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FEATURE

**Overcoming the Barrier in Special Education:
A Qualitative Investigation Into the Need for
Speech and Language Therapists in St. Lucia**

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***Abstract.** There has been serious under-representation of speech and language therapists in St. Lucia even with the genesis and augmentation of this service in the Western world. A qualitative study was conducted to investigate the need for this service in St. Lucia. The few related personnel in the area of speech and language therapy were contacted. In addition, the researcher met with speech and language therapists in Barbados to explore what was being done in the region. All data was collected via personal interviews, online interviews, telephone interviews, and e-mail. Findings suggest that the government is not doing enough to provide speech and language services to the children of St. Lucia who need them.*

St. Lucia is a small island state (256 square miles) in the Eastern Caribbean with a population of 160,000 people. The 2005–2006 statistical data from the Ministry of Education and culture of St. Lucia shows a total school population of 39,804. Of these, 253 students attend special schools, and 23,969 attend Primary and Senior Primary schools (UNESCO, International Bureau of Education, 2007).

Background of the Study

Speech and language therapy has evolved as a discipline over time. Taylor (1992) recaps the period from the Renaissance to 1900, where investigations into communicative disorders were carried out primarily by physicians. In addition, educators and elocutionists assumed responsibility for most habilitative/rehabilitative procedures undertaken. There is no doubt that teachers played a major role in speech and language intervention in the lives of children. Taylor (1992) further emphasized that “during the early years of the twentieth century,

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classroom teachers were involved in the treatment of communicatively disordered children” (p. 3).

Early literature suggests that there are critical periods for learning language. Lennenberg (1967) is historically recorded as the first to confirm any connection when he proposed the ‘critical period hypothesis.’ According to him, learning language takes place between the ages of two and puberty. Even though modern literature continually contends with the issue of language acquisition in children, scholars still seem to be of the view that children master certain aspects of language around the same time regardless of culture, country and environment. For example, Gleason suggests that “between about 8 to 12 months of age, infants often indicate their first understanding of words. . . . This event usually occurs between 10 to 15 months of age and at an average of about 13 months” (as cited in Santrock, 2008, p. 194).

In commenting on critical periods for development, specifically, language development, Tamis-LeMonde and Bornstein (1987) suggest among other things that the period of 12-30 months is when language develops rapidly. However, some research reports that there may be some variability in the rate of both construction and vocabulary growth in children. However, Bishop and Mogford (1993) suggest that this “individual variation is less striking than similarities in development” (p. 22). Bricker and Bricker supported this idea and took it further when they suggested that “early language intervention should begin with stimulation activities at birth, when ‘high risk’ infants are identified” (as cited in Cole & Cole, 1989, p. 122). If the language intervention process is initiated as soon as a language impediment is suspected, much can be done to assist children in overcoming their speech impediments.

There are four special education schools located in St. Lucia (the Lady Gordon Opportunity Centre, Dunnator School, the Soufriere Special Education Centre and the Vieux-Fort Special Education Centre) but none of them provide services directly pertaining to speech and language.

Statement of the Problem

In St. Lucia, where the few Special Education schools are operated by private individuals or institutions, most children with speech impediments are placed in the general education classroom with teachers who are inadequately trained to cater to the diverse needs of students. Also, the large number of students in one class does not allow the teachers to spend enough time with individual students.

In addition, the lack of easy access to the services of speech and language therapists and lack of awareness on the part of parents and the public in general may contribute heavily to parents’ inability to take remedial action at an early stage in their child’s development. Late detection or lack of early intervention

may decrease the probability of correcting speech and language problems among children in later years.

Rationale

The U.S. Preventive Services Task Force (2006) reports that speech-language deficits are the most common of childhood disabilities and affect about 1 in 12 children or 5% to 8% of preschool children. In addition, the National Dissemination Center for Children with Disabilities (2011) suggests that

Of the 6.1 million children with disabilities who received special education under IDEA in public schools in the 2005-2006 school year, more than 1.1 million were served under the category of speech or language impairment. This estimate does not include children who have speech/language problems secondary to other conditions such as deafness, intellectual disability, autism, or cerebral palsy. Because many disabilities do impact the individual's ability to communicate, the actual incidence of children with speech-language impairment is undoubtedly much higher. (Incidence section, para. 1)

To address these incidences of speech and language problems in children, the US Department of Labor (2012) stated that speech and language therapists/pathologists held about 96,000 jobs in 2004. About half were employed in educational services, primarily in preschools and elementary and secondary schools.

The Royal College of Speech and Language Therapists (2005) reported that there are around 10,000 practising speech and language therapists in the United Kingdom. In England where speech and language services are well established, it is estimated that around 2.5 million people in the UK have a speech or language difficulty; that 5% of children enter school with difficulties in speech and language and 30% of stroke sufferers have persisting speech and language disorders (Royal College of Speech & Language Therapists, 2005).

