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Attitudes of K-12 School Administrators Toward Speech-Language Programs in Public Schools

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ATTITUDES OF K-12 SCHOOL ADMINISTRATORS TOWARD SPEECH-

LANGUAGE PROGRAMS IN PUBLIC SCHOOLS

by

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I will dedicate this endeavor to loved ones who, while living, provided me with inspiration, love and an endearing confidence in my abilities. I am truly grateful for their influence in my life.

       Inez Hargrove, Grandmother

       Sharon Maria Bryant, Cousin

       Marie Hardwick Jarnigan, Neighbor

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ABSTRACT

This study examined K-12 school administrators' attitudes toward speech-language pathology services in public schools. Elementary, middle, and secondary school based administrators, employed in 63 school districts throughout Florida, were solicited to participate in the study in a letter of invitation generated by a web-based design program, *Enterprise Feedback Management (EFM) Community*. Administrators volunteering in the study were given an assurance of confidentiality and fair treatment concerning their participation.

A survey instrument, the *Scale of Educators' Attitudes toward Speech Pathology (SEASP)* consisting of 10 demographic items and 34 positive and negative statements about speech and language programs in schools was used to gather data. Participants were asked to provide their reactions along a favorable/unfavorable continuum to the survey.

The results obtained from this study duplicated measurements used by previous researchers and examined the mean scores and standard deviations of item responses. Analyses of "between group" and "within group" differences examined attitudes among variables relative to professional levels, building size, and additional certification areas and were conducted using one-way and two-way ANOVAs. Descriptive statistics were included to provide a profile of the participant population - means, frequencies and consensus of responses.

Overall, among administrative participants, there existed minimal differences in attitudes toward speech-language pathology programs in public schools. This was true at elementary, middle and secondary levels, and included (as a secondary group) those

"other personnel" who might, at times, supervise speech-language pathology professionals. Thus, school administrators generally agreed in their attitudes toward speech language pathology programs. The means of responses measuring attitudes in pre-determined categories yielded results that demonstrated a consensus of agreement in the areas of (a) the impact services on student success, (b) program quality, and (c) the role of the speech-language pathologist, respectively.

Results yielded no statistically significant differences in respondents' attitudes toward speech-language pathologists among school administrators employed at building sites having small and non-small populations, and among school administrators having, or not having, additional certification in exceptional student education.

Because speech-language pathologists are evaluated by school administrators and other non-field personnel, suggestions are provided concerning the use of performance appraisals, ways to enhance the quality and delivery of school services, and enhancing university programs in communication sciences and disorders, to include components in supervision.

CHAPTER ONE

INTRODUCTION TO THE STUDY

The ability to communicate is as important as the ability to breathe (Van Hattum, 1985b). People who possess good communication skills are able to reach their highest potential within a school environment. Speech-language pathologists (SLPs) have the unique responsibility to assist individuals with demonstrated deficits in communication to reach their highest potential (Van Hattum, 1985b).

Background

SLPs evaluate and treat "speech, language, cognitive-communication and swallowing disorders in individuals of all ages, from infants to the elderly" (American Speech-Language-Hearing Association, ASHA, 2009a, ¶1). According to ASHA's website, SLPs practice at a range of work sites such as public and private schools, rehabilitation centers, nursing care facilities, universities, hospitals, and community clinics. ASHA, based in Rockville, Maryland, is a national organization that represents over 135,000 professionals. Within this total, there are 110,000 SLPs certified by ASHA. Of the certified SLPs, 59% are employed in educational facilities (ASHA, 2009d).

During the middle of the 20th century, as the need for speech services was only beginning to be recognized, individuals employed in the speech-language profession not only struggled with the work schedule and case load but also with ways to label their positions. Initially, labels were related to the type of population served and the location of the service. For instance, the practitioner was called a *speech correctionist* in a private office setting, a *speech teacher* in school settings, and a *speech clinician* in hospitals and clinics. Later, the term *speech therapist* gained more acceptance but caused some

confusion with other professionals such as physical and occupational therapists. In 1964, Black noted the current and more desired term as "speech-language pathologist," which was a more descriptive and comprehensive term.

The mandatory legislation of the Education for All Handicapped Children Act of 1975 (Public Law 94-142) had a direct impact on the need for qualified SLPs as it provided for special services within a population, expanding the group from pre-school aged handicapped children to adult individuals up to age 21 (Neidecker, 1980, p. 11). Full implementation of the legislation took place in 1980, with subsequent revisions and reauthorizations. The Individuals with Disabilities Education Act (IDEA) of 1975 mandated that all children receive "a free and appropriate education" and recommended changes in school practices concerning special education. The legislation urged emphasis on general education curriculum and behavior assessments contained within the individual education plan objectives. Further, this legislation promoted the use of speech pathology practices within the classroom setting in addition to the routine resource pull-out model (McCrea & Brasseur, 2003).

The IDEA legislation was amended in 2004 by Public Law 108-446-17, which maintained that highly qualified individuals should provide services for disabled children and adults, and consequently influenced "personnel qualification requirements for SLPs in school settings" (ASHA, 2009a ¶2). Further, the changes in IDEA reauthorization law also influenced "how states and districts manage personnel shortages in their schools," and the American Speech-Language-Hearing Association implemented an initiative focusing on resources and strategies for school shortages (ASHA, 2009a ¶2).

The model delivery of services for students with communication disorders has been impacted by the legislation known as No Child Left Behind (USDOE, 2002) in the area of accountability and assessment of special populations. The history of this body of law is well established and has been widely publicized. Further review of the law is not essential inasmuch as this research focuses on a review of information supporting the need for effective supervision of school speech pathology programs.

Critical Shortage Area

The speech-language pathology field has been deemed a critical shortage area by the Florida Department of Education (Rosa-Lugo, Rivera, & McKeown, 1998) due to the difficulty that school districts experienced in hiring qualified individuals to meet the students' needs. Results from a 2007 ASHA survey of critical issues found that 65% of the 7000 member-respondents ranked the critical shortage of SLPs in healthcare and education as one of the top issues of concern (Moore, 2007, p. 25). Further, the U.S. Bureau of Labor Statistics anticipated that the employment of SLPs would grow, on average, faster than all other occupations through the year 2010 (Edgar & Rosa-Lugo, 2007). The Bureau reported the need for more than 26,000 additional SLPs between 2002 and 2012 – a 27% increase in job openings across the nation (Edgar & Rosa-Lugo).

It has become apparent that the field of speech-language pathology has been impacted by legislative mandates that included increased accountability and requirements for highly qualified personnel, as well as by the expansion of the age groups covered under the IDEA (2004). The critical shortage of SLPs has also supported the need for further understanding among school administrators concerning the role and responsibilities of SLPs.

Statement of the Problem

Considering the impending growth of and demand for this profession, there not only exists a need for certified SLPs possessing clinical licensing, but also the need for supervisors of speech and language services to offer input and direction in order to enhance the quality of the programs being offered. In a technical report disseminated by ASHA (1993), it was noted that SLPs often are "employed in work settings where they are evaluated by supervisors and/or administrators who do not hold ASHA certification in the appropriate profession or who have little or no current clinical experience" (p. 2). The report further revealed that some job responsibilities could be evaluated by any knowledgeable administrator; however, there were specific tasks, distinct to the speech pathology field, which required the input of a certified professional evaluator.

In a position statement presented by ASHA (1985), supervision was identified as a separate area of professional practice having a specific set of basic knowledge, skills, and abilities. Other researchers described supervision as a "pervading and complex" activity, with limited available demographic data (McCrea & Brasseur, 2003). Despite the uncertainty of the number of individuals involved in supervision, the majority of ASHA's membership (59%) was comprised of professionals who were employed in schools (ASHA, 2009a, ¶10). Given that school-based administrators play a critical role in the supervision and evaluation of school-based SLPs, the present study is essential in examining the attitudes of school administrators relative to speech pathology services. An understanding of their attitudes could influence areas such as program planning, compensation, recruitment and retention, and the success of students who demonstrated communication disorders.

The Education for All Handicapped Children Act (Public Law No. 94-142) of 1975, which later became the IDEA in 1991, acknowledged standards for the diagnosis and treatment of communication deficits in children from birth to age 21 (Lubinski & Masters, 1994). This legal landmark had many implications for SLPs and services for children with disabilities and was vital to the efficacy of speech and language services in schools (Ruscello, Lass, Fultz, & Hug, 1980). Specifically, public school SLPs were deemed as essential professionals in the treatment of students with communication deficits (O'Connell, 1997). The range of their responsibilities entailed diagnosing and treating students who demonstrated communication disorders. These students varied in age, grade level, and severity of disability (Lubinski & Fratteli; Rosa-Lugo et al., 1998). The reauthorization of this bill underscored a challenge to school districts to meet the "highest qualified providers" standards required by the law (ASHA, 2004, ¶4).

Quality speech-language programs advance the profession, increase public appreciation of speech-language pathology services in schools, and improve communication support for all students. "The quality of a speech-language program depends, to a significant degree, upon the leadership of the supervisor"(Fisher, 1985, p. 80). School-based speech-language pathologists have often been evaluated by supervisors and/or administrators who did not hold ASHA certification and who had minimal clinical experience (ASHA, 1993). Given the organizational structure of many school districts, which placed SLPs under the direct supervision of school administrators, the examination of school leaders' opinions relative to speech pathology services has become essential.

Purpose of the Study

The purpose of this study was to examine the attitudes of K-12 school administrators toward speech and language programs in public schools relative to program quality, the role of the SLP, and the impact of services on student success. The study was completed using quantitative measures of data collection.

Research Questions

This research addressed the following questions:

RQ1) What are the attitudes of K-12 school-based administrators toward speech and language programs in public schools relative to program quality, the role of the SLP, and the impact of services on student success?

RQ2) Are the attitudes concerning speech and language programs in public schools different among elementary, middle, and secondary school administrators?

RQ3) Are the attitudes concerning speech and language programs in public schools different among elementary, middle, and secondary school based administrators employed in school sites as having small and non-small populations?

RQ4) Are the attitudes concerning speech and language programs in public schools different among elementary, middle, and secondary school based administrators having additional exceptional student education area certifications and/or qualifications as opposed to those who do not?

Significance of the Research

Given the critical role of SLPs in the public school setting, the difficult issues of their recruitment and retention, and the probability of their being supervised or evaluated

by school-based administrators (Edgar & Rosa-Lugo, 2007; Rosa-Lugo et al., 1998),

examining the attitudes of those education personnel who impact the planning and

development of communication programs is important. The need for quality supervision

is vital in public school settings inasmuch as SLPs are often isolated from other members

of the profession and serve primarily in educational facilities. SLPs have a need for

quality supervision to enhance programming services and meet the mandates of the

individualized educational plans for individuals with special needs. Fisher (1985) noted

that a speech-language pathology supervisor should be adequately able to "evaluate

programs and personnel" and be both an "advocate for students with communication

problems" and a leader to "develop and implement programs" for students to ensure

quality services (p. 54).

Because the evaluation of programs and personnel in speech-language pathology

is an essential component of improving the competency of services, the nature of

supervision for this area is worthy of discussion. According to Fisher, the "supervisor

should hold the ASHA Certificate of Clinical Competence in the area in which the

supervision will be done" (1985, p.56). Additionally, these researchers recommended that

the individual have three years of school-related experience and state certification in the

supervised area.

Fisher (1985) wrote, "the quality of a speech-language program depends, to a

significant degree, upon the leadership of the supervisor" (p. 80). Most SLPs are

employed in an educational setting and are supervised by school administrators who

generally do not hold ASHA certification and have minimal clinical experience. Thus, an

examination of school leaders' opinions relative to speech pathology services is of

considerable significance to the field of speech-language pathology as well as to school administrators.

Definitions

Orientation to the following definitions is needed for a more complete understanding of the literature and the research.

American Speech-Language-Hearing Association (ASHA) – the professional, scientific, and credentialing association for more than 127,000 members and affiliates who are audiologists, SLPs, and speech, language, and hearing scientists.

Caseload – The number of students served by an SLP.

Certificate of Clinical Competence – "a nationally recognized professional credential that that represents a level of excellence in the field of Audiology (CCC-A) or Speech-Language Pathology (CCC-SLP). Those who have achieved the CCC—ASHA certification—have voluntarily met rigorous academic and professional standards, typically going beyond the minimum requirements for state licensure." (ASHA 2009a, ¶ 1-2).

General Education – "A typical classroom and curriculum designed to serve students without disabilities also referred to as regular education" (Smith, 1998, p.564).

Inclusion – Or "mainstreaming," resides "in the belief that disabled children have a right and can benefit" in a "regular educational environment" (Noll, 2004, p.251).

Individuals with Disabilities Act (IDEA) – Amended from Public Law 94-142 and "enforced by the Office of Special Education Program" requires that recipient of funds "provide qualifying children a free and appropriated education that is made

available in the least restrictive environment" (Cambron-McCabe, McCarthy, & Thomas, 2004, p.192).

Itinerant – Model of service delivery initially established in Chicago in the 1950s and 1960s that required professionals to travel to a number of schools several times per week delivering speech-language treatment to children in small groups (O'Connell, 1997, p. 11).

No Child Left Behind, 2001 – Legislation proposed by President George W. Bush, "reauthorized the Elementary and Secondary Education Act of 1965 (ESEA) and incorporated major reforms in education in the areas of assessment, accountability, and school improvement. The law requires States to develop standards in reading and math, and assessments linked to those standards for all students in grades 3-8." (USDOE, 2002, p.1).

