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Knowledge on Speech and Hearing Course Among Physiotherapist, Occupational Therapist and Psychologist in Kerala

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Abstract: Speech and Hearing course provides a comprehensive professional training in the assessment, diagnosis and management of communication disorders. The knowledge of speech and hearing course among allied health professionals is essential for timely referrals and interprofessional rehabilitation. This study aimed to assess the knowledge and awareness level among physiotherapists, occupational therapists and psychologists in Kerala. A validated 30-item questionnaire (Thapa & Kumaraswamy, 2022) was administered to 90 professionals (psychologist, physiotherapist and occupational therapist) to assess the level of awareness among them. Kruskal-Wallis tests compared between the groups and Fisher's exact test analysed the overall awareness level using SPSS v23.0 software. The results revealed that there was no significant differences across the groups of professionals and the overall awareness was higher among physiotherapists (66.7%) compared to occupational therapists (56.7%) and psychologists (53.3%). Hence, the study demonstrates that increased awareness among allied professionals can enhance referrals and team-based interventions for communication disorders.

Keywords: Speech and Hearing awareness, Interprofessional Collaboration, Allied Health, Kerala.

1. INTRODUCTION

Speech and Hearing course is a part of allied health sciences which focuses on the assessment and management of speech, language and hearing related disorders across all age groups. Speech-language pathologists (SLPs) play a major role in the evaluation and treatment of speech and language disorders whereas the audiologists mainly involve in the evaluation of hearing sensitivity and balance disorders and also provide rehabilitation through hearing aids/ assistive listening devices based on the patient need. For the assessment and rehabilitation of various impairments incorporating a team - based approach involving specialized healthcare professionals enhances the quality of life and supports recovery for affected individuals.

The SLPs and audiologist focuses majorly on both children and adult populations to prevent, evaluate, diagnose and treat communication disorders. They provide counselling, training and education among family/caregivers and other professionals. Through multidisciplinary team approach with other professionals like psychologist, occupational therapists and physiotherapists enhances the understanding of the patient's condition and improve their quality of life and rehabilitation outcomes.

Physiotherapists are professionals who help in restoring the movement, strength, function and management of pain after any injury using manual therapy. Sylvester, Ogletree and Lunnen (2017) feature the collaborative practice of physical therapists and SLPs in child with severe disabilities, the child showed improvement in 3 goals majorly - physical movement, communication needs and child's participation in classroom. Occupational therapists are professionals who assist individuals in carrying out daily activities by making physical, cognitive

and environmental modifications. Together with SLPs they specialize in communication and swallowing. Psychologists are individuals who specialize in how people think, feel and behave in other words it's the study of human mind, emotions and behaviour. Along with SLPs, psychologist play a major role in providing person – centred care which helps in managing the emotional impact of communication disorder and cognitive function.

Ferigollo and Kessler (2017) evaluated the interdisciplinary practice among physiotherapist, SLPs and also occupational therapist in human communication disorders. The results suggested that there is a lack of knowledge on the duties of other health professionals and a comprehensive view is needed rather than just giving attention to the condition.

Lokeshwar and Rajasudhakar (2021) assessed the awareness of SLPs among general physician and found that among 107 participated physicians nearly half (43.9%) was unaware of SLPs and their role in rehabilitating communication disorders. Among the 60 aware respondents familiarity was highest for SLP management of stuttering (91.7%), aphasia (85%), cleft lip/palate (81.7%) and hearing impairment (81.7%) but lowest for laryngectomy (35%), swallowing disorders (30%) and about 98.3% of informed practitioners referred patients to SLPs and all agreed medical students need lectures on speech-language pathology.

Thapa and Kumaraswamy (2022) examined the knowledge of speech and hearing issues among practicing Nepalese physiotherapists, occupational therapists and psychologists. They developed and validated a questionnaire regarding speech and hearing field and the results suggested that there is an awareness gap between the other professionals and by binding this gap the professionals will become more aware and an increase in referrals of patients can be observed which in turn improve the quality of life of the individuals.

Schwab-Farrell, Dugan, Sayers and Postman (2024) conducted a survey to understand the interprofessional collaboration among SLPs, physical therapist and occupational therapist. The main views, belief barriers and the facilitators were analysed. The results suggested that there is an overlap among the attitude and experience in SLPs, physical therapist, occupational therapist and often their role is misunderstood by other health professionals.