In St. Lucia, however, special education programs, specifically speech and language therapy services are frequently sponsored by private or semi-private organizations and by agencies such as the Peace Corps. In addition, the only place that presently offers the services of speech and language therapy is the Child Development Guidance Center (CDGC), a non-governmental organization (K. Gardner, personal communication, August 11, 2011).

In addition, research and literature have been limited in addressing the need for the services of speech and language therapy and auxiliary services in St. Lucia. As a result, the studies done in the United States, Canada, and the United Kingdom would probably be very instructive for St. Lucia since the occurrence of speech and language difficulties in children is not dependent on environment. Therefore, the same incidence of difficulties could be expected in the Caribbean

since Chomsky (1957/2002) argued that human beings are born with the innate capacity to learn language, and that all children, regardless of culture, follow the same basic patterns in development.

Theoretical Perspective

Schacter and Strage (1982) stated that the child's language develops most from everyday communication with adults who seek to communicate—that is, to understand and to be understood. Therefore, it is important to understand the early theories on language and how language develops in children to conclude whether the timely intervention of speech and language therapy is useful.

In reviewing Piaget's work, Craig and Baucum (2002) emphasized that "most learning situations involve interaction. . . . We interpret what we experience in terms of what we already know, and because new experiences are rarely exactly like older ones, we notice and process differences as well" (p. 55). Piaget believed that children learn actively by exploring what is in their environment. According to Craig and Baucum (2002), Albert Bandura recognized that "children and adults observe their own behavior, the behavior of others and also the consequences of those behaviors" (p. 53), and consequently, learn by imitation.

Vygotsky's view of social constructivism, which focuses on cognitive skills developing through social interactions, lends support to the idea that the mediating or intervention of a speech and language therapist with children who have speech impediments can be a success (as cited in Thomas, 1993).

In addition, Vygotsky's *zone of proximal development* may support the intervention of speech and language therapist because a more abled adult can assist a child to mastering a particular task, which is to be able to use language. Even though a child's actual development may be impaired, the speech and language therapist as the person in the scaffolding process will provide non-intrusive intervention through therapy. The speech and language therapist can also train parents, teachers, care-takers or anyone who can master the function of intervention to provide services in the scaffolding process.

Accordingly, Vygotsky (1978) stated that an essential feature of learning is that it awakens a variety of internal developmental processes that are able to operate only when the child is interacting with people in his environment and in cooperation with his peers. Vygotsky's (1978) theory plays an important role in language development and will be useful in the planning and developing intervention modules for speech and language therapists and other related personnel in St. Lucia. His work can be used by teachers to influence classroom management skills and to encourage students to engage in significant learning tasks that involve language and social interaction.

Review of Literature

According to Alcott (2002),

Language is our tool for thinking. Speech is the usual way in which we communicate with each other using language. Some children have difficulties in using language. Some have difficulties in actually communicating through speech. Speech and language therapy is a way of helping these children to tackle their difficulties. (p. 98)

Speech and Academics

Schuster (2000) suggests that speech and language development offer a useful indicator of a child's overall development and cognitive ability. In addition, other experts assert that it is related to school success (e.g. Catts, Fey, Tomblin & Zhang, 2002). According to the National Dissemination Center for Children with Disabilities (2011), all communication disorders carry the potential to isolate individuals from their social and educational surroundings and therefore, it is essential to find appropriate and timely intervention.

As such, children with speech and language difficulties are at risk for having poor academic achievement goals, because they are slower in expressing themselves, they may also be slower in understanding when their teacher is presenting to the class. Alcott (2002) stressed that "academic attainment is the starting point for looking at Special Education needs. . . . If a child is not progressing and learning roughly at the same pace as his peers then there are grounds for concern" (p. 30). He has posited that speech and language difficulties can cause serious problems and can make it difficult for a child to progress with learning.

Bashir and Scavuzzo (1992) suggest that children with language disabilities are clearly at risk for academic failure. According to them, young children with speech and language impairments are at risk for continued communication problems, as well as for associated cognitive, academic, behavioral, social and psychiatric difficulties.

It is reported that between 40 and 75% of preschoolers with early language impairment develop reading difficulties later, often in conjunction with broader academic achievement problems (Aram & Hall, 1989; Bashir & Scavuzzo, 1992). For that reason, speech and language professionals have found that children with language impairments are at risk of having both reading and behavioral problems (Tomblin, Zhang, Buckwalter, & Catts, 2000). In addition, the behavioral difficulties are often associated with reading impairment.