Non-Small School – Descriptive term to indicate all Florida public schools not meeting the criterion of "small school requirement" in Statute 235.2157, as established by the Florida Department of Education in 2000.

School-based – Descriptive term to indicate location or classification of personnel employed in learning environments. The term is also used to indicate the level of management and operational decisions.

Small School – "An elementary school with a student population of not more than 500 students. A middle school with a student population of not more than 700 students. A high school with a student population of not more than 900 students. A school serving kindergarten through grade 8 with a student population of not more than 700 students. A

school serving kindergarten through grade 12 with a student population of not more than 900 students" (FLDOE, 2000, Statute 235.2157, p. 251).

Speech Clinician – A favored term and briefly used to describe individuals working in clinics and hospitals, later rejected by school personnel and administrators due to its connotations of medical service (Black, 1964, p. 2).

Speech Correctionist – An archaic, descriptive, and, to some extent, objectionable title given to individuals employed in public school speech programs (Black, 1964, pp. 2-3).

Speech-Language Pathologist (SLP) – A "desired title for individuals employed in the profession although some hold the belief that the title represents the medical aspect of the profession" (Black, 1964, p. 2). These individuals are "capable of detecting, preventing, diagnosing, prescribing for, and remediating disordered communication" (Van Hattum, 1985a, p. 7).

Speech Teacher – "A term frequently used as a result of previously grouping all persons working in schools as teachers; this term is inaccurate, defining these individuals as teachers of general speech" (Black, 1964, p. 2).

Speech Therapist – "A supportive title describing individuals working in the profession, the title presents the probability of confusion with other professions such as physical therapy and occupational therapy" (Black, 1964, p. 2).

Methodology

Because the primary objective of the study was to explore, from a quantitative perspective, the attitudes of K-12 school-based administrators toward speech-language programs in public schools throughout Florida, a web-based design computer program

was chosen to collect data. A survey instrument, *Scale of Educators' Attitudes toward Speech Pathology* (*SEASP*, Phelps & Koenigsknecht, 1977) was placed in the web-based program *Enterprise Feedback Management (EFM) Community*.

A master list containing electronic mail addresses of all school administrators among 67 school districts was requested from the Education Information and Accountability Services within the Florida Department of Education. The administrators from Duval county and the Florida School for the Deaf and Blind were excluded and not recruited as volunteers for the study due to familiarity of the investigator and anticipated bias to the profession. Seminole County Public Schools was also omitted from participation in this study due to the cumbersome nature of the procedure involved in conducting research in the district. The open period of the study was extended from 5 to 11 weeks so that permission to conduct the study within Lee and Miami-Dade counties could be obtained from research evaluation committees and from the UNF Institutional Review Board. A total of 1,940 administrators were solicited via the internet to participate as volunteers for the study, resulting in 248 respondents to the study. Of the 248 respondents, a total of 201 surveys were completed and could be used for data analysis.

The online survey consisted of a 10-item background information section and the 34-item Likert-type questionnaire. The demographic section collected information such as the participants' professional level, most utilized certification, building size (i.e., number of students), professional training, and nature of communicative interactions with speech-language pathologists while the actual questionnaire consisted of items exploring

participant responses to statements concerning program quality, role of the speech

pathologist, and the impact of services on student success.

Data were analyzed using descriptive and inferential statistical techniques and

employing the *Statistical Package for the Social Sciences* (SPSS), version 17.0.

Limitations

The study was limited to a sample of elementary, middle, and secondary level

school administrators and excluded vice-principals and assistant principals in Florida.

The investigator received a total of 2,263 electronic mail addresses from a master list of

K-12 school administrators provided by the Florida Department of Education, Education

Information and Accountability Services division. Subsequent to the removal of invalid

electronic mail addresses and the exclusion of counties and administrators selected as

non-study participants, a total number of 1,940 valid electronic mail addresses was placed

in the web surveyor, EFM Community. Although a total number of 248 responses was

collected, the responses submitted by 201 administrators having completed the

questionnaire in its entirety were analyzed.

The number of administrators within each professional level is reflective of the

number of public schools within the state (FLDOE, 2009, ¶6). According to the website,

there are 1953 (48%) elementary schools, 601 (15%) middle schools, 870 (21%)

secondary schools, and 566 (14%) combination/adult schools within the state of Florida.

In comparison, the responses to the study included were obtained from 111 (55%)

elementary school administrators, 24 (11%) middle school administrators, 26 (12%)

secondary school administrators and 40 (19%) school administrators indicating "other" as

a professional setting. Generalizations and claims regarding the total population can be

made considering the existing similarities between the study sample and the public school population of administrators.

As this was a quantitative study, it did not provide qualitative results related to the SLPs' experiences working under supervisors who did not have training in the field of speech-language pathology. As the survey instrument was disseminated using a web-based design, there were no one-on-one interactions between the researcher and the participants, which limited the depth and scope of the information gathered through the research instrument. In an effort to overcome limitations consistent with a quantitative research design and to derive further scope from participant responses, questions relative to participants' experience, supervisor-supervisee communication, and delivery of speech pathology services were presented in the survey.

Organization of the Research

The report of the study is organized into five chapters. Chapter One has provided an introduction to the study including background information, purpose, rationale and significance of the research, definitions, and limitations of the study. Chapter Two provides a conceptual framework of the study and a review of the literature concerning supervision, legislation, critical issues and educators' attitudes toward speech-language pathology, and discussion of organizational management. Chapter Three discusses the research design, participants, instrumentation, and procedures for data collection and analysis. Chapter Four presents study results containing analyses of the background and survey sections of the instrument. Chapter Five provides a summary and discusses findings from key research questions. The final chapter also provides recommendations for improvement of practice and future research.

CHAPTER TWO

REVIEW OF THE LITERATURE

The purpose of this chapter is to present a conceptual framework for the study

through a discussion of cognitive learning theory encompassing attitudes as schemas,

functions of attitudes, and cognitive dissonance. Because the study involves an

assessment of attitudes, a discussion of terminology and concepts, from a psychosocial

perspective, is offered to gain greater understanding and awareness of the subject matter.

The second section of this chapter presents a discussion of legislation and critical

issues impacting supervision. A portion of the chapter discusses two organizational

structures, site-based and centralized, involved in the supervision of speech-language

pathologists in school districts. Given that the "structure" of supervision of speech-

language pathologist varies within each district, two organizational charts revealing the

structure of leadership and exceptional education/student services are presented as an

example of organizational management. The final portion of the chapter includes a

periodic review of empirical studies that examine attitudes, opinions, and perceptions of

speech-language pathology services and the value held by other educators regarding the

field.

Conceptual Framework

The conceptual framework for this study provides a critical perspective for the

group processes that exists among non-speech-licensed individuals involved in a

supervisory role of speech language pathology programs in public schools. Figure 1

illustrates a foundation of cognitive processes and variables which may influence overall

attitudes of indicated by K-12 school administrators who hire, supervise, and evaluate

school based speech-language pathologists. The variable of professional level was used in

the study conducted by Phelps and Koenigsknecht (1977) which investigated various

educational specialists' attitudes toward speech and language programs in public

elementary schools. The sample included 30 school principals, 30 specific learning

disabilities teachers, and 30 general education teachers of primary (grades 1-3) and

intermediate (grades 4-6) students, all employed in the same school district. A group of

30 clinicians who participated in the construction of the survey tool, *Scale of Educators'*

Attitudes toward Speech Pathology (SEASP), composed the final group of participants.

Descriptive data were compiled and analyzed as a result of the administration of the

SEASP to the various educational groups. Not surprisingly, the speech-language

pathologists indicated the highest favorable measure toward the practice of speech

pathology of any of the study groups. Further, findings from the descriptive data

indicated that the principals demonstrated the most variability in their attitudes toward

speech-language pathology services. The univariate analysis used in this study

determined a significant difference among groups relative to total attitude scores. The

various educational groups presented in this research by Phelps and Koenighsknecht

(1977) provide a model for the current research. The sub-categories of school

administrators (e.g., elementary, middle, secondary, other) outlined in Figure 1 reflect the

various educational groups studied by these researchers.

Because quality supervision is essential for all educational areas, it is reasonable

to expect that effective supervision of SLPs enhances services and subsequently benefit

children with communication disorders (Van Hattum, 1985a). As instructional leaders,

school administrators promote a positive school environment and seek to enhance learning for all students. School administrators seeking to support educators of special education programs can do so by acknowledging accomplishments, allowing time for training, providing ample work space and materials, and giving useful feedback (Jones, 2006b). Considering the importance of leadership and the relationship that leaders share with personnel of specialized populations, the study of attitudes held by school administrators toward speech language pathology programs is significant.

   Cognitive learning theory. A framework in understanding the attitudes of school administrators may be present within the context of cognitive learning theory which emphasizes the importance of background knowledge. An individual's perception is the process used to attach meaning to stimuli. Similarly, an examination of this theory may offer an understanding of the process school administrators' use in attaching meaning to their opinions toward speech language pathology programs. Principles of cognitive learning theory include these components: (a) "learners are active," (b) "understanding depends on what learners know," (c) "learners construct meaning rather than record understanding" and (d) "learning is a change in an individual's mental structures" that allows for the ability to display different behaviors (Eggen & Kauchak, 2004, p. 237) These components serve as one of four components forming the conceptual framework for the current study examining school administrators' attitudes toward speech pathology programs.

   Piaget contended in his theory of intellectual development that there exists a drive for equilibrium, that is, a need for balance between an individual's understanding of the

world and the individual's experiences (Eggen & Kauchak, 2004). An application of

Piaget's theory can be transferred to the examination of school administrators' attitudes

within this study. School administrators manage both physical and human resources

within daily operations. Successful management of numerous responsibilities is a

demanding feat for any veteran or new administrator. In order for these instructional

leaders to impact academic achievement and school success, they must organize new

experiences into systems or "schemes" to increase understanding of the stimuli surround

them and how the world works. New experiences for school administrators may include

the supervision and evaluation of speech language pathology programs at public school

sites. It may involve the need for a school administrator to increase understanding of

communication disorders and the role a speech language pathologist has relative to

academic areas such as reading and literacy.

Attitudes as schema. Attitudes may be described as likes and dislikes. This

prevailing concept within society has overwhelming influences in the social, behavioral,

and emotional aspects of human nature (Bem, 1970). Similarly, Eagly and Chaiken

(1993, p.1) offered a definition of attitude as "a psychological tendency that is expressed

by evaluating a particular entity with some degree of favor or disfavor." These authors

suggested that a practical way of considering attitudes is to view them as a type of

schema. According to Fiske and Linville (1980, p. 543), schema may be considered

"cognitive structures of organized prior knowledge, abstracted from experience with

specific instances." Similarly, Eggen and Kauchak (2004, p. 244) reported that schema

are "the way knowledge is organized in memory" and "the process of organizing

information is working memory." Chunking is a strategy used to accommodate working

memory. Considering the complexity of a work day for a school based administrator, such strategies that assist in organizing information (chunking) may decrease the cognitive overload of information involved in the numerous responsibilities and duties of the position. Therefore, the development and use of schema may offer some practicality during various interactions with personnel.

While it is important to develop and use schema within the supervisory process, it is equally important for school administrators to demonstrate "self-knowledge" and an understanding of their individual philosophies, techniques, and values which are often brought to the supervisory process. In brief, it is important that administrators comprehend their own roles and rationale for their supervisory behaviors (McCrea & Brasseur, 2003, p. 65). A self analysis of the practices in which they engage may contribute in some manner to their reported attitudes. Demographic questions involving (a) the frequency of communicative interactions with speech language pathologists concerning professional issues and (b) a self-report of knowledge and familiarity of speech-language pathology are reported in the survey results. The results obtained from these survey items may reveal inferences regarding the significance and degree of reported attitudes toward speech-language pathology programs.

Functions of attitudes. It is important to examine Katz's (1960, p. 58) four-function taxonomy relative to the examination of school administrators' attitudes toward speech language pathology programs. The taxonomy postulates that attitudes expressed by individuals correspond equally with their wants and desires. The four functions suggested by this researcher include (a) the "utilitarian" function, (b) the "knowledge" function, (c) "ego defense" function, and (d) the "value expression" function. The

utilitarian function identifies that attitudes can be advantageous in reinforcing stimuli within the environment while the knowledge function of attitudes gives meaning and understanding to the world. When people present attitudes as a result of inner conflict, this behavior can be generalized as a manner of self-defense or guarding their self-esteem as noted in the ego defense function of attitudes. Lastly, the value expression function of attitudes is gained from one's expression of self-worth and individualized value system. For instance, a person who desires to be a school administrator may often possess attitudes that are consistent with school leadership.

Cognitive dissonance. The theory of cognitive dissonance as studied by Leon Festinger and summarized by Bem (1970, pp.54-55) "postulates that if individuals employ behaviors that are incompatible to their beliefs and attitudes, they will experience a discomfort known as cognitive dissonance." The discomfort will inevitably compel the individual to draw resolution to the inconsistency; therefore the individual will attempt to resolve this discomfort through self-persuasion toward attitudes supporting the displayed behavior. The example of a person who smokes and has beliefs of the harmful effects of smoking, yet engages in the practice of smoking, is experiencing inconsistency or dissonance. The theory purports that the dissonance between an individual's belief and behavior will induce the person to change his attitude to a cognitive consistency.

This attitudinal theory provides insight to the responses gained from participants in the current study with regards to the relationship of variables impacting their indicated attitudes. Figure 1 depicts a conceptual framework for examining K-12 school administrators' attitudes toward speech language programs in public schools.

