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# **Development of a Questionnaire to Determine the Intervention and Service Delivery Practices of Speech-Language Pathologists for Children with Speech Sound Disorders in India**

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## **Abstract**

**Introduction:** Speech sound disorders (SSD) are common developmental speech disorders that affect communication in children. The articulation and/or phonological impairment in children with SSD impact children's speech intelligibility. The SLP's intervention practices in children with SSDs has been explored in monolingual children. Studies exploring clinical practices on language selection, selection of target, therapy approaches, training methods, and service delivery methods in multilingual population are scarce. The present study aims to describe current therapeutic practice and service delivery model followed by Indian SLPs during the intervention of children with speech sound disorders.

**Method:** The study was conducted in two phases. Phase I focused on the designing and validation of a questionnaire, that targets all the areas of intervention practices by speech language pathologist in children with SSD. In Phase II the content validated questionnaire was administered on practicing speech language pathologist with varying clinical experience in India. The questionnaire assessed different areas such as SLPs' academic qualification, city and state of practice, languages known by practicing SLP, work experience and work set-up with case load, age-range of children they encounter with SSD, frequent cause of SSD, referral sources, treatment structure, target selection, intervention approaches employed for children with speech sound disorders. The questionnaire was mailed to practicing SLPs with one year of experience or greater to fill out. The finalized questionnaire was made available for practicing SLP's across the country using google forms with an e-mail link to communicate.

**Results:** The results revealed, an overall response rate of 72.85%. Children with SSDs typically received 30-45 min therapy per session three times in a week. 50% participants reported that they provided at least 10-15 no. of sessions per month to children with SSDs. when prioritizing intervention goals for children with multiple sounds in error, more SLPs indicated that they gave high priority to early developing sounds (84.31%) and low priority to later developing sounds (48.04%). When it came to target phonological process error, participants gave high priority to the process that affect intelligibility the most (77.45%) and low priority to the processes that are less stable (15.69%). However, many SLPs also reported using aspects of traditional approach (41.8%) and providing phonological awareness training (37.2%). Recently, 24.51% participants were not familiar with Kaufman program.

**Conclusion:** The present findings collate the SLPs intervention practices for children with SSD and may be of helpful in advocating the treatment procedures with confidence to bring the best

possible outcomes.

Keywords: Speech sound disorder, Intervention, Service delivery practices.