Alanazi, AlHarbi, AlMutairi, AlRashied and Abed (2024) assessed the awareness of audiology and speech language pathology services among the healthcare professionals in Saudi Arabia and awareness level was about 40.2 % in allied health professionals, 22.6 % in physicians, 15.4 % in nursing and dentistry showed about 11.2 % and total of 92.6 % and 95.3 % reported full awareness of the services of Speech language pathology and audiology.

Prevalence of communication disorders in Kerala:

Nair, Gerge, Padmamohan, Sunitha, Resmi, Prasanna and Leena (2009) conducted a study on the prevalence of developmental delay, deformity and disability among 0-5 years showed that about 2.5 % prevalence in that up to 2 years was about 2.31 % and 2 - 5 years about 2.62%.

Chundathodi and John (2016) found that about 6.1 % prevalence of hearing impairment among school children in that 6.1 % had impacted wax, 1.6 % Eustachian tube dysfunction, 2.7 % with chronic otitis media and otitis media with effusion (1.4 %).

Kunnath, Aboobakker, Kunjimon and Sreedhar (2021) highlighted the need for targeted screening programs which only included high-risk newborns. The results of the study showed a prevalence of 0.5% among high-risk neonates which contains about 0.25% unilateral hearing loss cases and 0.25% bilateral cases. Initial screening used Otoacoustic Emissions (OAE) testing, with a repeat OAE one month later for initial failures followed by confirmatory Brainstem Evoked Response Audiometry (BERA).

2. NEED OF THE STUDY

Children with developmental disabilities face communication, motor, behavioural challenges and often needs to be looked by Physiotherapist, Occupational therapist and psychologist. Even though they encounter individuals with communication challenges many don't fully understand the role of audiologists and SLPs. This leads to missed referrals and slower treatment especially in children with developmental disabilities and other individuals in need. It also emphasizes the importance of teamwork for helping individuals with developmental disabilities with early diagnosis, assessment and rehabilitation. So the present study helps to understand the awareness level among physiotherapist, occupational therapist and psychologist on speech and hearing course.

3. METHODOLOGY

Aim: The aim of the study was to analysis the awareness level among physiotherapist, occupational therapist and psychologist on speech and hearing course.

Participants: A total of 90 individuals (30 physiotherapist, 30 occupational therapist and 30 psychologist) with at least one year experience were taken for this study. Participants were selected solely from Kerala.

Inclusion criteria:

- Physiotherapist, occupational therapist and psychologist who are a native of Kerala.
- All the individuals had a minimum one-year experience in their respective field.
- Certified in their respective profession.

Exclusion criteria:

- Participants with less than one year experience,
- Individuals in other health professionals (Nurses, Behavioral therapist)

Procedure

Questionnaire (Thapa and Kumaraswamy, 2022) developed and validated was used in the present study. The questionnaire was distributed to 90 allied health professionals (30 physiotherapist, 30 occupational therapist and 30 psychologist).

Section:1 Questionnaire (Yes/ No Question)

Q1. Are you aware that ENT's work in association with audiologist?

Q2. The acquisition and monitoring of speech depend upon the auditory modality?

Q3. Do you think by early intervention and rehabilitation a hearing-impaired child can be integrated in the normal school?

Q4. Do you think speech language pathologist teachers sign language?

Q5. Neonatal screening should be conducted systematically on all newborns as a standard practice to assist in the early identification of hearing loss?

Section 2: Audiology Questions (Multiple Choice Questions)

Q1. Which of the following instrument is used by the audiologist to measure hearing sensitivity?

1. Audiometer
2. Otoscope
3. Sound level meter

Q2. Immittance evaluation can be used in detecting

1. Middle ear disorders
2. External ear disorders
3. Laryngeal disorder

Q3. Which is the instrument used to measure hearing sensitivity in difficult to test population?

1. Brainstems evoked response audiometry
2. CT scan
3. Electroencephalography

Q4. A person having difficulty in understanding speech in noisy environment

1. Hearing loss
2. Normal hearing
3. May or may not having hearing loss

Q5. Permanent use of hearing aids is prescribed to clients having

1. Reversible hearing loss

2. Irreversible hearing loss

3. Both

Yes/No Questions

Q1. Can you identify the hearing impairment in infants soon after birth?