The conceptual framework for this study illustrated in the diagram presents the probability and progression of internal influences (attitudes) held by the administrator participants, toward speech-language pathology program areas of program quality, role of the speech-language pathologists, and the impact of student services. The diagram reveals that in the initial stages of attitudinal development, external influences impacting reported attitudes may involve the administrators' (a) prior knowledge and skills, (b) experiences and training, (c) consistency of beliefs and actions, and (d) accurate self-assessment of the supervisory role. The diagram represents the external and internal influences which subsequently were examined in descriptive and inferential statistics for data gathered from this study.

Variables in the Study

Additional certification of the participants, building size, and professional level were selected as variables for the study. A number of studies have previously documented variables associated with attitudes toward speech-language programs and the role of the speech-language pathologist on an interdisciplinary team. The following section provides highlights from studies relative focused on attitudes toward speech language pathology programs.

Professional level. Jean Anderson (1972) conducted a comprehensive study to explore the status of supervision of speech, hearing, and language programs in the schools. Anderson emphasized the need for employment of field related supervisors and the training of such supervisors to assist in the professional development of inexperienced clinicians. The 211 participants in the study fit the criteria of the study and were defined as "directors of special education and college and university supervisors" (p.13).

Descriptive information such as title, educational background, training, professional experience as supervisor, nature of clinical experience, and experience as an educator were solicited from members of the sample. Other information included job-related problems, school enrollment, number of students served, and daily activities and responsibilities involved in supervision. The study obtained information about the nature of supervision and provided a foundation for subsequent studies in the profession. The participants in the study reported a positive reaction to the need for training and preparation required in the development of speech-language pathology programs in supervision.

Certification. In a study conducted by Bennett & Runyan (1982), a total of 282 professional educators were polled to evaluate their perceptions of the effects of communication disorders on educational performance. The sample included 201 general education teachers, 64 special education teachers, one administrator, and 16 resource teachers. Descriptive statistics were gathered about (1) educators' perceptions of the adverse effects in general of communication disorders on education performance and (2) educators' perceptions of the adverse effects of specific communication disorders (i.e., articulation, language stuttering, voice) on education performance. The overall results of the study demonstrated that the majority of educators participating in the study thought that communication disorders negatively impacted overall educational performance.

In another study conducted by Clauson & Kopatic (1975), a total of 50 teachers were polled to evaluate their attitudes and knowledge of remedial speech programs. The sample included eight men and 42 women within an age range of 20 to 41 years, with an undergraduate-level education and up to 15 years of teaching experience. Each

participant was asked to listen to recorded speech samples, indicate a judgment of the disorder, and respond based on his knowledge to a questionnaire regarding speech disorders. Descriptive statistics demonstrated that the majority of the teacher participants had difficulty identifying normal speech. Also, results from the teachers indicated a consensus in these areas: (1) the necessity for the speech program and the need for the speech-language pathologist (100% agreement), (2) favorable teacher and speech-language pathologist relations (94% agreement), (3) behavior medication management and program quality (74% agreement), and (4) management of parent conferences of students with speech-language difficulties (84% agreement). As a result of the study, the researchers suggested that, although teachers expressed their strengths and weaknesses concerning their knowledge regarding speech-language disorders, the degree of their willingness to improve their knowledge of speech disorders or extend their time to refer a child suspected of a disorder remained questionable.

Data from a recent mini study investigating perceptions of school administrators toward the role of speech language pathologists at school sites showed similar perceptions expressed by two local school-based administrators (Jones, 2006a). Qualitative findings from interviews with an elementary level administrator and a middle school administrator indicated positive perceptions as a consequence of personal and professional experience in the area of exceptional student education. For example, when asked the way training in leadership has prepared the participant in the area of exceptional student education, the following remarks were made: (a) "As a teacher I taught in the inclusion study so I began with that experience of inclusion students in my classroom." (b) "I like to think of myself as a servant leader, and, as a principal, the

constituency that I serve the most is the students. I see myself as a representative for the students and my decision making is easy – I do what is best for the students." When asked what these participants considered the most important responsibility of a speech pathologist, the following remarks were generated: (a) "I guess it would be the child. When pulling a child out of the classroom, it should be done in a way that the child isn't stigmatized or put in an embarrassing situation." (b) "Having had a speech problem when I was in elementary school, because of a severe lisp problem, I would have to go to therapy and recite repeatedly 'I sold six chickens.' The therapist helped me improve my speech patterns and I didn't have that problem anymore. It only took a little over a year and it really helped me as I got older" (Jones, 2006a).

The findings of the mini study demonstrated that the extent of the participants' knowledge about exceptional education, training, and professional experiences could influence the perceptions of speech-language pathology services at school sites.

Building Size. In the Phelps & Koenigsknecht (1977) study, the authors measured educators' attitudes toward speech and language programs in public schools. The results indicated that the spectrum of attitudes among the various educational groups of participants (speech clinicians, learning disabilities, principals, primary teachers, Grades 1-3, and intermediate teachers, Grades 4-6) could be attributed to variables such as "years of experience, district size, and academic background in speech pathology." The study revealed that the groups differed in their attitudes "only as a function of their specialty classification." (pp. 41-42).

Given that "district size" possibly influenced attitudes examined in the previous study by authors Phelps and Koenigsknecht (1977), the current research examined

"building size" as a variable which directly focused on the supervision of the school based speech language pathologist. In brief, the supervision of speech-language pathology programs exists at all public school levels, and services are provided at various school sites, both small and non small, and at sites of varied compositions (e.g., K-8, K-12, combination schools). Further, knowledge of speech-language pathology, background, and professional training serve as variables which could influence attitudes toward school based speech-language programs (Bennett & Runyan, 1982; Clauson & Kopatic, 1975; Jones, 2006a; Phelps & Koenigsknecht, 1977) and were deemed essential in the current project. Therefore, an analysis of these variables, measuring professional level of participants, certification, and building size in the current study, is warranted.

Figure 1. Sample chart depicting relationship of variables impacting attitudes

Graphic redacted, paper copy available upon request to home institution.

Legislation and Critical Issues Impacting Supervision

The mandatory legislation of the Education for All Handicapped Children Act of 1975 (Public Law 94-142) provided for special services within a population, including persons with handicaps from pre-school aged through adults, aged 21 (Niedecker, 1980). Full implementation of the legislation took place in 1980 with subsequent revisions and reauthorizations. The Individuals with Disabilities Education Act (IDEA Public Law105-17) mandated that all children receive "a free and appropriate education" and recommended changes in school practices concerning special education. The legislation urged for an emphasis on the general education curriculum, and behavior assessments are contained within the execution of the IEP objectives. Further, this legislation promoted the combining of speech pathology practices within the classroom setting along with the routine resource pull-out model (McCrea & Basseur, 2003).

The IDEA legislation was further amended into Public Law 105-17, maintaining that qualified individuals should provide "services to children with disabilities." However, if these qualified individuals are not available for hire, then states could in "good-faith" recruit and hire personnel in "critical shortage disciplines for 3 years who are satisfactorily progressing toward the completion of coursework or a degree required for state certification standards" (ASHA, 1997, p. 239).

Speech-language pathology was deemed a critical shortage area in 1997 by the Florida Department of Education due to the difficulty school districts experienced in hiring qualified individuals to meet the needs of the students (FLDOE, 2003). The responses of 7,000 ASHA members on a 2007 Critical Issues Survey were reported by

ASHA's Legislative Council and identified as priority by members completing the survey. The issues identified included the following:

- The critical shortage of SLPs health care and education (65%)

- Reimbursement (54%)

- SLP assistants (38%)

- Marketing of the professions (35%)

- Evidence based practice (22%)

- Public relations (19%)

- Workload/caseload (195)

- Credentials (8%)

(Moore, 2007, p. 25)

It is apparent that the field of speech-language pathology has been impacted by the mandates in legislation which include increased accountability and recommendations for highly qualified personnel. The results of these mandates have impacted accountability in supervision and influenced the recruitment and retention of competent individuals to service school-aged students. The critical shortage of the speech-language pathologists supports the need for an understanding of school administrators' attitudes concerning the role and responsibilities of the SLP.

The impact of the early work of Jean Anderson in the area of supervision and speech language pathology has been documented (McCrea & Brasseur, 2003). The profession currently acknowledges supervision as a distinct area of practice with its own set knowledge and skills. Empirical studies concerning supervision in speech-language pathology during specific time periods are discussed in the following sections.

Empirical Studies-Period 1: Pre-1987

Early research within this period conducted by Lloyd and Ainsworth (1954) specifically sought to identify the attitudes of classroom teachers relative to speech services. Results from their study indicated that teachers displayed a lack of knowledge about the field of speech pathology and the work of a speech clinician. As a result, classroom teachers did not consistently refer students suspected of having a communication handicap to the speech clinician.

Another early study examining the nature of supervision in speech-language pathology and audiology was conducted by Jean Anderson (1972). A total of 211 participants holding titles as coordinators, supervisors, and directors were randomly selected from state department and ASHA directories. The study involved an in-depth exploration of the type and length of experience held by these participants. A descriptive account of information about their responsibilities, school districts, program context and enrollment, and number of speech clinicians supervised was obtained from all participants. Other information obtained had to do with problems encountered as supervisors of speech-language programs in schools.

This study was comprehensive and unique in that it focused on supervisors' characteristics and duties. The findings pointed out the diverse problems encountered by the supervisors and the need for universities and colleges to consider special training programs for speech pathology supervisors. In the years following Jean Anderson's (1972) noteworthy study investigating the status of SLP supervision in schools, researchers focused on major considerations, as well as professionals' perceptions and attitudes concerning SLP services in schools.

Additionally, other researchers within this period studied role perceptions of SLPs, attitudes of educators toward speech programs, the impact of communication disorders on academic performance, and variables relative to teacher understanding and knowledge of speech services (Bennet & Runyan, 1982; Clauson & Kopactic, 1975; Phelps & Koenigsknecht, 1977; Ruscello et al., 1980; Signoretti & Oratio, 1981; Tomes & Sanger, 1986). The populations studied during this period had widely varying teaching experiences. Participants included general education elementary level teachers, teachers in exceptional education, resource educators (art, music, physical education, and library), psychologists, and principals. Only a few studies sought to examine the input of school principals to speech and language services in schools (Phelps & Koenigsknecht, 1977; Tomes & Sanger, 1986).

Overall, the findings from this period noted favorable attitudes toward speech and language services in the public schools (Bennett & Runyan, 1982; Clauson & Kopatic, 1975; Phelps & Koenigsknecht, 1977; Ruscello et al., 1980; Tomes & Sanger, 1986). Educators generally perceived that clinicians communicated effectively, that a communication disorder directly impacted educational performance, and that therapy intervention greatly improved a child's educational performance. The unfavorable perceptions gleaned from studies within this period surrounded the participants' uncertainty concerning the effectiveness of the pull-out resource model, appropriateness of caseload size, and team member roles (Bennett & Runyan, 1982; Tomes & Sanger, 1986).

The most unique interpretation of research findings was presented in a study conducted by Signoretti and Oratio (1981) seeking to identify the primary components of

teachers' attitudes toward public school speech services and to investigate the relationship between teachers' demographic characteristics and their attitudes. A total of 147 K-12 teachers with diverse experience and education, employed within three school districts in the Wayne, New Jersey, area, were provided a 69-item questionnaire as a part of this study. Components which measured attitudes toward the speech clinician, the speech impaired child, and the speech and language program were analyzed. A canonical correlation analysis of participant responses generated no statistically significant correlation between the teachers' demographic characteristics and attitudes held. Specifically, teachers did not hold certain attitudes about speech services based on their existing demography. Therefore, Signetti and Oratio concluded that a set of demographic variables such as age, sex, experience, and education did not predict attitudes toward speech and language services.

These findings were striking and presented an alternative that could be considered beyond the focus of previous studies examining the relationship between demographic variables and attitudes toward speech pathology services in schools. As a result of their research, Signetti and Oratio (1981) suggested the need for studies to explore the association between personality or psychographic variables (e.g., sense of self-worth) and teachers' attitudes toward speech and language services. The researchers also suggested explorations of the quantity and quality of the teacher-SLP interaction as a link to attitude.

Signetti and Oratio's (1981) suggestions to explore teachers' personalities and the quality of teacher-SLP interactions were embedded in the theoretical framework outlined previously in this paper. It is through interaction and professional involvement that

meaning and understanding can be constructed and, subsequently, impact attitudes in the workplace and among professionals (Eggen & Kauchak, 2004).

Empirical Studies-Period 2: Post-1991

Previous literature (pre-1987) indicated interest in the status of supervision in speech pathology and attitudes toward speech pathology services in public schools. However, more recent research (post-1991) emphasized perceptions regarding the performance, training, and preparation of SLPs as well as the role of SLPs in areas such as voice, behavior management, teaching ESOL students, and language and literacy development (Ritzman, 2006; Sanger, Hux, & Griess, 1995; Shaughnessy & Sanger, 2005).

Overall research findings within this period revealed that educators had favorable attitudes toward the performance of school-based SLPs. These findings were consistent with the early study of Tomes and Sanger in 1986 (Sanger et al., 1995). In Ritzman's study (2006), the principals who were surveyed indicated that speech pathology intervention positively impacted students socially, academically, and behaviorally. The participants in Shaugnessy and Sanger's (2005) study indicated that SLP intervention services were delivered in an effective manner to communication impaired students.

