLT, or no dysarthria intervention.; **Aims:** To describe and compare the content and service delivery components of the PD COMM SLT interventions; understand experiences of implementing LSVT; explain trial outcomes; and reflect on implications for practice and research.; **Methods and Procedures:** We took a pragmatic, mixed methods approach. The intervention description team used a sub-sample of routine therapy notes and trial record forms, the Template for Intervention Description and Replication (TIDieR) and simple descriptive statistics to compare Individual Participant Therapy Data (LSVT n = 51; Standard NHS SLT n = 54). In parallel, informed by Normalisation Process Theory (NPT), the implementation team conducted qualitative interviews with a sub-sample of therapists (n = 20) and participants (n = 24) to understand the additional work of implementing LSVT. The core process evaluation team met to integrate the findings in relation to the trial outcomes.; **Outcomes and Results:** LSVT was largely delivered per protocol, tailored to participants' interests and interactions. Dosage was a key difference between the two interventions, commonly achieved by two or more therapists delivering LSVT. Effective mechanisms were LSVT's structured design, repetitive and social nature, practise requirements and focus on volume. Standard NHS SLT was eclectic, reflecting a range of clinical approaches at a lower intensity, including some techniques and activities in common with LSVT. Although focused on impairment therapy, including specific voice therapy techniques, it also featured cognitive-linguistic and psychosocial targets and low technology augmentative and alternative communication (AAC). The trial design may have limited opportunities for group intervention.; **Conclusions and Implications:** Any LSVT roll-out needs service support and coordination, and should take an inclusive approach. Future research of Standard NHS SLT should explore a rationale for dosage and more explicit tailoring to individuals and their families. There is also a pressing need to deliver the benefits of LSVT in a cost-effective manner and to develop a range of evidence-based, implementable alternatives as people's communication support needs change.; **What This Paper Adds:** What is already known on the subject Lee Silverman Voice Treatment (LSVT) has a body of incrementally-developed evidence from effectiveness trials but has not previously been tested in a pragmatic randomised controlled trial (RCT) with an embedded process evaluation. What this paper adds to

the existing knowledge This mixed methods process evaluation paper describes and compares content and service delivery components to understand similarities and differences between LSVT and Standard NHS SLT interventions and experiences of implementing LSVT in the UK NHS. What are the potential or actual clinical implications of this work? Services can use the findings to plan delivery of intensive interventions and to reflect on the content and service delivery aspects of locally Standard NHS SLT and how it might be improved. (© 2025 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.)

Access or request full text: https://libkey.io/10.1111/1460-6984.70084

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=40637984&profid=ehost

20. Surrey Communication and Language in Education Study (SCALES): cohort profile

Item Type: Journal Article

Authors: Norbury, Courtenay;Griffiths, Sarah;Lucas, Laura;Gooch, Debbie;Baird, Gillian;Charman, Tony;Pickles, Andrew;Vamvakas, George and Simonoff, Emily

Publication Date: 2025

Journal: BMJ Open 15(7), pp. e100710

Abstract: Purpose: The Surrey Communication and Language in Education Study (SCALES) cohort was established to estimate prevalence, persistence and impact of developmental language disorders on cognition and mental health, using newly established international consensus diagnostic criteria.; **Participants:** A population sample of 7267 children aged 4-5 years (59% of eligible children), who started state-maintained school in Surrey, England in 2011-2012 for whom teacher-rated screening data on language, behaviour and early learning goals were available. A subsample of monolingual children enriched for language difficulties completed intensive assessments in year 1 (age 5-6, n=529), year 3 (age 7-8, n=499), year 6 (age 10-11, n=384) and year 8 (age 12-13, n=246). Screening data for 7013 children has been linked to the UK Department of Education National Pupil Database data on special educational needs provision and academic progress.; Findings to Date: Language disorders are more prevalent than other neurodevelopmental conditions (such as autism) and more common in areas of socioeconomic disadvantage. Language is a highly stable trait. Language status at school entry is therefore strongly predictive of long-term education progress, the need for specialist support, general cognitive abilities and increased risk for poor mental health, through its effects on social and emotional development.; **Future Plans:** The SCALES cohort will leave compulsory education in 2025 and we are planning to track academic qualifications and post-18 destinations. SCALES data are publicly available via the UK Data Service: DOI: 10.5255/UKDA-SN-8967-1 and DOI: 10.5255/UKDA-SN-8968-1. National Pupil Database data are restricted and cannot be shared. Requests for collaboration and any data that are not publicly available should be addressed to CN, UCL, London (email: c.norbury@ucl.ac.uk). (© Author(s) (or their employer(s)) 2025. Re-use permitted under CC BY. Published by BMJ Group.)

Access or request full text: https://libkey.io/10.1136/bmjopen-2025-100710

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=40681194&profid=ehost

21. Speech and language therapist-led clinics for low-risk suspected head and neck cancer referrals: A qualitative study of ear, nose and throat surgeons' views

Item Type: Journal Article

Authors: Occomore-Kent, Louise;Hardman, John C.;Roe, Justin W. G.;Bradley, Paula;Carding, Paul N. and Patterson, Joanne M.