Q2. Intake of certain drugs can cause hearing impairment?

Q3. Asphyxia is one of the common causes of hearing loss?

Q4. Hearing aid helps the person to understand speech?

Q5. Aids can be a cause for hearing loss?

Section:3 Speech (Multiple Choice Questions)

Q1. Short tongue can lead to which of the following problems

- a) Voice disorder
- b) Articulation disorder
- c) Loss of language

Q2. The most commonly seen problem in teachers due to excessive speaking

- a) Swallowing problem
- b) Chest pain
- c) Voice problem

Q3. Male who sounds like a female is known as

- a) Stutter
- b) Puberphonia
- c) Aphonia

Q4. Which of the following used in measuring parameters of voice

- a) Electroencephalography
- b) Electroglottography
- c) Audiometer

Q5. Stuttering is a problem where we can see

- a) Repetitions of sounds/words
- b) Voice problem
- c) Swallowing problem

Yes/No Questions

1. Trauma or injury to head leads to speech problems?

2. Can malalignment to teeth be a cause for pronunciation problem?

3. Are you aware of the existence of the disorder called “learning disability”?

4. Dysarthria is a neuromotor disorder leading to speech problems?

5. Respiratory irregularities in children with cerebral palsy can lead to deviant speech?

6. Do you think speech therapy is important after surgery of cleft palate?

7. Does speech therapist play a role in the rehabilitation of swallowing disorder?

8. Stammering can be reduced with the help of surgery?

9. An individual can be taught speech after the removal of voice box?

10. Principles of learning theories is used by a speech language pathologist in their rehabilitation procedure?

The questionnaire is divided into 3 sections, the first section regarding the professional related questions, second section comprise a total of 10 question (5 each audiology related multiple choice question and yes / no questions) and third section consist of 5 multiple choice question and 10 yes/ no questions related to speech.

Instruction: Professionals were instructed to provide appropriate response after going through the questionnaire.

Statistical analysis

The data was analysed using the Kruskal Walli's test to compare across the groups (physiotherapist, occupational therapist and psychologist). A p value < 0.05 was considered as statistically significant. The overall awareness level was analysed using Fisher's exact test. The statistical analysis was performed using SPSS version 23.0 software and statistical significance level was set at 5% ($p < 0.05$).

RESULT

The aim of the study was to assess the awareness level among physiotherapist, occupational therapist and psychologist on speech and hearing course and the results are discussed below.

Table 1

Shows the comparison of awareness between the groups in each of the 3 sections.

GROUP		N	Me an	Std. Devia tion	Medi an	IQR		To compare between the groups Kruskal Wallis test		
						Lower	Upper	KW value	p value	
Awareness Section 1(5)	PSYCHOLOGIST	30	1.87	1.655	1.00	0.75	4.00	3.547	0.170	NS
	OCCUPATIONAL THERAPIST	30	2.70	2.395	3.50	0.00	5.00			
	PHYSIOTHERAPIST	30	2.83	2.437	5.00	0.00	5.00			
Awareness Section 2(10)	PSYCHOLOGIST	30	6.13	4.478	10.00	0.00	10.00	1.405	0.495	NS
	OCCUPATIONAL THERAPIST	30	6.50	4.224	9.00	0.75	10.00			
	PHYSIOTHERAPIST	30	6.93	1.874	7.00	6.00	9.00			
Awareness Section 3(15)	PSYCHOLOGIST	30	8.50	7.045	14.50	1.00	15.00	3.907	0.142	NS
	OCCUPATIONAL THERAPIST	30	9.80	3.089	10.00	7.00	11.25			
	PHYSIOTHERAPIST	30	10.73	6.203	15.00	3.00	15.00			
Overall Awareness (30)	PSYCHOLOGIST	30	16.50	12.470	24.50	3.00	29.00	1.494	0.474	NS
	OCCUPATIONAL THERAPIST	30	19.00	8.255	24.50	10.75	25.25			
	PHYSIOTHERAPIST	30	20.50	8.978	26.00	9.00	27.00			

*NS= Not significant

From table 1 it can be inferred that in section 1 the awareness level were above 50 % among occupational therapist and physiotherapist but psychologist remained below 50%. All the professional's awareness level in section 2 and 3 were above 50 % and the section 2 score ranges from 53.3% -73.3% for psychologist, 56.7% - 76.7% for occupational therapist and 53.3% - 80.0% among physiotherapist whereas in section 3 the score

ranges from 53.3% - 63.3% for psychologists, 56.7% -70.0% among occupational therapist and 60.0% - 76.7% in physiotherapist.