Among the research findings of this period were common themes in areas of role perceptions and the need for collaboration. Shaughnessy and Sanger (2005) summarized that teacher respondents were aware of the role of SLPs in language development and welcomed the need to share this role with the purpose of assisting in the language development of communicatively impaired students. The results from Ritzman's (2006) study similarly noted that principals acknowledged the important role that SLPs had on

the multidisciplinary team and in program planning that would assist in educational performance of the communicatively impaired student. Findings from studies conducted by Shaughnessy and Sanger (2005) and Sanger et al. (1995) revealed that teacher participants produced favorable responses concerning the collaborative role of SLPs and possessed an awareness of their own role in referring students suspected of having communication difficulties.

Since the 1990s, there has been a growing interest in supervision of speech-language pathology as a result of such factors as "the expanded scope of practice," "personnel shortages," and a "sustained influx of new professionals" (O'Connor, 2008, pp. 14-15). Recent publications such as a technical report from ASHA (2008b, ¶3) and ASHA's position statement (2008a) underscored the organization's initial recognition of supervision as a "distinct area of practice" (¶3). These documents emphasized the association's focus on the supervisory process as collaborative in nature, involving "a variety of activities and behaviors specific to the needs, competencies, and expectations of the supervisor and supervisee, and the requirements of the practice setting" (ASHA, 2008a, ¶3).

Citing Jean Anderson's comprehensive definition of supervision, the ASHA (2008a) report defined supervision as:

> A process that consists of a variety of patterns of behavior, the appropriateness of which depends on the needs, competencies, expectations and philosophies of the supervisor and supervisee and the specifics of the situation (tasks, client, setting and other variables). The goals of the supervisory process are the professional

growth and development of the supervisee and the supervisor, which it is assumed

will result ultimately in optimal service to clients. (p. 12)

Comparative to the collaborative emphasis of supervision cited by ASHA (2008a,

2008b) is the report on the skills approach to leadership, which was drawn from the work

of Katz : "The skills model frames leadership in five components, centering around three

main competencies: "problem-solving skills, social judgment skills, and knowledge."

This three-skills approach, originally offered by Katz, provides a framework for

"understanding the nature of effective leadership" and implies that skills are dependent

upon the operation of leaders within the organizational structure. For instance, a middle

level manager such as a principal requires "technical, human, and conceptual skills"

(Northouse, 2004, p. 49).

It is the emphasis placed on leadership by ASHA (2008a, 2008b), Northouse

(2004), and others that underlies the present research investigating administrators'

attitudes toward speech and language services. There are two major time periods

represented in the literature reviewed for this study: pre-1987, but particularly from 1972

to 1986, and post-1991, primarily 1992 to 2006. Most of the articles were published in

the *Language, Speech, and Hearing Services in Schools* journal, which has published the

majority of the current and past research studies in the profession concerning school-

based speech-language practice and issues.

The post positivist and humanistic era of history involves the segment of time

from the 1960s and beyond. This transformational era emphasized the setting of

organizational goals and the empowerment of subordinates to resolve conflict and

participate in shared decision making. The subsequent section will discuss the nature of organizations and the location of speech-language programs within school organizations.

Organizational Management: Centralized and Site-Based

The study and practice of organizational leadership and management has evolved dramatically in the last century. The information age has brought about changes in the nature of organizations. With the growth and expansion of larger organizations, the division of labor becomes increasingly more complex. As organizations expand, a hierarchy of authority for the standardization, coordination, and supervision of labor is created. School districts, universities, business firms, and social agencies may be described as professional bureaucracies with structures consisting of both centralizing and decentralization elements. However, the structure of these professional bureaucracies may also be both stable and complex. The five basic parts of an organization include, the "strategic apex, techno structure, support staff, middle line" and "operating core" (Mintzberg, 2001, p.223).

In a professional bureaucracy such as Duval County Public Schools, the operating core would involve personnel who carry out the basic production of the district. The basic production would entail the instructional personnel (e.g., teachers, speech-language pathologists). The "techno structure" personnel would involve the analysis and standardization of the work of others (e.g., technology, consultants, and analysts). Often the responsibilities and duties of the support staff are unrecognized; however, their function is a major segment of any large organization. At the very top of the organization, the administrative segment along with personal staff represents the strategic apex. Middle line personnel are located below strategic apex personnel in the chain of

command. The apex of the Duval County Public Schools (DCPS), for example, would involve the superintendent and the leadership team of employees. The middle line personnel would encompass supervisors and school-based administrators. Figure 2 illustrates how the apex of a large organization such as DCPS would involve strategic leaders. Within the apex of leaders, the director of exceptional student education and supervisor of related services serve as the vertical level managers for speech-language pathologists. In some districts, speech-language pathologists are supervised by district level personnel. In contrast, larger school districts share the performance appraisal and evaluation of SLPs with school based administrators.

Figure 2. Leadership Organizational Chart

- - - - - - - - - - - - - - - - Denotes Operational Reporting
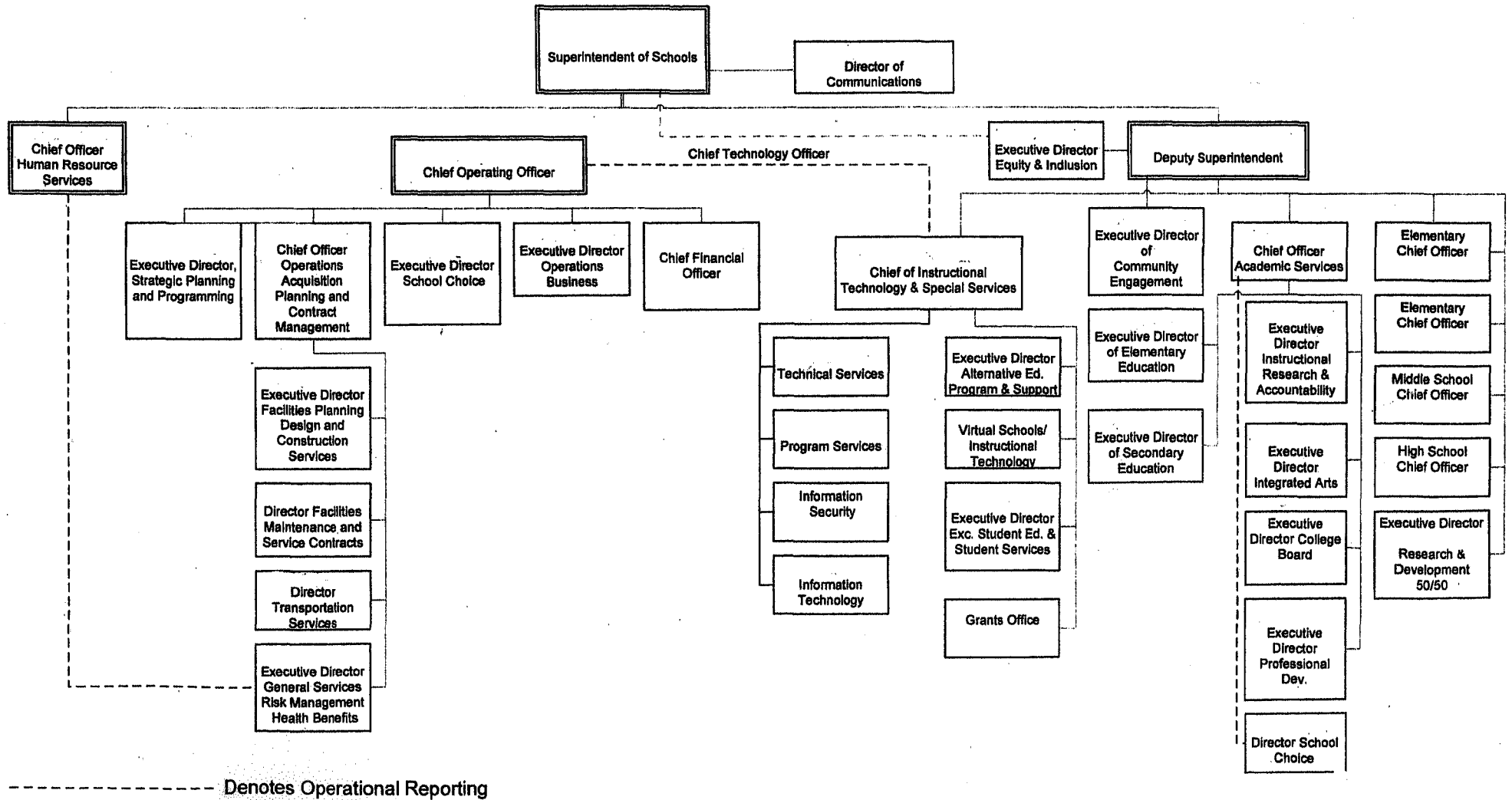
Source: Duval County Public Schools

The need for quality supervision of students and inexperienced speech-language pathologists has been justified in the literature (Anderson, 1972; Fisher, 1985). However, this need for supervision is vital in the public school settings where individuals are often isolated from other members of the profession. Fisher (1985, p.54) notes that a speech-language pathology supervisor should be both an "advocate for students with communication problems" and a leader to "develop and implement programs" for students that would insure quality services and one who could adequately "evaluate programs and personnel."

Speech-language pathologists are often grouped, within a school district's organizational structure, under the area of exceptional education. This is a logical placement within a district's structure, given the population of students served. SLPs conducting itinerant therapy programs at public school sites are considered valid staff members and are often responsible to building administrators. Within many school districts, speech-language pathology is categorized under the organization's subgroup of special education with other disciplines that serve a population of students having special educational needs. Figure 3 is an example of how speech-language pathology services are categorized within a large public school organization.

Figure 3. Exceptional Education/Student Organizational Chart

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                                          ┌─────────────────────┐
                                          │  Executive Director │
                                          └─────────────────────┘
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| EE/SS Director | Related Services Supervisor | Coordinator Fiscal Management | EE/SS Grant Operations | School Psychology Services Supervisor | EE/SS K-5 Northeast Support Team Administrator | EE/SS K-5 South Support Team Administrator | EE/SS K-5 Northeast Support Team Administrator | EE/SS Middle School Support Team Administrator | EE/SS High School Team Administrator | Secretary IV | Clerk Typist |

Account Technician   Account Technician

PTs   OTs   SLPs

School Based Administrators

SLP Representative   SLP Representative

Source: Duval County Public Schools

Because the evaluation of programs and personnel in speech-language pathology is an essential component for improving the competency of services, the nature and type of supervision is of equal importance. Because school districts vary in size, it is often difficult to achieve a ratio of one supervisor per "ten to twelve speech-language pathologists" (Fisher, 1985, p.56).

Larger urban school districts experience great challenges within their organization with one supervisor responsible for a group of 100 or more speech-language pathologists (Van Hattum, 1985a). Supervision in speech-language pathology varies in each public school organization. In some districts, the SLP works "under the supervision of a director of special service or special education." In other school systems, the individual "may be supervised by the director of pupil personnel services" (Van Hattum, 1985b, p.70). Close collaboration with special education and other administrators will assist in the adequate supervision of services in every school (Van Hattum, 1985a).

When insufficiencies in supervision of the speech-language program exist, other alternatives exist to aid in the massive challenge of supervision. Many states will utilize the intermediate agency ("county office") by hiring county speech-language coordinators to undertake responsibilities such as program planning, consultation, in-servicing, and program evaluation of state policies and standards. Additionally, the school administrators hold a crucial role in their direct supervision of SLPs. As a representative of the school, the speech language pathologist's role as spokesperson and liaison to the community is able to share information concerning the school's programs and activities. Therein lies the importance of collaboration between the school administrator and the

SLP each having a need to value and "support one another's roles and functions" (Van Hattum, 1985b, p. 74)

Summary

Chapter two has offered a conceptual framework for the study, emphasized legislation impacting supervision in the profession and presented an example of organizational management of speech-language pathologists.

In examining the landscape of the related literature within the last 40 years, only a few studies have included input on school principals' attitudes toward speech-language pathology services in schools (Phelps & Koenigsknecht, 1977; Ritzman, 2006; Tomes & Sanger, 1986). There exists little information in the literature that specifically explores perceptions held by supervisory personnel who are responsible for assessing the performance of SLPs in the school setting. A recent article by Lisa Cabiale O'Connor published in the *ASHA Leader* (2008), highlighted factors that have inspired interest in supervision since the 1990s. These factors included (a) the expanding scope of the practice, which has generated a greater need to understand and apply research in the discipline; (b) the critical shortage of qualified SLPs; and (c) the need to support the retention and recruitment of future professionals.

Because of the current and anticipated critical shortage of SLPs in the field and the vital need to retain and recruit qualified SLPs in the public school setting (Edgar & Rosa-Lugo, 2007), this study exploring attitudes of K-12 school administrators toward speech and language services in public schools will add to the body of literature in the profession (D. D. Sanger, personal communication, October 18, 2007; R. A. Koenigsknecht, personal communication, November 7, 2007).

CHAPTER THREE

METHODOLOGY

Introduction

The purpose of this study was to examine the attitudes of K-12 school

administrators toward speech and language programs in public schools relative to

program quality, the role of the SLP, and the impact of services on student success.

Relationships between administrators' attitudes and their backgrounds, knowledge of

speech and language services, experiences, and preparation were explored, as were

administrators' attitudes in relation to additional certification areas utilized and attitudes

in relation to size of school at which they serve. The present study partially replicated a

study by Phelps and Koenigsknecht (1977) and uses a modified version of the instrument

they created, the *Scale of Educators' Attitudes toward Speech Pathology* (*SEASP*), with

their permission. While their study included speech clinicians, learning disability

specialists, principals, and classroom teachers for grades 1 through 3 and 4 through 6, the

present study focused on a diverse sample of administrators from three groups:

elementary, middle, and secondary schools.