Laws Governing Children With Special Education Needs

International laws. Decades of work has been invested in improving the legislation governing issues related to persons with disabilities. Alcott (2002), in discussing the legislation of the Children Act of 1989 of the United Kingdom highlighted some of the important changes made to the Act. One such change is that “local authorities must ensure the welfare of children in need. These needs refer to a child’s health, education and general development” (p. 14). Alcott (2002) reported that special therapy may be needed for some children, but the greatest need seems to be for speech and language therapy and physiotherapy. Caccamo (as cited in Taylor, 1992) posits that

The issue of a person’s right to speech, language, and audiological services is a complex one—one with which we must come to grips. Not all communicatively handicapped children are being served by the public school, and I suggest that these children do have a right to such services. (p. 17)

The Charter of the United Nations Convention on the Rights of the Child (1989), Article 23, recognizes the rights of children with disabilities and states that these children are to “enjoy a full and decent life, in conditions which ensure dignity, promote self-reliance and facilitate the child’s active participation in the community” (p. 8). Additionally, the document states that parties are to extend special care to such children to ensure that they have “effective access to and receives education, training, health care services, rehabilitation services, preparation for employment and recreation opportunities, in a manner conducive to the child’s achieving the fullest possible social integration and individual development” (p. 8).

In the United Nations Convention on the *Declaration of the Rights of Disabled Persons* (Office of the United Nations High Commissioner for Human Rights, 1975), Section 1, a *disabled person* is defined as “any person unable to ensure by himself or herself, wholly or partly, the necessities of a normal individual and /or social life, as a result of deficiency, either congenital or not, in his or her physical or mental capabilities.” Section 6 affirms the right of persons with disabilities to “education, vocational training and rehabilitation, aid, counselling, placement services and other services which will enable them to develop their capabilities and skills to the maximum and will hasten the processes of their social integration or reintegration” (Office of the United Nations High Commissioner for Human Rights, 1975).

Caribbean laws. Article 23 of the Rights of a Child (as cited in Thompson-Ahye, 2004) decrees that

A mentally or physically disabled child should enjoy a full and decent life, in conditions which ensure dignity, promote self-reliance, and facilitate the

child's active participation in the community.' In this Article, the right of the disabled child to special care, financial assistance, education, training, health care services, rehabilitative services, preparation for employment and recreation opportunities in a manner conducive to the child's achieving the fullest possible social integration and development is recognized and promoted. (p. 9)

A review of what currently exists in neighboring islands revealed that the Government of Barbados through the Ministry of Social Transformation, has committed itself to the development of policies, programmes and activities that will empower and protect persons within society who are deemed to be vulnerable or socially disadvantaged (Green Paper, 2000). The government of Barbados, in keeping with the National Development Policy, is committed to the creation of a legislative base to enhance the lifestyles of persons with disabilities. The goal is that this policy will remove discriminatory practices whenever they occur, and provide educational access for all persons with disabilities at all educational levels. In section VII, titled "Health," the Government of Barbados proposes that effective and appropriate services will be provided for persons with disabilities (Green Paper, 2000). These services will emphasize assessment, early detection and intervention, treatment of impairment, and rehabilitation. Effective measures will be introduced which focus on prevention and rehabilitation. In section VIII, titled "Education and Training," the document declares that access to education should be a right to all citizens (Green Paper, 2000). It states that it is necessary to revise the Educational Act to ensure the 'right' to a quality education for persons with disabilities, in all educational institutions.

Reports of specific studies done in St. Lucia on the need for speech and language therapist could not be located. A study conducted on speech and hearing difficulties of primary school children in Barbados (Hornby, Stabler, Alleyne, Cumberbatch, & Sergeant, 2000) was the only related document identified. The sample of their study consisted of students from 73 out of the 80 government primary schools in Barbados. The population size was approximately 17,902 children. Hornby and colleagues (2000) found that "out of the 17,902 children who were tested, 4,223 or 23.58 per cent, demonstrated some degree of speech difficulty" (p. 199). Researchers also found that problems in speech development included lisps, omissions, substitutions and multiple articulation problems. Other speech problems identified were voice problems such as hoarseness and stuttering.

In discussing the findings of the study, Hornby et al. (2000) revealed that "the incidence of 23.58 percent of children in Barbadian Primary schools presenting with speech difficulties compares with a wide range from 6 to 25% reported in studies from the U.S. and U.K. with a median estimate of around 6%" (p. 8). According to them, "This suggests that the incidence of speech problems in

Barbadian schools is towards the top of the prevalence range and well above the median estimate for speech difficulties in these countries” (p. 8).

Findings of This Research

Occasional speech and language therapy has been available in Saint Lucia through Peace Corps volunteers and other volunteers over the past two decades or so. From 1997-1999, a position was funded by the Ministry of Education, but on an ad hoc basis (B. Schuling, personal communication, July 2006).