Abstract: Background: Over 200,000 patients are referred onto the suspected head and neck cancer (HNC) pathway annually in the UK, with around 3% receiving a cancer diagnosis. With new HNC advancements in identifying patients at low risk of a cancer diagnosis, one proposal is a speech and language therapy (SLT)-led first point of contact clinic for low-risk patients presenting with voice or swallowing symptoms.; **Aims:** To explore ear, nose and throat (ENT) surgeons' views regarding this model.; **Materials & Methods:** The study used a qualitative study design using semi-structured interviews. Transcribed responses were analysed using thematic analysis.; **Outcomes & Results:** A total of 11 UK ENT surgeons participated. Themes included the positives and challenges of the proposed model; existing facilitators that increase the likelihood of success; and the requirements for successful implementation. Service variation impacted level of interest. Waiting times were problematic at some sites more than others; SLT workforce issues were of differing prevalence; SLT competence and interest differed; and support from organizational leaders varied. Participants' personal views also varied, for example, acceptability of the model to patients, or what governance structure is required. There was no single SLT-led clinic model suitable for all centres; however, some general principles were identified to inform further evaluation and implementation of this model.; **Conclusions & Implications:** Principles included the deployment of SLTs experienced in laryngeal examination and flexible nasendoscopy; dedicated job plans and workforce; professional and regulatory body recognition and support; and clear training, supervision structure and job description for the role. Service outcomes, training protocol and competencies require robust evaluation.; **What This Paper Adds:** What is already known on this subject During the SARS-CoV-2 pandemic, a risk calculator tool was developed to identify patients at highest risk of cancer who were referred to the 2-week-wait (2ww) ENT pathway. These patients require urgent face to face ENT assessment. Lower risk patients with voice and swallowing difficulties still require management of their symptoms and an SLT-led clinic model is one potential solution for this population. While SLTs' views of this model have been explored with a UK-wide survey and focus groups, ENT surgeons' perspectives are yet to be investigated. What this study adds to the existing knowledge This study explores ENT surgeons' views regarding SLT-led clinics for patients who are referred through the 2ww ENT pathway, stratified as being at low risk of cancer, and with voice and/or swallowing symptoms of likely benign aetiology. Participants shared many positive perceptions of the clinic along with factors that they felt would enhance its success (facilitators). Key requirements for the success of this clinic model were also highlighted, along with challenges that need to be addressed. What are the practical and clinical implications of this work? The need for this clinic model varied by centre. However, general principles included the importance of a dedicated workforce with pre-existing relevant expertise; and a clear role profile, training process and competencies framework. Professional, statutory and regulatory bodies' recognition of the role is required, and robust evaluation of the model is necessary. (© 2024 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.)

Access or request full text: https://libkey.io/10.1111/1460-6984.13137

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=39660964&profid=ehost

22. A Mediation Model of Social Anxiety Development During Early Childhood Stuttering

Item Type: Journal Article

Authors: Onslow, M.;Dyer, B.;Jones, M.;Lowe, R.;O'Brian, S. and Menzies, R.

Abstract: Purpose: Stuttering is associated with clinically significant social anxiety, which emerges during early childhood for some, but not all, children who begin to stutter. The purpose of this review article is to develop a model of social anxiety development during early childhood stuttering and to present an empirical method by which it can be tested.; **Method:** We propose a mediation model of how the exposure variable of stuttering may lead to an outcome of social anxiety. Our model includes confounder and mediator variables. We explain the concepts and procedures of mediation analysis and present a method to test our model.; **Results:** We present the idea that negative peer responses to stuttering and negative self-perception of children are mediators of social anxiety development. We propose several confounder variables that involve children, their parents, and the home environment. We depict our model with a directed acyclic graph, and we present details of how it can be tested with a longitudinal research design.; **Discussion:** This is the first attempt to model the development of social anxiety shortly after stuttering onset with an empirically testable method. The intended benefit of this innovation is to direct future clinical directions for the clinical management of stuttering arising shortly after childhood onset.

Access or request full text: https://libkey.io/10.1044/2025_JSLHR-24-00412

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=40310240&profid=ehost

23. Aphasia partnership training: What outcomes do people with aphasia, family members and speech and language therapists expect?

Item Type: Journal Article

Authors: Palmer, Rebecca;Hilari, Katerina;Magdalani, Carla;Coster, Joanne;Beeke, Suzanne;Gibbs, Emma;Witts, Helen;Sudworth, Kate;Jagoe, Caroline and Cruice, Madeline

Abstract: Introduction: Life with aphasia affects the whole family with shorter, less frequent conversations, frustration, reduced social networks, isolation and tension in relationships. Evidence suggests communication partner training (CPT) benefits families. However, expected improvements are poorly articulated. The Aphasia Partnership Training (APT) project aimed to identify target outcomes of a new family dyad CPT programme through persons with aphasia (PWA), family member and speech and language therapist (SLT) consensus.; **Method:** Consensus on desired outcomes was achieved through nominal groups with 20 people with mild to severe aphasia across five groups and 10 family members of people with mild to severe aphasia across three groups, each facilitated by -two to three SLTs. Twelve CPT researchers 16 clinical SLTs with experience of CPT participated in a three-round eDelphi to gain consensus on outcomes they perceived most likely to change. Results were triangulated using a convergence coding scheme to demonstrate agreement, partial agreement, dissonance or silence amongst the three stakeholder groups.; **Results:** All stakeholders agreed 'conversation' and 'thoughts and feelings' were very important outcomes of APT/very likely to change (agreement). Change in 'relationships' was very important to family members, important to PWA and considered very likely to change by SLTs (partial agreement). Change in 'language' (specifically talking) was very important to PWA, but not important to family members, and SLTs were uncertain about language improvement from APT (dissonance). Each outcome construct is illustrated by specific examples generated and agreed by all stakeholder groups.; **Conclusions:** We should aim to achieve improvements in conversation and thoughts and feelings with CPT, consider the impact on relationships and investigate the potential for language improvement (talking) as an outcome of APT. Outcome measures can be selected based on good coverage of examples generated within

these constructs, ensuring they are meaningful to PWA and family members.; **What This Paper Adds**: What is already known on the subject We know that people with aphasia (PWA) and their family members often find it difficult to communicate together with wide-reaching consequences. We know that communication partner training (CPT) benefits families as demonstrated in two systematic reviews of 56 small studies. We also know what outcomes PWA and their families want from speech and language therapy in general, but there is little clarity in the literature about what outcomes are expected from CPT specifically. What this paper adds to existing knowledge This paper highlights the outcomes PWA, family members and speech and language therapists expect from a new CPT programme called Aphasia Partnership Training. These outcomes can be considered for all family dyad CPT programmes. What are the potential or actual clinical implications of this work? The outcomes identified through the stakeholder consensus presented from this study can be used to set goals and monitor the success of CPT, help PWA and family members decide whether they want to participate in a communication partner intervention, and ensure that measures used to evaluate the success of CPT interventions are meaningful to PWA and their families. (© 2025 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.)