Research Design

Administrators' attitudes about SLP services in public schools were explored

from a quantitative perspective using a survey to gather data on their attitudes as well as

their backgrounds, knowledge, experiences, and preparation. The survey was generated

through use of a web-based system. Upon obtaining approval from the University of

North Florida (UNF) Institutional Review Board, the researcher sought assistance from personnel at the UNF Center for Instruction and Research Technology to confirm that the generated informed consent, survey instrument, subsequent invitation notices and follow up letter of appreciation were properly entered on the web-based design program, *EFM Community*. Online responses to survey items enhanced confidentiality and improved efficiency in obtaining study results. All responses from the survey were recorded as group data and were electronically stored for an indefinite period of time at the UNF Center for Institutional Research and Technology.

Each participant received electronic-mail including the following items: (a) notice of informed consent providing information about the research and highlighting the invitation to enter the survey website, (b) the website link to the *SEASP* survey instrument, and, when applicable, (c) subsequent invitation notices to participants who were unresponsive to the invitation (see Appendices A and B). A section of the online survey contained a background information form, developed by the researcher, which made possible an examination of participants' demographic characteristics and expressed attitudes concerning speech-language programs (see Appendices C and D). Data obtained from the study did not enable identification of individual participants.

The generation of electronic-mail to the participants asking them to voluntarily participate in the study constituted the initiation of the study. Following a one-week time period, a subsequent invitation to enter the website and complete the *SEASP* survey instrument was forwarded by electronic mail to school administrators who had not completed the online assessment. During the study period it was expected that subsequent notices would have been generated following the proposed schedule of a five week

period (see Appendix B). Upon entering the second week of the project schedule, dissemination of subsequent letters was suspended as a result of correspondences received from school personnel in Miami-Dade, Lee, and Seminole counties requesting that application to conduct research in their perspective counties be submitted prior to activating the study in their counties. Consequently, the electronic mail addresses of participants in Miami-Dade, Lee, and Seminole counties were removed from the web based design program *EFM Community*. The study remained open and continued as initially proposed with school administrators from other counties voluntarily participating in the survey.

An amendment to the project was submitted to the UNF Institutional Review Board informing them of the circumstance and requesting dissemination of an "extended invitation," once approval from the specific school districts could be obtained (see Appendix E). Seminole county school district was omitted from the application process to conduct research due to the cumbersome nature of their procedure involving use of school administrators' personal home and electronic mail addresses as required channels to disseminate the survey.

Applications to conduct the study in Miami-Dade and Lee school districts were submitted concurrently with the amendment request to IRB. Notices of authorization to conduct the study were granted by research review committees representing the School District of Lee County and Miami-Dade County Public Schools (see Appendices F and G) and submitted to IRB as a part of the amendment review file. Approval to disseminate an "extended invitation" was granted by IRB on March 19, 2009, followed by an immediate re-entry of electronic mail addresses of school administrators in Miami-Dade

and Lee counties into the participant database of the *EFM Community* web based design program (see Appendix H). Extended invitation notices were generated to school administrators in Lee and Miami-Dade counties along with the distribution of final invitation notices and follow up letters to the remaining participants (see Appendices I and J). The actual project schedule involved a total time period of 12 weeks as opposed the proposed 5 weeks.

Participants

Prior to initiating the study, the investigator requested all electronic-mail addresses of K-12 public school administrators employed in the 67 school districts throughout Florida from the Education Information and Accountability Services at the Florida Department of Education. FLDOE personnel forwarded 2,263 electronic mail addresses available on the 2008-2009 Master School Identification (MSID) list to the investigator for the purpose of conducting the study. In order to prepare for the solicitation of study participants, the principal investigator removed incomplete electronic-mail addresses from the file along with the electronic-mail addresses of administrators in Duval County School district and the Florida School for the Deaf and Blind. Given the nature of professional services provided by audiologists and speech-language pathologists and their likelihood of connection to the principal investigator, the electronic mail addresses of public school administrators in these two counties were not included on the list of participants solicited and recruited for the study.

After the distribution of the study on the web-surveyor, *EFM Community*, and subsequently receiving procedural information, cumbersome in nature, from Seminole county personnel regarding conducting research, the principal investigator also selected

to exclude the electronic mail addresses of public school administrators within this district.

A total number of 1,940 electronic mail addresses were used for solicitation and disseminated in the web-surveyor. Among the total number of solicited participants, the investigator received 248 responses to the survey in the raw data base. Responses provided by 201 school administrators from the raw data base completing the entire survey were analyzed for the purpose of this research.

Participation in this study was voluntary. Participants experienced minimal ethical risks in agreeing to the study. The principal investigator offered no monetary or other compensation awards to individuals involved in the study. Any decision made by an individual regarding whether or not to participate did not result in any penalty or loss of benefits, nor did it negatively impact his/her position as a school official. Participants were provided with a notice of informed consent concerning the type of study, assurance of fair treatment, and the freedom not to participate.

Instrumentation

Phelps and Koenigsknecht (1977) assembled a preliminary version of the instrument, the *Scale of Educators' Attitudes toward Speech Pathology* (*SEASP*), by obtaining written evaluative statements from 20 public school speech and language pathologists, representing a predominately white middle class northern Illinois school district. Ten additional subjects for the written evaluative statements were obtained from faculty and students at an Illinois area communicative science training program.

These initial groups of subjects were asked to list "five positive reactions to public school speech and language" programs and "five negative criticisms of public

school speech and language" programs. As a result of the written evaluative statements, the researchers prepared a total of 75 items (i.e., 37 negative and 38 positive statements) consisting of attitudes ranging from highly favorable to highly unfavorable (Phelps & Koenigsknecht, 1977, p. 35).

Subsequently, a 10-item criteria list for the 75-item preliminary version of the survey was provided to each subject. The researchers asked each subject to indicate responses of *strongly agree, agree, undecided, disagree,* and s*trongly disagree* to the 75 statements. Phelps and Koenigsknecht (1977, p. 35) then scored the preliminary instrument by assigning "numerical values of 5, 4, 3, 2, and 1 respectively for positively worded items" and reversing the scoring for negatively worded statements.

The summative score for each subject consisted of the "total numerical value of the individual item." This particular method used in scoring the instrument is similar to the Likert method (Likert, 1932, as cited in Phelps & Koenigsknecht, 1997, p.35). To assist in the final development of the 34-item version of the SEASP (containing 17 positive and 17 negative statements), the researchers compared scores from the initial group (Group I) of 30 speech and language subjects with a randomly selected group of 30 speech and language pathologists. The second group (Group II) of subjects was representative of small, medium, and large elementary school districts throughout northern Illinois. Score results from both groups found that the mean (M = 132.6, Group I, and M=135.8, Group II), standard deviation (SD=14.1, Group I, and SD=14.3, Group II), *t* value for comparison of means (-0.86, Group I and II), and Kuder-Richardson reliability for total items (0.92, Group I and II) indicated satisfactory reliability and utility of data obtained from the instrument (Phelps & Koenigsknecht, 1977).

Given the nature of the sample and the current issues existing in the speech-language pathology profession, this study differs from the initial research conducted by Phelps and Koenigsknecht. The current study provided an analysis of internal consistency and reliability for the sample data and analyses focusing on relationships between school size, grade levels, additional certifications, and school administrators' attitudes regarding speech-language programs relative to this decade.

While Phelps and Koenigsknecht (1977) obtained results from a sample that included various education specialists such as classroom teachers, specialists of learning disabilities, and a few principals in public elementary school settings, the current study focused on a large number of administrators drawn from all public school levels: elementary, middle, and secondary, within the state of Florida. In place of the words used in the original instrument referring specifically to the elementary school setting and more diverse population studied, such as *child, elementary*, and *inventory*, the present study will use words such as *student, survey*, and *public school* to more accurately reflect the setting and participants.

Permission to use the instrument was obtained from the developers of the *Scale of Educators' Attitudes toward Speech Pathology* (*SEASP*) (see Appendix K).

Data Collection and Analysis

The researcher developed a form to solicit background information from participants in areas such as grade level, school size, experience, delivery of program services, and nature of supervision (see Appendix C). The form was conjoined to the *SEASP* which allowed for ease of response for participants and comparison of their responses according to their demographics.

All the submitted surveys and background information were gathered electronically using a web-based computer program within a 12-week time period. The collected data were stored at the University Center for Instruction and Research Technology and can be accessed for an indefinite period via the UNF website.

The assessment of K-12 school administrators' reactions to items on the *Scale of Educators' Attitudes toward Speech Pathology* (*SEASP*) was analyzed using descriptive statistics and one way and two-way analysis of variance. The study duplicated the measurements used by previous researchers examining the mean scores, standard deviations, and "between group" and "within group" differences for each instrument item related to the grade level of the schools at which the participants work (Phelps & Koenigsknecht, 1977; Sanger, Hux, & Griess, 1995). Lubke, Dolan, Kelderman, & Mellenbergh (2003) provided meaning to the term, "within group" differences as

The variance of an item or subscale score within a group indicates

the individual differences within the group. Individual differences

with respect to multiple observed variables may be summarized in

a within-group variance–covariance (or correlation) matrix (p.544, ¶1).

These researchers further purport that "between group" differences are measured by "comparing the groups with respect to the means of the observed scores or with respect to the means of the factors underlying the observed scores" (p. 544, ¶1).

Specifically, the study conducted by Sanger et al. (1995) examined opinions about the role and performance of speech language pathologists in public schools. The study resulted in responses from 628 subjects representing primary and intermediate grade level teachers, special educators, principals, and school psychologists. Results from the study

yielded a profile outlining the responses of each participant group to survey items assessing their views about public school speech-language pathologists relative to their (a) professional role, (b) academic preparation, (c) skills as a collaborator and (d) overall effectiveness of services. The general findings from the study were consistent with the findings reported by Tomes and Sanger (1986) indicating favorable attitudes overall toward speech-language pathology services.

In the current study, results will report school administrators' mean scores for each response item on the *SEASP*. Results from the original study (Phelps & Koenigsknecht, 1977) were analyzed using a univariate analysis of variance, a Newman-Keuls multiple range test, and Bartlett-Box F homogeneity of variance to measure the responses to the SEASP. Similarly, the current study duplicated these measures, defined as follows.

Univariate analysis of variance is a technique "for analyzing group differences" (Hair, Black, Babin, Anderson, & Tatham, 2006, p. 388). The between-group analysis involved an analysis of group differences between administrator levels (elementary, middle, secondary). The current study presented one way and two-way analysis of variance for differences in attitudes among professional levels, building size, and additional certifications indicated by school administrators.

In the original study, a post hoc method, the Newman-Keuls test was used to identify "which comparisons among groups have significant differences" (Hair et al., 2006, p. 424). This test can be used to demonstrate whether statistically significant differences in attitudes exist between the different groups of administrators. In the current study, post hoc measures were not warranted.

The analysis of all data collected from this study was performed using SPSS, version 17.0, a computer program designed for statistical analysis in the social sciences.

Summary

The purpose of this study was to investigate the attitudes of K-12 school-based administrators toward speech-language programs in public schools relative to program quality, the role of the speech-language pathologist, and the impact of services on student success. The study was conducted from a quantitative perspective, using a web-based design program, *EFM Community*. The population for the study consisted of elementary, middle, and secondary school based administrators in 66 school districts throughout Florida, whose voluntary participation was solicited via online letter of invitation. Administrators were given an assurance of fair treatment concerning their participation in the study.

A survey instrument, the *Scale of Educators' Attitudes toward Speech Pathology (SEASP,* Phelps & Koenigsknecht, 1977) was uploaded to the web surveyor and disseminated to gather data for this study. This complete instrument as presented to the participants consists of a 10-item demographic section and a 34-item questionnaire. The demographic portion of the survey solicited responses regarding professional setting, additional certification, years employed, building size, and familiarity with communication services offered. The questionnaire portion of the survey consists of 34 positive and negative statements about speech and language programs in schools. Participants were asked to provide their reactions along a favorable/unfavorable continuum.

The results obtained from this study duplicated measurements used by previous researchers, Phelps & Koenigsknecht (1977). Specifically, descriptive statistics and univariate analysis were employed to interpret data and to summarize the attitudes of educators, principals, and interdisciplinary personnel toward speech-language pathology programs in schools. Similarly, correlations examined in the current study aligned with the research design of these authors. In a personal conversation with R.A. Koenigsknecht (telephone conversation, October, 2007), he expressed an interest in the outcome of this project in light of the composition of school administrators within the sample population.

Further, the current study provides correlations among participant groups relative to building size, professional level, and opinions regarding program quality, the role of the speech-language pathologist and the impact of services on student success. The analysis of all data collected from the current study was performed on SPSS, Version 17.0, and a computer program for statistical analysis.

Chapter Four presents a discussion of how the data were framed and how the schedule was implemented for this project. Descriptive and inferential statistics were used to examine school administrators' attitudes toward speech pathology programs relative to program quality, role of the speech-language pathologists, and the impact of student success.

Chapter Five contains a summary of the findings and recommendations for improvement of practice and future research.

CHAPTER FOUR

ANALYSIS OF THE DATA

Given the critical role of K-12 school administrators in supervising speech-language programs in public schools, it is essential to understand their perception of the speech pathologists who serve communicatively impaired populations. School administrators influence budget implementation and policy making, which consequently influences the quality of programs and delivery of services to students. The purpose of this study was to investigate the attitudes of K-12 school administrators toward speech-language pathologists relative to program quality, the role of the speech-language pathologist, and the impact of services on student success.