Speech and language therapist Maria Clegg worked in Saint Lucia for 3 years. Her services there ended in October 1999. She gave 261 therapy sessions in that same year 1999. In the early 2000s, Penelope Camps, a speech and language therapist from Trinidad and Tobago, visited Saint Lucia as often as possible. Each of her visits was for 3 days and was organized by the CDGC. She attended to at least 20 children during her 3-day visit each time (B. Schuling, personal communication, July 2006).

Dr. Schuling (personal communication, July 2006) explained that on one of Camps’ visits, they identified at least 100 children needing speech and language therapy, and that this was only the tip of the iceberg, according to her. At that time, Dr. Schuling was the Director of the CDGC, a position she held for over 20 years. Since November 1999, speech and language therapy has only been available sporadically by volunteers through the CDGC. Also in relation to identification of children with speech and language impediments, Dr. Schuling (personal communication, July 2006) stated that community pediatrician Dr. Bird also helped in identifying children with speech and language difficulties. The children that were identified were referred to the CDGC for further assessment and intervention.

The Government of Saint Lucia awarded one scholarship to Dale St. Juste from 2002- 2004 to study Speech and Language Pathology at Andrews University in the United States. Mr. St. Juste held the position of Officer in Charge of the Special Education Unit, until he began studying for his master’s this past school year in the United Kingdom (K. Gardner, personal communication, August 11, 2011). This Unit, according the St. Lucia Country report published by UNESCO (2007), was an effort on the part of the Ministry of Education to increase their attempt to broaden the scope of delivery of Special Education services.

Mr. St. Juste explained that the Special Education Unit of the Ministry of Education is supported by a Clinical Psychologist and three Japanese Overseas Cooperation Volunteers. One is a Physiotherapist, one an Occupational Therapist, and the other a Special Education teacher. The CDGC continues to be the only place that has Speech and Language Therapists on the Island (K. Gardner personal communication, August 11, 2011).

The present director of the CDGC, Dr. Kim Gardner, reported that teachers are receiving ongoing training in speech and language development. She revealed that the government of St. Lucia, for the first time in the 14-year existence of the CDGC, gave a grant in August 2011 to make the CDGC the lead agency for developmental disability issues. In addition, the CDGC no longer hosts summer camps because the programs have grown from the 6-week interventions of the past to longer stints. These longer stints allow therapists to provide individual therapy, and usually provide services averaging to about 5 months for the year. Notably, the CDGC has had a part time speech language therapist for the last 2 years. Dr. Gardner suggested that problems are less speech related but more communication and language based. Each therapist has had a waiting list of about 130 in the last 2 years and sees almost everyone on the list at least once. The regular therapy load is about 80 (K. Gardner, personal communication, November 28, 2011).

Conclusions and Recommendations

I believe that it is in the best interest of the people of St. Lucia, especially the children who need language intervention, that the Government provide scholarships to young persons who are interested in studying Speech and Language Therapy and related areas such as Physiotherapy and Occupational Therapy. In the interim, they should seek to provide positions for the qualified therapists on a continual basis to service the needs of children need speech and language services.

The Ministry of Education, together with the Ministry of Health, need to host seminars to enlighten the public and parents who have children with speech and language disabilities. They need to continue special training sessions for teachers (especially those who teach preschool, and Grades 1-3), so they can help in identifying, assessing and referring those children who may have speech and language impediments and developmental delays. According to Dale St. Juste, in a public statement made January 11, 2009, the general public needs to be made aware of the numerous challenges confronting special education centers on the island. These challenges include “the need for specific teacher training in special needs education, improvement to the physical infrastructure of special education centers and a review of the status of special schools” (St. Lucia Government Website).

I recommend that intense training be made mandatory as part of the early childhood educators’ curriculum in order that they may help in identifying children with speech and language difficulties. They could also be trained to perform routine tasks or give large amounts of verbal practice in order to help those children develop better language skills. In addition, nurses and community health aids need to undergo more intense training so that they can become more

active in identifying and referring children with speech problems as early as possible, and to develop better assessment skills. Pronovost's very dated suggestion (as cited in Luetke-Stahlman & Luckner, 1991) still seems very relevant: "At the present time, the best analyzer of human speech is the human ear and . . . a well-trained, experienced listener could provide more useful and valid descriptive and judgmental information than could be gleaned from acoustical and/or physiological measurements alone" (p. 181).

The Government of Saint Lucia needs to overcome the current barrier that exists between educational services in mainstream schools and the lack of appropriate education for children with special needs, especially those with speech and language difficulties. One immediate remedy may be to "import" and appoint speech and language therapists on the staff of the four special education schools across the island. In addition, several qualified, well-experienced speech and language therapists could be invited to set up private offices across the island where they can be easily accessed by individuals needing their services, thereby making therapy easily available.

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