Access or request full text: https://libkey.io/10.1111/1460-6984.70015

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=39977829&profid=ehost

24. The UK C-BiLLT: Validity and reliability of an online assessment of spoken language comprehension for children with severe motor disorders

Item Type: Journal Article

Authors: Pennington, Lindsay;Potts, Lily;Murray, Janice;Geytenbeek, Johanna;Laws, Kate;Sargent, Jenefer;Clarke, Michael;Swettenham, John;Lachkovic, Julie;Martin, Catherine and McColl, Elaine

Publication Date: 2025

Journal: International Journal of Language & Communication Disorders 60(2), pp. e70025

Abstract: Background: Current UK measures of early spoken language comprehension require manipulation of toys and/or verbal responses and are not accessible to children with severe motor impairments. The Computer-Based Instrument for Low motor Language Testing (C-BiLLT) (originally validated in Dutch) is a computerized test of spoken language comprehension that children with motor disorders control using their usual response methods.; **Aims:** To create a UK version of the C-BiLLT, evaluate its validity and reliability, and assess its practicability for children with motor disorders.; **Methods & Procedures:** The C-BiLLT was translated into British English and items were adapted to ensure familiarity to UK children. A total of 424 children (233 females, 191 males) aged 1:6-7:5 (years:months) without developmental disabilities were recruited from North East England. Children completed the UK C-BiLLT and Preschool Language Scales 5 (PLS-5) for convergent validity evaluation and either the visual reception subtest of the Mullen Scales of Early Learning (MSEL) (children aged 1:8-5:5) or Ravens Coloured Progressive Matrices (CPM) (ages 5:6-7:5) to assess divergent validity. A total of 33 children completed the UK C-BiLLT within 4 weeks of initial assessment for test-retest reliability assessment (intraclass correlation coefficient-ICC). Internal consistency was assessed using Cronbach's alpha and exploratory factor analysis examined structural validity. A total of 24 children (10 female, 14 male; aged 4-12 years) with non-progressive motor disorders who use augmentative and alternative communication (AAC), rated the UK C-BiLLT's ease of use and completed British Picture Vocabulary Scales (BPVS) and CPM as for convergent and divergent validity testing.; **Outcomes & Results:** Internal consistency was high for children without motor disorders ($\alpha = 0.96$). Exploratory factor analysis extracted two factors, together explaining 68% of the total variance. Test-retest reliability was excellent (ICC = 0.95; 0.90-0.98 95% confidence interval-CI). UK C-BiLLT scores correlated highly with PLS-5 (r = 0.91) and MSEL (r = 0.81), and moderately with CPM (r = 0.41); and increased across full-year age-bands (F(6, 407) =

341.76, p = < 0.001, η 2 = 0.83). A total of 19 children with motor disorders rated the UK C-BiLLT as easy/ok to use; two judged it hard; three declined to rate the ease of use. Their UK C-BiLLT scores correlated highly with BPVS (r = 0.77) and moderately with CPM (r = 0.57).; **Conclusions & Implications:** The UK C-BiLLT is a valid, reliable measure of early spoken language development and is potentially practicable for children with motor disorders. It may facilitate international research on the language development of children with motor disorders and evaluation of intervention at the national level.; What This Paper Adds: What is already known on the subject Young children with motor disorders have difficulties accessing standardized assessments of language comprehension that require children to handle objects or to speak a response. What this paper adds to the existing knowledge This study demonstrates the validity and reliability of a UK translation of the C-BiLLT and suggests that the measure is feasible for children with motor disorders who use AAC and have a reliable method of response via computer access. What are the potential or clinical implications of this work? The UK C-BiLLT is a useful addition to the limited tools currently available to assess early spoken language comprehension of children with motor disorders. (© 2025 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.)

Access or request full text: https://libkey.io/10.1111/1460-6984.70025

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=40103280&profid=ehost

25. How speech and language therapists and parents work together in the therapeutic process for children with speech sound disorder: A scoping review

Item Type: Journal Article

Authors: Pritchard, Katherine;Stojanovik, Vesna;Titterington, Jill and Pagnamenta, Emma

Publication Date: 2025

Journal: International Journal of Language & Communication Disorders 60(1), pp. e13132

Abstract: Background: Speech sound disorders (SSDs) are broadly defined as difficulty producing speech sounds in childhood. Reported prevalence of SSD varies from 2.3% to 24.6%, depending on how SSD is defined and the included age range. SSDs that do not resolve before age 8 can have a lasting impact on a child's academic achievements. The intensity of intervention for SSD is important to ensure effectiveness. However, there is a gap between the evidence base for intensity and speech and language therapists' (SLTs) clinical practice. One way that SLTs try to bridge this gap is by working with parents. SLTs believe that working with parents/caregivers is vital for a child with SSD to make progress.; **Aims:** To conduct a scoping review of the literature to provide a comprehensive picture of the perceptions, experiences and strategies underpinning collaborative working between SLTs and parents/caregivers of children (aged ≤ 5 years 11 months) with SSD to increase intervention intensity at home.; **Methods & Procedures:** This scoping review was completed in accordance with PRISMA-ScR guidelines. A systematic search of PubMed, PsycInfo, CINHAL, Web of Science, EBSCOhost and EThOS was conducted using synonyms of three key terms: SSD, Therapy, Parents. Key journals and papers were hand searched for unique papers. A total of 29 papers were included for review. Data were analysed using thematic synthesis to develop themes. These themes are discussed using the PAGER framework to identify advances, gaps, evidence for practice and areas for future research.; **Main Contribution:** Seven key themes were identified: individualization, setting expectations, daily life, parental knowledge, parental involvement, therapeutic relationships and supporting parents to deliver home practice. There has been an acceleration of research around working with parents of children with SSD, with increased consideration of effective adult coaching techniques. Parents value the parental and child relationship with the SLT and feel this supports the success of home practice. There is a need for further research, and guidance for SLTs working with parents of children with SSD to enable them to support parents to deliver home practice effectively.; **Conclusions & Implications:** Emerging evidence supports the value of SLTs and parents working