Data Framing and Project Schedule

Permission was obtained to implement the study on January 19, 2009, from the University of North Florida (UNF) Institutional Review Board (IRB #08-201). A master list containing 2,263 electronic mail addresses was obtained from personnel in the Education Information and Accountability Services, Florida Department of Education in Tallahassee.

Upon review of the master list, a total of 1,940 participants' electronic mail addresses were extracted from the master list as a result of improper formats and undeliverable statuses of some addresses. Consequently, the addresses of the 1,940 school administrators were uploaded to the *EFM Community* web surveyor for distribution. Beginning February 3, 2009, online surveys containing a 10-item background information section and a 34-item Likert-type questionnaire were

disseminated to school administrators within the 63 school districts throughout the state

of the Florida. Soon after the dissemination of the surveys, personnel representing

Miami-Dade, Lee, and Seminole county school districts requested application submission

to their research review committees be made to conduct the study. The procedure for

gaining access to the school administrators in Seminole county involved seeking, through

use of government mailing, the non-public [and personal] electronic-mail addresses of the

school administrators employed in the district. Because of this cumbersome procedure

required in Seminole County, the county was removed from the study. Duval County

Public Schools and the Florida School for the Deaf and Blind were not included in the

study due to anticipated bias.

An amendment request to extend the project schedule beyond the proposed 5-

week period was submitted to the UNF Institutional Review Board and resulted in an

approval on March 19, 2009 (#09-015). A copy of the amendment request is included in

Appendix D. Copies of approval letters from the Office of Program Evaluation, Miami-

Dade Public Schools (MDPS), and the School District of Lee County are also found in

Appendices B and C.

Upon receipt of all approval letters, the online survey continued with the

dissemination of subsequent invitation (Appendix B), follow-up, and thank you letters

(Appendix L) being forwarded to study participants. The online survey closed on April

28, 2009, with a total of 248 respondents in the raw data base.

Analysis of Background Section

From the 248 respondents, 47 participants were removed due to their submission

of incomplete surveys. The information provided by the remaining 201 administrator

participants in the remaining 64 Florida school districts was used in the analysis of the raw data. The analysis of the following tables and graphs directly corresponds to the background section of the survey, items 1 through 10.

The first item of the survey requested information concerning the professional level of the 201 participants involved in the study. Table 1 shows that 55.2% ($n = 111$) of those responding to the survey were elementary school administrators, 11.9% ($n = 24$) were middle school administrators, and 12.9% ($n = 26$) were secondary school administrators. Forty respondents (19.9%) identified their professional level as *other*. Within the data file, the response *elementary* was chosen by 111 people and was coded as the number *1*; the response *middle* was coded as the number *2*; the response *secondary* was coded as the number *3*, and the response *other* was coded as the number *4*.

Table 1

Number of Participants by Professional Level

Professional Level	Frequency	Percentage
Elementary	111	55.2
Middle	24	11.9
Secondary	26	12.9
Other	40	19.9
Total	201	100.0

Question 1 of the background information contained an inquiry exploring the professional setting of the participant. The question contained a response selection of *other* as an alternative to the provided elementary, middle, or secondary selections. Once the *other* response was chosen by a participant, inquiry for a nominal response would be generated by the web surveyor. Several of the *other* responses provided in

question 1 of the background section, in order of most frequent to less frequent, included the following responses (1) special education, (2) technical/adult/post secondary, (3) K-8 combination, (4) district level, and (5) early childhood.

Table 2 presents the frequency and percentage of participants supervising speech and language pathologist. The majority of the respondents (64.2%, $n = 129$) indicated that they supervised the speech-language pathologist at their school site. Twenty-five respondents (12.4%) did not specify personnel conducting speech-language supervision, while 34 respondents (16.9%) indicated that supervision was conducted by district personnel. Thirteen respondents (6.5%) revealed uncertainty concerning personnel responsible for supervision. The response of *yes* was chosen by 129 participants and was coded in the data file with the number *1*. Sequentially, the numbers *2* through *4* were coded in the data file and correspond to responses indicated by the participants as negative or indecisive with regards to the supervision of speech and language pathologists at the building site.

Table 2

Frequency of Participants Supervising SLPs

Response	Frequency	Percentage
Yes	129	64.2
No - did not specify personnel	25	12.4
Answered No - indicated supervision by district personnel	34	16.9
Answered No - indicated supervision by other personnel, unknown, not sure	13	6.5
Total	201	100.0

Question 2 of the background information section provided an additional option for the participant when the item selection of *no* was indicated. The web surveyor, *EFM Community* allowed for a nominal response for participants to indicate the job title of the person supervising the speech-language pathologist. On the extended portion of question 2, participants consistently indicated that district level exceptional student education directors and coordinators provided supervision for school based speech-language pathologists at their building sites. Responses also noted that supervision was being provided by administrators who oversee speech pathology, audiology, and other related services. This practice of certified field professionals supervising school based speech and language pathologists is an objective of the American Speech-Language-Hearing Association.

Table 3 shows the certification coverage in addition to the administrative coverage primarily used and held by study participants. The table reveals that 61 (30.3%) respondents held elementary education certification in addition to the leadership coverage while 31 respondents (15.4%) held certification in secondary education and 31(15.4%) held certification in exceptional student education. Twenty-six participants (12.9%) indicated utilizing certification in the area of elementary and secondary, grades K-12, in addition to their administrative coverage area. Fifteen participants (7.5%) indicated the professional service area grades PK-12 (e.g., media specialist) was most utilized in addition to their administrative coverage area while 13 participants (6.5%) indicated that the academic endorsement areas (e.g., American sign language) were most utilized in addition to their administrative coverage area. Further, middle level coverage ($n = 8$, 4%), degreed vocational coverage ($n = 3$, 1.5%), and foreign language areas ($n = 2$, 1%) were

most utilized by the participants of this study in addition to their administrative certification. Lastly, 5 participants (2.5%) noted possessing a Certificate of Clinical Competence in addition to their administrative coverage, while 6 participants (3%) indicated *none of the above* certifications were held in conjunction with the administrative coverage area.

The responses provided by the participants for question 3 of the background section were coded in the data file in numerical order of *1* through *12* and correspond to the manner in which the certification areas are listed in Table 3. None of the participants in the study provided a response to choice *11*, which indicated having a bachelor's or master's degree in speech-language pathology without certification; therefore the results are not included in Table 3.

Table 3

Additional Certification – Most Utilized

Response	Frequency	Percentage
Elementary level coverage	61	30.3
Middle level coverage	8	4.0
Secondary level coverage	31	15.4
Elementary and Secondary, grades K-12 (e.g., art, athletic coaching, dance, ESOL, physical education)	26	12.9
Academic Endorsements (e.g., American sign language, autism, gifted, orientation and mobility)	13	6.5
Degreed Vocational Coverage, Vocational Endorsements and/or Nondegreed Vocational coverage	3	1.5
Foreign Language Areas	2	1.0
Professional Service Areas, grades PK-12 (e.g., media specialist, guidance and counseling, psychologist)	15	7.5
Exceptional Student Education Areas, grades K-12 (e.g., ESE, hearing impaired, speech-language impaired, visually impaired)	31	15.4
Certificate of Clinical Competence (CCC) and/or Florida state licensure in speech-language pathology	5	2.5
None of the above	6	3.0
Total	201	100.0

Table 4 reports the respondents' years of employment in public education. One hundred seventy four respondents (86.6%) indicated having more than 15 years of public school employment, while 10% ($n = 20$) of the respondents indicated 11-15 years; 2.5% ($n = 5$) of the respondents indicated 6-10 years, and 1% ($n = 2$) of the respondents indicated 0-5 years. Responses included in this frequency table were coded in the data

file as number *1* to indicate 0-5 years of employment in public education. Sequentially,

numbers *2* through *4* were entered in the data file to indicate the corresponding

subsequent years listed in Table 4.

Table 4

Years Employed in Public Education

Response	Frequency	Percentage
0-5 years	2	1.0
6-10 years	5	2.5
11-15 years	20	10.0
More than 15 years	174	86.6
Total	201	100.0

The formal term "small school" has been defined as: (a) an elementary school

with a population of 500 or fewer students, (b) a middle school with a population of 700

or fewer students or (c) a high school with a population of 900 or fewer students

(FLDOE, 2000). A descriptive definition of a "non-small school" has not been formally

provided by the Florida Department of Education; it is defined in this research to include

public schools that do not meet the definition small.

Table 5 provides an overview of the building size of the employment site of the

respondents involved in the study. Sixty two percent (62%, $n = 125$) of the respondents

indicated managing building sites described as *non-small* while the remaining 37.8% ($n =$

76) of the respondents reported employment at *small* building sites. This frequency table

was coded in the data file as the number *1* for responses chosen as elementary schools in

the small building category, serving 500 students or less. Numbers *2* through *5* were also

coded in the data file and similarly correspond to responses representative of small

building sites which populations of various grade levels and combinations. The number

6 was coded in the data file for participants' responses indicating *none of the above*,

therefore, inferring employment at non-small building sites.

Table 5

Small and Non-Small Schools

Response	Frequency	Percentage
Elementary school (500 students or less)	43	21.4
Middle school (700 students or less)	11	5.5
High school (900 students or less)	5	2.5
School serving grades K-8 (700 students or less)	8	4.0
School serving grades K-12 (900 students or less)	9	4.5
None of the above	125	62.2
Total	201	100.0

Table 6 reports the number of days per week reported by school administrators

that speech-language pathology services were provided. The majority of the respondents

($n = 103$; 51.2%) indicated that services were provided five days per week or 1 to 2 days

per week ($n = 53$; 26.4%). Results also included 27 respondents who reported service

delivery of 3 to 4 days per week at 13.4% while 18 respondents (9%) reported service

delivery at less than 1 day per week. Responses included in this frequency table were

coded in the data file as the number *1* for less than 1 day. Sequentially, numbers *2*

through *4* were coded in the data file to indicate participants' responses to the number of

days per week that services were provided by the speech-language pathologist.

Table 6

Frequency of Weekly Speech-Language Services

Responses	Frequency	Percentage
Less than 1 day	18	9.0
1 to 2 days	53	26.4
3 to 4 days	27	13.4
5 days	103	51.2
Total	201	100.0

Speech-language pathologists represent one of several resource personnel providing specialized services within public schools. The goal of instructional supervision for a school administrator is to develop ways to engage the faculty toward a common goal that would enhance student learning. Question 7 was devised to explore the frequency of communication between the school administrator and the speech-language pathologist that would enhance such learning. Responses obtain from the survey indicated that 69% ($n = 140$) of school administrators listed in Table 7 reported communicating with speech pathologists approximately 1 to 10 times per month. Further, 14.9% of the respondents ($n = 30$) indicated having communicated with speech-language pathologists 10 to 20 times per month concerning professional or service delivery issues. Eleven percent ($n = 23$) of the school administrators indicated not ever communicating with speech-language pathologists during a 1 month period while 4% ($n = 8$) reported communicating with speech-language pathologists over 20 times per month.

The response choices for this item in the background section were coded in the data file as the number *1* for zero times during a month to indicate communication by the administrator participant with a speech-language pathologist concerning professional or

service delivery issues. Sequentially, numbers *2* through *4* were coded in the data file to indicate participants' reactions concerning the frequency of communication interactions estimated within a range from one to two times per month to more than 20 times per month.

Table 7

Communication Frequency with Speech-Language Pathologist

Monthly Estimates	Frequency	Percentage
0	23	11.4
1 to 10	140	69.7
10 to 20	30	14.9
more than 20	8	4.0
Total	201	100.0

Table 8 depicts the responses of school administrators involved in the study concerning the primary delivery model of services used by the speech-language pathologist employed at their building sites. The table illustrates that 164 administrators (81.6%) reported the use of the pull-out resource model as being utilized by their speech-language pathologist whereas 19 administrators (9.5%) noted the use of a collaborative/co-teaching model at their site. Only 5 respondents (2.5%) indicated the use of a consultative model of service by speech-language pathologists employed at their school site. This information is presented graphically in Figure 5.

Within the data file for Table 8, responses noted as a consultative model of delivery used by the speech-language pathologist were coded within their building sites were coded as the number *1*. Delivery models of pull-out/resource and co-

teaching/collaborative were coded as numbers *2* and *3*, while the category of *other* was scored as number *4*.

The web surveyor, *EFM Community* allowed for a narrative response in instances where the participant selected *other* to question 8. Thirteen participants (6.5%) indicated responses in this category and provided various combinations of responses to this item (e.g., pull-out and co-teach, pull-out and collaborative, and pull-out and consultative among 1 to 3 personnel).

Table 8

Delivery Models Used by the Speech-Language Pathologist

Model Type	Frequency	Percentage
Consultative model	5	2.5
Pull-out/resource model	164	81.6
Co-teaching/collaborative model in the regular or special education	19	9.5
Other	13	6.5
Total	201	100.0

Question 9 of the background section of the survey requested information regarding the participants' overall professional training that assists directly in their familiarity with speech-language pathology and educating exceptional students. The choices indicated by participants were coded as the number *1* for minimal professional training (e.g., some training), while numbers *2* and *3* were coded in the data base, respectively, for moderate and extensive professional training.

As shown in Table 9, 48.8% (*n* = 98) participants indicated possessing minimal overall professional training that increased their familiarity with speech-language

pathology and in the education of exceptional students. At the same time, 37.3% ($n = 75$)

and 13.9% ($n = 28$) participants involved in the study reported moderate and extensive

professional training, respectively.