The results suggests that there are no significant differences in awareness among physiotherapist, occupational therapist and psychologist for section 1, 2 and 3 of the questionnaires. Hence these findings reveals that physiotherapists demonstrated higher awareness levels than occupational therapists and psychologists across all three sections.

Figure 1

Shows the overall awareness among psychologist, occupational therapist and physiotherapist.

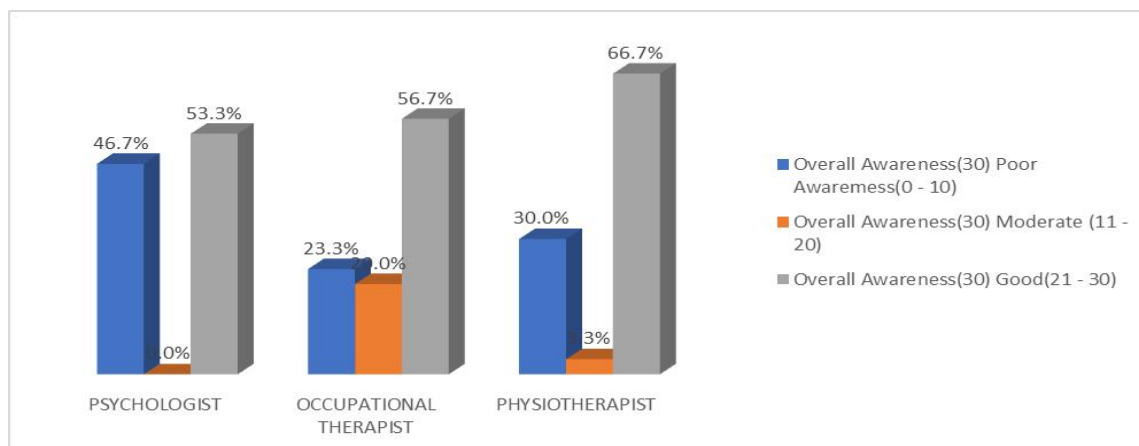


Figure 1 represents the overall awareness level among psychologist, occupational therapist and physiotherapist. The awareness level was about 53.3% among psychologists, 56.7% for occupational therapists and 66.7% in physiotherapists. These findings indicate that physiotherapists exhibited higher overall awareness than occupational therapists and psychologists.

4. DISCUSSION

The results showed statistically no significant difference in awareness among psychologist, occupational therapist and physiotherapist in all the sub – sections however physiotherapists showed a higher level of overall awareness (66.7%) compared to psychologist (53.3%) and occupational therapist (56.7%). Ferigollo and Kessler (2017) reported that there is limited understanding of the roles and responsibilities of other health professionals especially in the context of communication disorders which is in accordance with the present study. Overall findings suggests that there is a need in creating awareness of speech and hearing course among other health professionals for better interprofessional relationships and intervention of communication disorders.

5. SUMMARY AND CONCLUSION

Knowledge of speech and hearing services among other healthcare professionals is the foundation for effective interprofessional practice. The present study evaluated the level of awareness regarding the speech and hearing course among other health professionals. A total of 90 participants which includes 30 each physiotherapist, psychologist and occupational therapist was selected and a questionnaire related to speech and hearing course developed by Thapa and Kumaraswamy (2022) was administered. The findings indicated that no significant differences in awareness levels among psychologists, physiotherapists and occupational therapists. However, physiotherapists demonstrated a relatively higher level of awareness compared to occupational therapists and psychologists. These results can support greater recognition of the speech and hearing disciplines among various health professionals which would encourage more referrals for speech and hearing concerns and promote interdisciplinary rehabilitation for communication disorders thereby improving patient's overall quality of life.

6. LIMITATION OF THE STUDY

- Sample size was limited.
- Other health professionals were not included.
- The study could not be extended to other regions of India.

7. FUTURE DIRECTIONS

- Include all health professionals related to speech and hearing field.

- Conduct this study in other states of India.
- Use a larger sample group which would provide a better understanding of the awareness level.

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