together to support home practice for children with SSD. The review highlighted the importance of SLTs allocating time to build positive therapeutic relationships with parents to support engagement in therapy. Approaching intervention, in particular, home practice, flexibly and in collaboration with parents, allows parents to fit home practice into their daily lives. Providing clear information to parents supports the fidelity of, and engagement in, home practice.; **What This Paper Adds:** What is already known on the subject There is a gap between what is recommended in the evidence base for intervention intensity for children with SSD and current clinical practice worldwide. SLTs try to bridge this gap through home practice and believe that working with parents/caregivers is vital for children with SSD to make progress. However, little is known about the best ways for SLTs to work with parents for this population. What this paper adds to the existing knowledge Training parents to be implementers of intervention in a personalized and flexible way is important and valued by parents and SLTs. Parents value understanding the clinical rationale behind the intervention approach and benefit from explicit instructions for home practice, including discussion, written information, observation and feedback. Therapeutic relationships take time to develop and impact parental engagement in home practice. What are the potential or actual clinical implications of this work? The findings of this study highlight existing knowledge which will support SLTs to work optimally with parents to implement home practice for their child with SSD. It highlights the importance of taking time to foster working relationships with parents to support effective home practice. The review identifies gaps in the current skills and knowledge of SLTs, highlighting the need for further research, support and guidance for SLTs in their work with parents, as well as implications for the development of the SLT pre-registration curriculum. (© 2024 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.)

Access or request full text: https://libkey.io/10.1111/1460-6984.13132

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=39555679&profid=ehost

26. Measuring Adults' Readiness to Make a Positive Change to Stuttering and the Cognitive Processes That Predict It

Item Type: Journal Article

Authors: Rodgers, N. H.;Gerlach-Houck, H.;Paiva, A. and Robbins, M.

Publication Date: 2025

Journal: Journal of Speech, Language, and Hearing Research : JSLHR 68(8), pp. 3703–3719

Abstract: Purpose: The purpose of this study was to validate three interdependent scales of readiness to change among adults who stutter. The scales are based on the transtheoretical model (TTM) that we previously developed through qualitative work with adults who stutter and stuttering specialists regarding the characteristics of making a positive change to how they live with stuttering.; **Method:** The anonymous, online survey was fully completed by 246 North American adults who stutter. The survey included three TTM scales (Stage of Change, Decisional Balance, and Situational Self-Efficacy) and the Quality of Life subscale of the Overall Assessment of the Speaker's Experience of Stuttering (OASES-IV). Exploratory factor analyses were conducted to determine model fit and reduce the TTM scales to the most meaningful items. External validity was assessed by examining relationships between constructs.; **Results:** The five stages of change readily applied to adults' readiness to make positive changes to how they live with stuttering. The Decisional Balance scale was reduced to 20 items subcategorized into three subscales (Interpersonal Pros, Internal Pros, and Cons), which all differed significantly across stages of change. The Situational Self-Efficacy scale was reduced to 17 items subcategorized into two subscales (Interpersonal Situations and Internal Situations), of which the former differed significantly across stages of change. The OASES-IV differed significantly across stages of change.; **Conclusions:** The findings suggest that, for adults, the behaviors subsumed in making positive changes to stuttering fit the TTM framework, including the stages of change and the cognitive predictors of

readiness to change (decisional balance and situational self-efficacy). The relationship among our measures (except for the cons of change) mirrors how these measures behave in adolescents who stutter and other health populations, further corroborating the application of the TTM to the stuttering experience. Future research confirming the validity of these measures across stages of change is warranted, as well as how these measures can inform stage-matched interventions for people who stutter.; Supplemental Material: https://doi.org/10.23641/asha.29319278.

Access or request full text: https://libkey.io/10.1044/2025_JSLHR-24-00787

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=40587269&profid=ehost

27. Participatory Development of a Speech-Language Telerehabilitation Intervention Combined With Home-Based Transcranial Direct Current Stimulation for Primary Progressive Aphasia: A Qualitative Study

Item Type: Journal Article

Authors: Rysop, Anna Uta;Schiwek, Roxana;Grewe, Tanja;Breitenstein, Caterina;Binkofski, Ferdinand;Roheger, Mandy;Unger, Nina;Flöel, Agnes and Meinzer, Marcus