Table 9

Overall Professional Training in Exceptional Education

Degree of Training	Frequency	Percentage
Minimal (e.g., " I possess some training in this area.")	98	48.8
Moderate (e.g., " I have worked closely with exceptional students.")	75	37.3
Extensive (e.g., "I possess an advanced degree and/or certification.")	28	13.9
Total	201	100.0

Question 10 requested that participants indicate whether their view of speech-

language pathology has been impacted by any professional development or experience. In

Table 10, responses from 118 participants (58.7%) indicated that there had not been any

experience or professional development which impacted their view of speech pathology.

In contrast, 83 participants (41.3%) revealed that their view of speech language pathology

was impacted by an experience or professional development. The responses were coded

in the data file as the number *1* for yes and the number *2* for no.

Table 10

Professional Experience Impacting Speech-Language Pathology

Experience Presence	Frequency	Percentage
Yes	83	41.3
No	118	58.7
Total	201	100.0

All responses to the 10-item demographic section of the survey provided insight to the nature of the population. Specifically, responses to items 1, 3, 5, and 9 involve a preliminary inquiry of the nature of participants relative to areas such as professional levels, additional certification – most utilized, employment setting, and professional preparation. Results obtained from these survey items are embedded in the investigation and outcome of the research questions that follow.

Analysis of Survey Section:

Scale of Educators' Attitudes toward Speech Pathology (SEASP)

The background section of the results chapter described statistical results involving the frequency and percentage of responses submitted by the 201 participants in this study. This section will include an analysis of the responses to the following research questions.

RQ1) What are the attitudes of K-12 school based administrators toward speech and language programs in public schools relative to program quality, the role of the speech-language pathologist, and the impact of services on student success?

RQ2)   Are the attitudes concerning speech and language programs in public schools different among elementary, middle, and secondary school-based administrators?

RQ3)   Are the attitudes concerning speech and language programs in public schools different among elementary, middle, and secondary school-based administrators employed at school sites having small and non-small populations?

RQ4)   Are the attitudes concerning speech and language programs in public schools different among elementary, middle, and secondary school based administrators having additional exceptional student education area certifications and/or qualifications as opposed to those who do not?

Work (cited in Van Hattum, 1985b) reported that the term "therapy program" involves examining not only the function of services delivered on an individual basis to a "single student" by a certified speech-language pathologist but also an examination of the "overall program, which encompasses services to all communication handicapped students" (p.287). Because of my diverse experience and training in the area of diagnosing and treating communication disorders in the Orange and Duval school districts, I proposed to further expand the examination of K-12 school administrators' attitudes concerning speech pathology programs into three distinct areas. The labeling and classification of grouped survey items were developed as a result of the working knowledge and experiences gained within these school districts. I developed major categories from the current job responsibilities and duties as a school-based speech-language pathologist in Duval County. Based on the semantics and vocabulary presented

in each statement, a decision was made as to the placement of the item in one of the three major categories of program quality, role of the speech-language pathologist, and the impact of services on student success as shown in Table 11.

In addition, the Scale *of Educators' Attitudes toward Speech Pathology* (*SEASP*) was modified to include current nomenclature such as the word *student* instead of *child*. Because survey items 3, 8, 9, 10, 12, 14, 18, 21, 22, 23, 26, 27, 29, 33, and 34 contained negative statements, reverse scoring was generated in the data file for analytical purposes.

Table 11

Grouped Survey Items

Categories	Survey items
Program Quality	4, 6, 7, 15, 19, 22, 23, 27, 28, 34 (Total = 10 items)
Role of the Speech-Language Pathologist	3, 5, 8, 10, 11, 12, 14, 16, 20, 21, 25, 29, 30, 31, 32, 33 (Total = 16 items)
Impact of Student Services	1, 2, 9, 13, 17, 18, 24, 26 (Total = 8 items)

Cronbach's alpha was used to assess the internal consistency reliability of scores on each group of items. In order to support internal consistency reliability, the alpha is expected to be positive and greater than .70 (Morgan, Leech, Gloeckner, & Barrett, 2007). The Cronbach's alpha for scores on each item grouping and on the full survey are presented in Table 12. All internal consistency reliability coefficients were above .70.

Table 12

Reliability for All Grouped Survey Items

Scale	Cronbach's alpha	Number of Items
Program Quality	.73	10
Role of the Speech Language Pathologist	.78	16
Impact of Student Success	.74	8
Scale of Educators' Attitudes toward Speech Pathology (SEASP) (Total Items)	.90	34

Findings of Research Question One

Research question one was stated as follows: What are the attitudes of K-12 school based administrators toward speech and language programs in public schools relative to program quality, the role of the speech-language pathologist, and the impact of services on student success?

In order to determine the relationship between the attitudes of K-12 school-based administrators toward speech and language programs in public schools to the three categories, the mean and standard deviation of scores obtained in each group were compared to the total group of participants. The three categories include program quality (PQ), role of the speech-language pathologist (Role of SLP), and the impact of services on student success (SS).

In analyzing the mean responses listed in Table 13, the numbers *1* (*strongly agree*), *2* (*agree*), *3* (*undecided or uncertain*), *4* (*disagree*) and *5* (*strongly disagree*) were used to obtain a numerical representation of the attitudes with a total computation for each item group. A total mean score of 2.32 for the entire *SEASP* is also reported.

Table 13 indicates that, in all categories of the *SEASP*, respondents tended to agree in all categories, but more specifically displayed a greater consensus of agreement in the category involving a speech-language pathologist's impact on student success. This pattern is revealed in the mean score of 2.18. Further, the consensus of agreement was noted in the area of program quality ($M = 2.31$) and the role of the speech-language pathologist ($M = 2.39$).

Table 13

Administrators' Attitudes Relative to Speech-Language Pathology Services

Scale	N	M	SD
Total Program Quality	201	23.17	4.81
Mean Program Quality	201	2.31	.48
Total Role of SLP	201	38.37	6.19
Mean Role of SLP	201	2.39	.38
Total Student Success	201	17.51	3.66
Mean Student Success	201	2.18	.45
Total *SEASP* All Items	201	79.06	13.53
Mean *SEASP* All Items	201	2.32	.39

Findings of Research Question Two

Research question two was stated as follows: Are the attitudes concerning speech and language programs in public schools different among elementary, middle, and secondary school-based administrators?

To evaluate the relationship between participants' professional levels and the three dependent variables of program quality (PQ), the role of the speech-language pathologist (Role of SLP), and the impact of student success (SS), a one-way analysis of variance (ANOVA) was conducted. For the purposes of this study, the independent variable of professional level is representative of one variable, consisting of four levels - elementary, middle, secondary, and other school-based administrators. Administrators in the other category included individuals employed in district, technical, exceptional student education, and combination K-8 or K-12 settings.

Table 14 represents the specific mean scores of attitudes toward speech-language pathology program quality (PQ) among the professional levels of study participants. The actual minimum and maximum mean scores for the respondents are also represented in Table 14.

Table 14

Professional Level and Program Quality – Descriptive Statistics

Professional Level	N	M	SD	Minimum	Maximum
Elementary	111	2.26	.44	1.30	3.80
Middle	24	2.44	.35	1.60	3.10
Secondary	26	2.42	.46	1.60	3.50
Other	40	2.31	.63	1.30	3.80
Total	201	2.31	.48	1.30	3.80

The ANOVA indicated in Table 15 reveals that there were no statistically significant differences in the attitudes toward program quality by professional level (F [3, 200] = 1.34, p = .24). Therefore, the null hypothesis, which asserted that the means are equal, was not rejected.

Table 15

Professional Level and Program Quality – One Way ANOVA

Source	Sum of Squares	df	MS	F	p
Between Groups	.95	3	.31	1.38	.24
Within Groups	45.39	197	.23		
Total	46.34	200			

Table 16 contains the descriptive statistics for attitudes toward the role of the speech-language pathologist by professional level. The actual minimum and maximum mean scores for the respondents are indicated in the last columns of the table.

Table 16

Professional Level and Role of the Speech-Language Pathologist – Descriptive Statistics

Professional Level	N	M	SD	Minimum	Maximum
Elementary	111	2.36	.37	1.63	3.63
Middle	24	2.48	.27	2.00	3.00
Secondary	26	2.50	.42	1.75	3.13
Other	40	2.37	.43	1.63	3.63
Total	201	2.39	.38	1.63	3.63

An ANOVA was used to examine mean differences in attitudes toward the role of the speech-language pathologist by professional level as reported in Table 17. The results of the ANOVA were not statistically significant (F [3, 200] = 1.42, p = .23). The results of the ANOVA indicated that the null hypothesis, which stated that the mean scores for attitudes toward the role of the speech-language pathologist success by professional level are equal, was not rejected.

Table 17

Professional Level and Role of the Speech-Language Pathologist – One Way ANOVA

Source	Sum of Squares	df	MS	F	p
Between Groups	.63	3	.21	1.42	.23
Within Groups	29.33	197	.14		
Total	29.97	200			

Table 18 shows the mean scores of administrators' attitudes relative to the impact of speech pathology services on student success. Actual minimum and maximum mean scores for the respondents are also contained in Table 18.

Table 18

Professional Level and Student Success – Descriptive Statistics

Professional Level	N	M	SD	Minimum	Maximum
Elementary	111	2.13	.43	1.13	3.38
Middle	24	2.34	.41	1.63	3.25
Secondary	26	2.30	.47	1.50	3.50
Other	40	2.17	.50	1.00	3.00
Total	201	2.18	.45	1.00	3.50

The results of the ANOVA as reported in Table 19 revealed that there were no statistically significant differences in the beliefs about speech pathology's role in student success by professional level (F [3, 200] = 2.07, p = .10). The results of the ANOVA indicate that the null hypothesis, that the means in beliefs about speech pathology's role in student success by professional level are equal, cannot be rejected.

Table 19

Professional Level and Student Success – One Way ANOVA

Source	Sum of Squares	df	MS	F	p
Between Groups	1.28	3	.42	2.07	.10
Within Groups	40.77	197	.20		
Total	42.06	200			

Findings of Research Question Three

Research question three was stated as follows: Are the attitudes concerning speech and language programs in public schools different among elementary, middle, and secondary school-based administrators employed at school sites having small and non-small populations? First, this question was addressed by developing descriptive data from question 5 of the background information section of the survey which requested that K-12 school administrators indicate the population of students in their buildings. A copy of the Background Information section of the *Scale of Educators' Attitudes toward Speech Pathology (SEASP)*, delineating choices which describe populations of students in varying building sites, is found in Appendix O. Further, it is important to note that the Florida Department of Education provides a formal definition to describe small schools, but does not formally offer a corresponding definition to describe schools that are not small. In brief, a small school involves a student population of fewer than 500 students at the elementary level, fewer than 700 students at the middle school level, and fewer than 800 students at the high school level. Also, a school of 700 students or less serving grades kindergarten through 8 and a school of 900 students of less serving grades

kindergarten through 12 may be categorized under the heading of small school

requirement (FLDOE, 2000).

Within the data file, choices *1* through *5* that were indicated by school

administrators under question 5 of the background section were assigned number *1* for

small population of students; while choice six stating *none of the above* was assigned

number *2* for non small population of students. Table 20 reveals that the many of the

participants in the study were employed at school sites having a non small population of

students (*n*=125) as opposed to those participants reporting employment at school sites

having a small population of students (*n*=76).

Table 20

Mean Summary of Professional Levels Relative to Building Size

Professional Setting	Building Size	*M*	*SD*	*N*
Elementary	Small	2.28	.41	46
	Non small	2.27	.34	65
	Total	2.28	.37	111
Middle	Small	2.44	.32	10
	Non small	2.44	.27	14
	Total	2.44	.28	24
Secondary	Small	2.37	.19	6
	Non small	2.45	.47	20
	Total	2.43	.42	26
Other	Small	2.42	.47	14
	Non small	2.24	.48	26
	Total	2.30	.47	40
Total	Small	2.33	.39	76
	Non small	2.31	.39	125
	Total	2.32	.39	201

Next, this question was addressed with a two-way ANOVA. Green and Salkind (2005) reported that "with a two-way analysis of variance (two-way ANOVA), each participant must have scores on three variables: two factors and a dependent variable" (p.185). Elliot and Woodward (2006) provide an example of a two-way ANOVA as a measure which assesses the joint effect of two experimental variables or factors. The two-way ANOVA determines whether the "factors are important (significant) either separately (called main effects) or in combination (via an interaction)" (p.166). In this study, the two factors were (a) small and non-small populations and (b) elementary, middle, secondary and other school-based administrators; the dependent variable was participant attitudes toward speech-language pathology program.

The results of the univariate ANOVA are listed in Table 21, which shows the results of tests measuring between-subject effects. In this table, Q1 represents the professional level, while Q5 represents the building size, small and non small schools. The univariate effect for Q1 was not statistically significant, $F[3, 201] = 1.39, p>.05$. Similarly, the univariate effect for Q5 was not statistically significant, $F[1, 201] = .13, p> .05$. Similarly, the univariate interaction was also not statistically significant, $F[3, 201] = .53, p> .05$.

Therefore, there was no statistically significant difference in the attitudes concerning speech and language programs in public schools among all professional levels of school administrators employed at building sites having small and non-small populations. The adjusted R^2 of .001 indicated that less than 1% of variance in attitudes is accounted for by Q1 and Q5 (the independent variables) and the interaction.