Publication Date: 2025

Journal: American Journal of Speech-Language Pathology 34(5), pp. 2760–2779

Abstract: Purpose: Intensive speech-language therapy (SLT) delivered as telerehabilitation in combination with transcranial direct current stimulation (tDCS) may be an effective treatment option for people with primary progressive aphasia (pwPPA). However, such combined treatment approaches are technically challenging, and feasibility for pwPPA has not yet been established. We aimed to involve stakeholders in the development of a novel approach combining remotely supervised but independently self-administered home-based tDCS with an intensive aphasia telerehabilitation (naming and communicative-pragmatic therapy).; **Method:** Eight pwPPA (logopenic variant: n = 5, nonfluent agrammatic variant: n = 1, not specified variant: n = 2) and 16 caregivers participated in two semistructured interviews to identify the needs, preferences, and perceived barriers and challenges with regard to SLT, telerehabilitation, and tDCS and the combination of all components. Based on the results, a step-by-step manual was developed and tested by means of home-based usability tests and follow-up interviews involving four dyads (logopenic variant: n = 4). Interview data were transcribed and analyzed qualitatively and quantitatively. Competency checklists used in the usability tests were analyzed quantitatively.; **Results:** pwPPA and their caregivers provided valuable insights into all aspects of the planned treatment program. Overall, the findings suggest a high level of acceptance and perceived need for an intensive telerehabilitation SLT approach combined with tDCS. Using the developed step-by-step manual and training, pwPPA were able to independently perform more than half of the actions required for telerehabilitation but needed assistance with technically more demanding aspects of tDCS. To ensure feasibility, caregiver assistance is needed to support pwPPA during technically challenging interventions.; **Conclusions:** This mixed-methods study identified needs and preferences of pwPPA and their caregivers with regard to speech-language telerehabilitation, as well as barriers and challenges regarding telerehabilitation and home-based tDCS. We demonstrate high acceptability and initial feasibility of such combined programs. Our findings highlight the importance of stakeholder involvement in intervention development, which will inform future development and optimization of technologically demanding intervention programs.; Supplemental Material: https://doi.org/10.23641/asha.29906063.

Access or request full text: https://libkey.io/10.1044/2025_AJSLP-24-00557

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=40844916&profid=e

28. Music Listening Induces Short-Term Changes in Attention in Poststroke Aphasia

Item Type: Journal Article

Authors: Sebranek, Emily and LaCroix, Arianna N.

Publication Date: 2025

Journal: American Journal of Speech-Language Pathology 34(5), pp. 2907–2918

Abstract: Purpose: People with aphasia (PWA) with cognitive deficits have poorer treatment outcomes than those without. However, aphasia therapy rarely focuses on cognition, which may partly explain the variability often observed in treatment outcomes. Listening to music has been shown to positively impact cognition in neurotypical adults. The purpose of this study was to extend this prior research by investigating whether listening to music induces short-term improvements in attention in PWA.; **Method:** Forty-three PWA were assigned to listen to music characterized as happy (major mode, fast tempo) or sad (minor mode, slow tempo) or no music for 10 min. Attention was measured before and after music listening using the Attention Network Test, which measures three types of attention: alerting, orienting, and executive control. Mixed analyses of variance were used to explore how each type of attention changed after music listening by group and aphasia severity.; **Results:** Our results demonstrate that listening to happy music temporarily enhanced orienting attention, regardless of aphasia severity. Happy music listening also induced short-term improvements in alerting attention for individuals with moderate-severe aphasia. Executive control attention was not modulated by music listening.; **Conclusions:** Our findings indicate that music listening may induce short-term improvements in attention in PWA. However, further research is needed to clarify the extent of these effects and the underlying mechanisms driving music-induced changes in attention.; Supplemental Material: https://doi.org/10.23641/asha.29396288.

Access or request full text: https://libkey.io/10.1044/2025_AJSLP-24-00461

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=40638671&profid=ehost

29. Assessment and management of late radiation-associated dysphagia after treatment for head and neck cancer: A scoping review and survey of UK speech and language therapists

Item Type: Journal Article

Authors: Sellstrom, Diane;Haighton, Catherine;Finch, Tracy;O'Hara, James and Patterson, Joanne M.

Publication Date: 2025

Journal: International Journal of Language & Communication Disorders 60(1), pp. e13154

Abstract: Background: Late side effects of head and neck cancer treatment commonly affect swallowing function. Late radiation-associated dysphagia (late-RAD) often presents years post-treatment when patients have been discharged from their multidisciplinary team. Timely symptom management may provide important physical and emotional support, potentially reducing the overall healthcare burden. Speech and language therapists (SLTs) are key in the assessment and management of dysphagia but there is no current guidance in the late-RAD setting.; **Aims:** The primary objective was to establish how late-RAD is assessed in both existing literature and by UK SLT. The study also aimed to explore UK SLT approaches to management.; **Methods:** A dual methodology approach was taken. A scoping review (SR) of PubMed, Scopus, CINAHL, Web of Science

and Embase databases was conducted between November and December 2022. Eligibility criteria included studies reporting dysphagia outcomes >2 years post-treatment with narrative data synthesis. Also, a survey of SLTs working in the United Kingdom was conducted between November 2023 and February 2024. Respondents were questioned about their current pathways and service provision for patients with late-RAD.; **Main Contribution**: The SR included 39 studies. Dysphagia was assessed using three different toxicity grades; five patient-reported outcome measures (PROMs) and five clinical assessments. Five studies were multidimensional in their approach to data collection, whilst nine used PROMs alone and four used a toxicity grade alone. The survey received 56 responses. Only six respondents reported an existing late effect clinic (all tumour sites) in their region. A wide range of measures were used to assess dysphagia including 12 different PROMs. Instrumental assessments were used by most (98% Videofluoroscopy; 82% Fibreoptic Endoscopic Evaluation of Swallowing). Rehabilitation was offered by 86% and this was intensive in 34%. Late-RAD patient information was routinely provided by 35 respondents and usually within 1 year of treatment completion.; **Conclusion:** A wide range of assessment methods and outcome measures were used to report dysphagia in existing literature but often in a unidimensional approach. In the United Kingdom, SLTs also use a variety of assessment tools and regularly offer intensive rehabilitation. Without consensus on how we measure late-RAD, synthesising evidence to guide service provision is challenging.; **What This Paper Adds:** What is already known on the subject Late-RAD significantly affects swallowing function, often necessitating enteral feeding which in turn impacts emotional and health-related quality of life. There is no existing guidance on optimum pathways, assessment methods or effective treatment options. What this paper adds to existing knowledge This study highlights the lack of consensus in the evidence base regarding how to assess and measure late-RAD. In the United Kingdom, referral pathways are not well defined and there is wide variation on provision of information and specialist assessment and management of late-RAD. What are the potential or clinical implications of this work? Challenges in synthesising existing studies translate to variations in practice due to a lack of guidelines. Without a robust evidence base, patients will experience geographical variation in how they are supported with their late-RAD symptoms. (© 2025 Royal College of Speech and Language Therapists.)

Access or request full text: https://libkey.io/10.1111/1460-6984.13154

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=39745790&profid=ehost

30. Delivering an integrated care systems approach for speech and language therapy head and neck cancer services in the UK: service development and redesign in Cheshire and Merseyside

Item Type: Journal Article

Authors: Sheldrick, Heulwen;Kingston, Stuart and Crane, Julie

Publication Date: 2025

Journal: Current Opinion in Otolaryngology & Head & Neck Surgery 33(3), pp. 156–161

Access or request full text: https://libkey.io/10.1097/MOO.0000000000001038

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=rzh&AN=184873362&profid=ehost

31. 'Why Aren't We Fighting Our Case?': Speech and Language Therapists' Perspectives on Intervention for Preschool Children With Oral Comprehension Difficulties

Item Type: Journal Article

Authors: Shobbrook, Katherine;Miller, Rosie;Yunis, Shybah;Beeke, Suzanne and Best, Wendy

Publication Date: 2025

Journal: International Journal of Language & Communication Disorders 60(5), pp. e70112

Abstract: Background: Oral comprehension difficulties are prevalent amongst preschool children with language needs and are related to academic, social and emotional outcomes. Speech and language therapists (SLTs) frequently deliver comprehension intervention to preschool children, but the influences on their clinical decisions are unknown. Understanding these influences and how chosen interventions align with models of evidence-based practice (EBP), particularly in an area where research evidence is sparse, is crucial to developing effective intervention and supporting the implementation of research to practice.; **Aims:** To investigate SLTs' perspectives on the delivery of intervention to preschool children with oral comprehension difficulties and to examine these in the context of models of EBP.; **Methods and Procedures**: Semi-structured interviewing gathered the perspectives of 14 UK-based SLTs, representing a range of years of experience, work settings and employment models (NHS and independent). Data were analysed using reflexive thematic analysis.; **Outcomes and Results:** The overarching theme 'Flexibility and Constraint' described a complex and challenging process whereby SLTs respond to sometimes conflicting influences from external drivers, the needs of the child and adults around them, perspectives on who has responsibility for effecting change, and their own perceptions of clinical autonomy.; **Conclusions and Implications:** SLTs' practice aligns with components of EBP, but the need to be flexible and responsive to individual circumstances is frequently in conflict with constraints affecting the ability to deliver individualised intervention. Implications include how individual SLTs and speech and language therapy services promote the ways in which they are evidence-based practitioners and advocate for their specialist role in supporting preschool children with oral comprehension difficulties.; **What This Paper Adds:** What is already known on this subject Models of EBP emphasise the considered application of research, patient preferences and clinician-related factors. This process can be a challenge where few research studies reflect the wide variety of approaches used by SLTs, and contextual factors such as organisational culture and funding may take precedence in decision-making. What this paper adds to existing knowledge This study describes a very wide variety of practices, with some elements aligning with the principles of EBP and others deviating from them. The lack of time and resources is a common constraint that affects the ability to deliver individualised intervention and therapy which reflects up-to-date research in this area. What are the potential or actual clinical implications of this work? Perspectives on clinical autonomy and the need to advocate for the specialist role of the SLT have far-reaching implications. These include how therapy for individual children with oral comprehension difficulties is planned and delivered, how speech and language therapy services are structured, and how the profession as a whole advocates for its role with preschool children experiencing comprehension difficulties. (© 2025 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.)

Access or request full text: https://libkey.io/10.1111/1460-6984.70112

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=40827346&profid=ehost

32. Evaluating a Targeted Language Intervention for Children Aged 4-6 Years-Applying an 'Information Carrying Words' Approach

Item Type: Journal Article

Authors: Spencer, Sarah;Pearce, Laura;Calder, Karlene;Woods, Alice;Andrews, Abigail and Clegg, Judy

Publication Date: 2025

Journal: International Journal of Language & Communication Disorders 60(3), pp. e70047

Abstract: Background: Very little research has investigated the use of the information carrying words (ICW) construct within language interventions, despite its very widespread use in speech and language therapy in the United Kingdom. The Language Enrichment Activity Programme (LEAP) is an intervention programme that applies the ICW construct to differentiate children's level of need and structure play-based learning activities. LEAP sessions are designed to be child-led, building language skills through application of communication supporting strategies (CSS) such as modelling, recasting and inviting communicative participation via choices and expectant pausing.; **Aims:** This study aims to evaluate the impact of trainee speech and language therapists (SLTs) delivering LEAP on the language skills of primary school children (aged 4-6 years).; **Methods and Procedures**: One hundred eighteen children were selected by their teachers. Participating children were semi-randomly allocated to either a control group (n = 48) or to a group that received 12 sessions of LEAP over 6 weeks (n = 70). A smaller sub-cohort was followed up 8 weeks following the end of LEAP (received LEAP n = 41, control group n = 46). LEAP was delivered by trainee SLTs to small groups of children. Assessments were carried out blind to group allocation pre- and post-intervention in order to evaluate the impact of intervention on receptive and expressive language skills. Outcome measures were a bespoke comprehension and expression outcome measure and the Renfrew Action Picture Test (RAPT; Renfrew 2019).; **Results:** Children who received LEAP had improved scores on both the RAPT assessment and the bespoke outcome measure. There was a significant interaction between time (pre- and post-intervention) and group (those who received LEAP vs. the control) for the RAPT grammar score, and the LEAP vocabulary and expressive ICW score. LEAP had less of an impact for a sub-cohort followed up 8 weeks following the intervention, with only the LEAP expressive score showing significant interaction between the three assessment time points and group (those who received LEAP vs. the control).; **Conclusions and Implications:** The LEAP was successfully delivered to small groups of children and supported them in developing their expressive language skills. Working with trainee SLTs increased the capacity to deliver LEAP at a low cost to schools. Results are promising and add to an emerging evidence base for the application of the ICW construct within SLT intervention programmes.; **What This Paper Adds:** What is already known on this subject Use of an information carrying words (ICW) construct in speech and language therapy is very common in the United Kingdom, and yet very little research has been done in this area. There is strong evidence for the role of communication supporting strategies (e.g., recasting, giving choices, and use of multisensory input) to accelerate children's language development. However, more translational research is needed to investigate the impact of interventions which include such strategies. New service delivery models are also needed to facilitate increased access to interventions, particularly beyond the preschool years and where schools are unable to staff comprehensive language interventions internally. What this study adds This project evaluates the impact of a targeted language intervention programme for children in the early stages of primary school in the United Kingdom: the Language Enrichment Activities Programme (LEAP). This programme uses ICW to differentiate language intervention activities, while using robust communication supporting strategies during sessions. The study evaluates the impact of LEAP on a cohort of 118 children from 8 schools, with promising results. Children who received LEAP had increased scores on measures of expressive language when compared to children who did not take part in LEAP. What are the clinical implications of this study? Our study adds to an emerging evidence base supporting the application of the ICW construct within language interventions. It also offers a model for collaboration between schools, speech and language therapy services, and trainee speech and language therapists to increase capacity for targeted small group interventions for language skills in early primary school. The paper uses the LEAP intervention as a starting point for discussion about how to best deliver targeted small group interventions and issues in making these types of groups inclusive and accessible. (© 2025 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.)

Access or request full text: https://libkey.io/10.1111/1460-6984.70047

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=40351023&profid=ehost

33. Repetitive Negative Thinking as a Mechanism of Stuttering Anticipation

Item Type: Journal Article

Authors: Tichenor, S. E.;Walsh, B.;Gerwin, K. L. and Yaruss, J. S.

Publication Date: 2025

Journal: Journal of Speech, Language, and Hearing Research : JSLHR 68(5), pp. 2236–2258

Abstract: Purpose: In the context of stuttering, anticipation refers to the sensation that one may soon stutter. Although anticipation is widely reported, much is still unknown about how the phenomenon develops and how people respond to it as they live their lives. To address these gaps, this study specified the relationship between repetitive negative thinking (RNT), anticipation, and anticipation responses. This study also determined whether individual differences in a person's goal when speaking (i.e., speaking fluently or not stuttering vs. stuttering openly) predicted the different ways people respond to anticipation.; **Method:** Five hundred and ten stutterers (427 adults who stutter, ages 18-86 years, and 83 adolescents who stutter, ages 10-18 years) answered questions about anticipation, their responses to anticipation, how frequently they engage in RNT, and what their goals when speaking are.; **Results:** Exploratory factor analysis revealed that responses to anticipation can be described in terms of two factors: avoidance and acceptance . Avoidance responses to anticipation were more common than acceptance in both groups. Adults and adolescents were more likely to experience anticipation and respond with avoidance behaviors if they more frequently engage in RNT or less often have the goal when speaking of openly stuttering. Data also supported and extended evidence that anticipation is commonly experienced in adolescents and adults who stutter.; **Discussion:** Findings extend the understanding of how anticipation and anticipation responses may develop based on an individuals' engagement with RNT and goals when speaking. The relationship between RNT and anticipation underscores the need for future investigations focusing on preventing the development of negative responses to anticipation via holistic therapy.; Supplemental Material: https://doi.org/10.23641/asha.28635719.

Access or request full text: https://libkey.io/10.1044/2025_JSLHR-24-00175

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=40193346&profid=ehost

34. Solid Medication Intake in Hospitalised Patients With Dysphagia: A Challenge for Speech and Language Pathologists?

Item Type: Journal Article

Authors: Trapl-Grundschober, Michaela;Schneider, Lea;Schulz, Steffen;Sollereder, Simon;Teuschl, Yvonne;Struhal, Walter and Osterbrink, Jürgen

Publication Date: 2025

Journal: International Journal of Language & Communication Disorders 60(4), pp. e70073

Abstract: Purpose: Speech and language pathologists (SLP) are frequently consulted for guidance on the management of oral solid medications. However, the extent to which SLPs consider solid medication intake during swallowing examination remains unclear. The present study endeavoured to find out whether and how SLPs assess patients' ability to swallow solid dosage forms (SDF) in clinical settings, with a specific focus on stroke units.; **Methods:** An online cross-sectional survey was conducted among SLPs in German-speaking countries. The questionnaire was targeted at SLPs working in hospitals and distributed through both direct outreach and passive dissemination on social networks.; **Results:** Of 200 returned questionnaires, 147 were eligible for inclusion. Of these, 108 (73.5%) evaluated the swallowing ability of solid oral medications and were further analysed. During clinical swallowing examination, the patient's own medication is most frequently used (63.9%). 92.6% of the 108 SLPs stated that they regularly offer guidance on altering SDFs. SLPs' decision to

recommend modified SDFs or pause them is influenced by oral cavity retention of SDFs, pharyngeal phase disorders and SDF intake-related coughing. Additionally, SLPs employ textures that were determined to be safe for accompanying boluses, with fruit puree and water being the most preferred types. Responses of SLPs working on stroke units did not differ significantly from those working on other wards.; **Conclusion:** SLPs commonly evaluate the swallowing ability of SDFs. Typically, they utilise the patient's own medications for testing purposes and previously trialled consistencies as accompanying boluses. Specific evaluation and educational programs are needed to enhance the management quality of oral SDFs.; Trial Registration: ClinicalTrials.gov identifier: Registration ID: NCT05173051/Protocol ID: 11TS003721 WHAT THIS PAPER ADDS: What is already known on the subject Speech Language Pathologists are crucial in assessing and managing dysphagia. Recent studies and guidelines suggest that it is important for SLPs to evaluate the ability to swallow solid medications. However, there is limited research on whether and how SLPs assess and manage solid dosage forms in patients with dysphagia, especially those with post-stroke dysphagia. Although a few studies have used instrumental assessments like FEES to evaluate pill swallowing, there is a lack of standardised methods. What this paper adds to existing knowledge The findings indicate that almost three-quarters of the surveyed SLPs do evaluate SDFs, with fruit puree and water being the most preferred accompanying boluses. Patients' own medications are more frequently used in clinical swallowing examinations (CSE), whilst placebos are preferred in instrumental assessments. A large majority of SLPs are involved in deciding whether solid medications should be modified for patients with dysphagia. What are the potential or actual clinical implications of this work? The research highlights the need for standardised protocols for the evaluation of swallowing SDFs as part of both clinical and instrumental assessments. Additionally, there is a critical need for the establishment of professional and regulatory guidelines to ensure consistent and evidence-based practices among SLPs, potentially improving patient care and medication administration. (© 2025 The Author(s). International Journal of Language & Communication Disorders published by John Wiley & Sons Ltd on behalf of Royal College of Speech and Language Therapists.)

Access or request full text: https://libkey.io/10.1111/1460-6984.70073

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=40605450&profid=ehost

35. Group interventions for people with primary progressive aphasia and their care partners: Considerations for clinical practice

Item Type: Journal Article

Authors: Volkmer, Anna;Hausmann, Alessa;Paplikar, Avanthi;Battista, Petronilla and Jokel, Regina

Publication Date: 2025

Journal: Neuropsychological Rehabilitation 35(6), pp. 1254–1282

Abstract: Primary progressive aphasia (PPA) describes a group of language-led dementias. Speech and language therapy is the main available intervention for people with PPA. Despite best practice recommendations for speech and language therapy to include access to group therapies (Volkmer et al, 2023a), research evidence to date has predominantly focused on delivery in individual sessions. The aim of this study was to gather the collective intelligence of expert speech and language therapists/pathologists delivering group therapy for people with PPA to synthesize guidance for clinicians. This paper describes a qualitative study using narrative synthesis methods. Data were collected using the Template for Intervention Description and Replication - TIDiER. Eight respondents described a total of 17 different groups. Respondents worked across healthcare, research clinics and third sector organizations in Australia, Canada, Spain, the USA and the UK. For the purposes of analysis, groups were divided into two main types: (1) groups delivering specific therapy interventions; and (2) groups providing broader opportunities for conversational practice and support. This initial synthesis of the current state of the art in PPA therapy groups highlights several important considerations around candidacy, content and ecological validity of delivering group intervention for people

with PPA.

Access or request full text: https://libkey.io/10.1080/09602011.2024.2391338

URL: https://search.ebscohost.com/login.aspx?direct=true&AuthType=sso&db=mdc&AN=39213021&profid=ehost

36. Referral Patterns to Speech and Language Therapy in the UK before, during, and after the COVID-19 Pandemic: Dysphagia Compared with Communication Disorders

Item Type: Journal Article

Authors: Yoshimatsu, Yuki;Enderby, Pamela Mary;Hansjee, Dharinee and Smithard, David G.

Publication Date: 2025

Journal: Folia Phoniatrica Et Logopaedica : Official Organ of the International Association of Logopedics and Phoniatrics (IALP) 77(1), pp. 70–78

Abstract: Introduction: Acquired swallowing impairment is a major public health issue that often leads to increased morbidity and slower recovery. Speech and language therapists (SLTs) have taken the lead in the assessment and treatment of dysphagia, which is reflected in guidelines where early intervention is recommended. This is in addition to the central role that SLTs play in the management of acquired communication impairments since research indicates that patients with communication difficulties benefit from early and intensive therapy by SLTs. This increasing demand for SLTs is expected to cause conflicting pressures in their workload and, therefore, beneficial to consider workforce planning. The aim of this study was to examine real-world data in the UK to investigate this issue regarding changes in referral patterns of patients with dysphagia and/or communication disorders to SLTs over time, to assist with workforce planning.; **Methods:** We interrogated the Royal College of Speech and Language Therapists Online Outcome Tool, a national database, in this retrospective cohort study. We included patients evaluated between 2018 and 2022. We performed a subgroup analysis of patients aged ≥40 years who had a primary medical diagnosis of stroke. Data on age, primary diagnosis, time on caseload, primary Therapeutic Outcome Measure (TOM) scale and initial TOM score on impairment were examined.; **Results:** From the database of 44,444 referrals to speech and language therapy, 5,254 referrals were included in the stroke and overall subgroup analyses. Referrals were 55.1% male, with a median age of 71 years. More than half (56.1%) of these referrals were for dysphagia. Referrals decreased during the COVID-19 pandemic but began to recover from 2021 onwards. The time on the SLT caseload has increased over the years from a median of 14 days (interquartile range IQR] 0-56) in 2018 to 20 days (IQR: 3-81) in 2022. While there were more referrals to SLT services for assessment and management of dysphagia than for communication in the overall population, in the stroke subgroup, referrals for communication disorders outnumbered referrals for dysphagia from 2020 onwards. Additionally, the severity of impairment on referral increased over the years.; **Conclusion:** Real-world data indicates that referrals to SLT services are changing over time to include more complex and severely impaired patients, with a demand for both swallowing and communication disorders. These findings should inform staff allocation and remodelling of education/training for SLTs to better meet clinical and public health needs. The retrospective nature of this study limits the strength and generalisability of these data, and this topic warrants further investigation. (© 2024 S. Karger AG, Basel.)

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