Table 21

Two Way ANOVA – Professional Levels and Building Size

Source	df	MS	F	p
Q1 (professional level)	3	.22	1.39	.24
Q5 category (small and non small schools)	1	.02	.13	.71
Q1 * Q5 category	3	.08	.53	.66

Findings of Research Question Four

Research question four was stated as follows: Are the attitudes concerning speech and language programs in public schools different among elementary, middle, and secondary school-based administrators having additional exceptional student education area certifications and/or qualifications as opposed to those who do not? This question was first addressed by gathering descriptive data from question 3 of the background information section of the survey, "In addition to your administrative coverage certification area, what other qualifications and/or Florida certification have you most utilized?" A copy of the Background Information section of the *Scale of Educators' Attitudes toward Speech Pathology* (*SEASP*) outlining the detailed information listed for item three is contained in Appendix C.

To analyze the choices of the respondents, the data file was arranged as follows: (a) responses provided by K-12 school administrators, indicating choices of having additional certification in a non exceptional education coverage area were coded as number *2*, non ESE for choices 1 through 8 and (b) responses provided by K-12 school administrators, indicating choices of having additional certification in an exceptional student education coverage area was coded as *2*, have ESE for choices 9 through 11.

Table 22 indicates that 93 elementary school administrators primarily held and have utilized non ESE certification in addition to their administrative coverage area certification. In contrast, secondary level school administrators participating in the study reported additional certification coverage only within non ESE areas. A total of 159 school administrators reported having additional certification in a non ESE coverage area while 36 school administrators reported having ESE certification in addition to their administrative coverage area. The remaining six participants in the study indicated *none of the above* (choice 11) when responding to this background question. The results were not reported in the descriptive analysis contained in Table 22.

Table 22

Mean Summary Relative to Additional Certification and Professional Levels

Certification	Non ESE and have ESE certification	M	SD	N
Professional Setting				
Elementary	Non ESE	2.27	.38	93
	Have ESE	2.35	.37	15
	Total	2.28	.37	108
Middle	Non ESE	2.38	.27	20
	Have ESE	2.74	.16	4
	Total	2.44	.28	24
Secondary	Non ESE	2.44	.42	25
	Have ESE	-	-	-
	Total	2.44	.42	25
Other	Non ESE	2.41	.46	21
	Have ESE	2.22	.47	17
	Total	2.32	.47	38
Total	Non ESE	2.33	.39	159
	Have ESE	2.33	.43	36
	Total	2.33	.39	195

Next, this research question was addressed using a two-way analysis of variance (ANOVA). Two factors and a dependent variable were reported from the responses provided by the K-12 school administrators in the calculation of the analysis. The two factors were (a) non ESE certification and have ESE certification and (b) elementary, middle, secondary, and other school-based administrators. The dependent variable was participant attitudes toward speech –language pathology programs.

The results of the two-way analysis of variance (ANOVA) are listed in Table 23, which show the results of tests measuring between-subject effects. In this table, Q1 represents the professional level, while Q5 represents the additional certification, non ESE and have ESE. The univariate effect for Q1 was not statistically significant, $F(3,201) = 1.94, p>.05$. Similarly, the univariate for Q5 was not statistically significant, $F(1, 201) = .84, p> .05$. Similarly, the univariate interaction also was not significant yielding $F(2,201) = 2.84, p> .05$.

Therefore, there was no statistically significant difference in the attitudes toward speech and language programs in public schools among all professional level school administrators having exceptional student education certification as opposed to those who do not. The adjusted R^2 of .027 indicated that less than 2.7% of variance in attitudes is accounted for by Q1 and Q5 (the independent variables) and the interaction.

Table 23

Two-Way ANOVA for All Items of SEASP- Additional Certification

Source	df	MS	F	p
Q1 (professional level)	3	.30	1.94	.12
Q5 category (non ESE and have ESE)	1	.13	.84	.35
Q1 * Q5 category	2	.44	2.84	.06

Summary

Chapter Four presented a descriptive analysis of findings from the background questionnaire section of the survey and analyses of nominal responses of participants' response. Results obtained from the background section and the actual survey tool were analyzed through descriptive statistics and both one-way and two-way analysis of variance.

The study population consisted of 201 school based administrators within the state of Florida who voluntarily completed the survey in its entirety. Of this group, 111 (55%) of the participants indicated employment at the elementary level while 40 of participants (19%) revealed employment at *other* professional levels.

The majority of K-12 school administrators ($n = 125$) in the study population indicated employment in non-small schools while the remaining cumulative response of the sample reported ($n = 76$) employment at small schools. About one third of the sample (30%, $n = 61$) held elementary area certification in addition to the administrative coverage certification area. This outcome reflects the higher percentage of elementary level participants in this study (55.2%, $n = 111$, Table 1) and is also reflective of a service level in which many students are identified and treated for communication impairments. Thirty-one (15%) of the participants indicated having additional certification in areas such as exceptional student education, grades K-12.

The first research question was designed to address the attitudes toward speech and language programs in public schools relative to program quality, the role of the speech-language pathologist, and the impact of services on student success. This question is an essential one, given that it gives focus on the primary duties and responsibilities of

school based speech-language pathologists who in all probability receive supervision at the school level. Information obtained from the descriptive measures indicated that respondents' attitudes concerning speech-language pathology services impacting student success, program quality, and the role of the speech-language pathologist were similar.

The second research question was designed to assess whether attitudes concerning speech and language programs were different as expressed in scores obtained from elementary, middle, secondary, and other professional levels using a one-way analysis of variance. Findings revealed statistically equivalent mean scores and no statistical significance at the .05 level. Though the caseload of school based speech-language pathologists primarily includes school aged students at the elementary level, this finding reinforces a favorable working interaction with supervisors among all professional levels.

Research question three was designed to assess whether the attitudes concerning speech and language programs in public schools differed among elementary, middle, secondary, and other professional levels employed at small and non-small schools. As a result of conducting a two-way ANOVA, significant factors such as building size (small and non small population) and professional levels (elementary, middle, secondary, and other) were not significant, separately. Further, the interaction of these factors (building size and professional level) was also not statistically significant. Findings suggest that school administrators of varying professional levels employed at small or non small schools do not demonstrate attitudinal differences toward speech pathology programs.

The fourth research question was designed to assess the relationship between participants' professional levels and additional certification area levels and their attitudes concerning speech and language programs in public schools using a two-way ANOVA.

The main effects of professional level and additional certification area coverage (having ESE and non ESE) and the interaction of these factors were not statistically significant. In conclusion, the hypotheses stated in research questions two through four, asserting that the means are equal, were not rejected.

Chapter Five summarizes the overall study and provides discussions of the findings and limitations of the study. Conclusions and recommendations for improvement of practice and future research are reported.

CHAPTER FIVE

SUMMARY, RECOMMENDATIONS AND CONCLUSIONS

The primary goal of the study was to examine attitudes of K-12 school

administrators toward speech-language programs among 63 school districts in Florida.

An online web surveyor called *Enterprise Feedback Management (EFM) Community* was

used to disseminate a survey instrument to participants volunteering to respond to the

study. The survey instrument utilized in this study contained two sections. The first

section included background information containing 10 multiple choice items and the

second section of the study involved the *Scale of Educators' Attitudes toward Speech

Pathology (SEASP)* containing 34 items designed to solicit response on a five-point

continuum of favorable to unfavorable attitudes toward speech pathology. Responses

from 201 individuals completing the survey in its entirety were analyzed using statistical

analysis program called Statistical Package for Social Sciences (SPSS), Version 17.0.

Of concern in this study was whether the attitudes explored varied among

professional levels, among professional levels employed at small and non small schools,

and professionals holding certifications in addition to the administrative coverage area.

Attitudes among professional levels with regard to responsibilities and duties in areas of

program quality, role of the speech-language pathologist and the impact of services on

student success were of specific interest to the research. The demographic profile of the

participants was reviewed with emphasis placed on the areas of building size and

certification.

At the onset of this research, the investigator expected the school administrators participating in the study to hold less than favorable attitudes toward speech pathology services. Specifically, I anticipated the attitudes of school administrators at the elementary level to be more positive than the attitudes of administrators at the secondary school level. This outcome was expected given the outcome of previous studies examining attitudes of elementary school level educators (Lloyd & Ainsworth, 1954; Phelps & Koenigsknecht, 1977; Sanger et al., 1995; Shaughnessy & Sanger, 2005).

Findings of the current study revealed that middle school level administrators expressed a greater consensus of agreement than participants of other professional levels concerning their attitudes relative to the impact of speech-language pathology services toward student success. At the onset of the study, this outcome among this particular subgroup of participants was not anticipated. In contrast, such an outcome would have been more plausible from participants employed at the elementary professional level given the fact that communication disorders are primarily diagnosed and treated among at the elementary level. Another unexpected outcome of this study indicated that attitudes held by participants showed no statistically significant difference when compared by certification coverage areas, employed at small and non-small buildings, and professional levels.

Summary

Speech-language pathologists demonstrate a unique ability to integrate professional skills and competency in treating communicative deficits with the general goals of the setting and population served. Because school based speech-language pathologists are less likely to receive supervision by non-licensed personnel, school

administrators who may "understand their programs and roles" and may have the ability "to communicate this understanding with others" (Schetz & Billingsley, 1992, p. 155) will be resourceful in enhancing speech and language program development.

The research questions that guided this research were designed to produce findings that would allow researchers, speech-language pathology leaders, administrators, and program specialists gain an understanding of the relationship between speech-language pathologist and non-licensed supervising personnel. Specifically, the study emphasized the importance of administrative support of school-based speech pathologist and the impact of those relationships on the development of quality programs, student success, and professional roles of speech-language pathologists within public schools.

Given that 59% of speech-language pathologists are employed in educational facilities (ASHA, 2009d) and that communication disorders among school aged children are typically diagnosed and treated in population of pre-kindergarten through 5th grade, the large response rate of elementary school administrators participating in the sample represent this service trend.

The school administrators participating in the study expressed a stronger and more unified consensus of agreement regarding the impact of speech pathology programs on student success as compared to their responses relative to remaining attitudinal categories of program quality and the role of speech-language pathologist. Although supervision may often be implemented by personnel who do not hold speech-language pathology certification, this result is a favorable indication that out-of-field personnel conducting supervision of school-based speech pathologists hold, at best, attitudes that support curriculum and school improvement goals.

Analysis of the demographic section of the survey found that the majority of the

participants indicated responses that would support a favorable situation. For instance,

the majority of the participants (62%) were employed at non-small school sites, held

additional certification in the elementary (30%) and exceptional education coverage

areas, and reported employing SLPs primarily five (51%) and one to two (26%) days

per week.

This situation is favorable for school based speech-language pathologists who

supply services in diverse educational levels. Although employment settings and contexts

for the SLP may vary, the "nature of the services provided and educational requirements

necessary for clinical competence do not vary" (Language Speech Hearing Services in

Schools, 1970, p.31). Therefore the need for effective supervision within the public

school arena is paramount. The findings from the demographic section further support a

majority of administrator participants (81%, demographic question 8) having knowledge

of delivery models used and frequency of communication interactions with speech

language pathologist (70%; 1 to 10 times per month). These finding correspond with the

overall favorable attitudes and general consensus indicated by the respondents that

speech-language pathologists impact student success. Considering the types of

communication disorders occurring in specialized populations of students with autism,

cognitive, neurological, and/or social disorders, needing intervention on a frequent basis,

the expressed knowledge allows for the development and expansion of quality programs.

One surprising demographic finding was indicated in question 9 which revealed

nearly half (48%) of the respondents indicated possessing minimal training in exceptional

education or familiarity with speech-language pathology. This outcome reveals that

although administrators may not possess knowledge and training regarding the field, favorable attitudes prevail with regards to their level of confidence held in the services provided by speech-language pathology programs.

There were minimal differences in attitudes toward speech-language pathology programs in public schools among administrative personnel indicating employment at elementary, middle, and secondary levels and other personnel supervising speech-language pathology professionals. In addition, the outcome of research questions 2 through 4 suggests that school administrators of varying professional levels employed at varying building sizes and holding additional certification in diverse coverage areas do not demonstrate attitudinal differences toward speech pathology programs which are statistically significant. In brief, the results of the current study conclude that building size or certification history do not impact the general consensus of agreement among participants concerning speech pathology services in public schools. This outcome will be reassuring for school-based speech-language pathologists, who occasionally perceived administrative support as void, uncertain, or negative.

The favorable attitudes revealed from this study suggest an overall level of administrative support for speech pathology services. In conclusion, the findings from this research are consistent with other research examining the attitudes of educators and interdisciplinary team members toward speech-language pathology programs (Bennett & Runyan, 1982; Clauson & Kopatic, 1975; Ruscello, Lass, Fultz, & Hug, 1980; Sanger & Griess, 1995; Signoretti & Oratio, 1981; Tomes & Sanger, 1986).

Limitations of the Study

The limitations discussed in Chapter One described the sample group and the percentage of completed surveys provided from the 1940 distributed surveys. Initial raw data results contained responses from 248 participants. However, from that number, responses provided by 201 participants were used to address all of the research questions. Therefore, a low return rate of 10% was used in the analysis of this project. Further, the nature of the study involving the examination of attitudes and perceptions depends highly on the truthfulness and honesty of participants' reactions. Therefore, the results of this study should be considered with these limitations.

Given that the background section of the survey does not make inquiry to participants' gender or race, the inclusion of such information may be of benefit to future researchers in examining how these variable impact attitudes toward speech and language services.

Because this is a quantitative study, the findings are somewhat limited in specificity. For example, although results supported a greater consensus in administrators' attitudes toward speech and language services positively impacting student success, the results do not provide specific information concerning rationale for the reported attitudes. Further, when asked in the demographic section (item 2) to indicate the job title of person supervising the SLP, 13 participants (6.5%) indicated "supervision by other personnel, unknown" or "not sure." These responses are somewhat concerning and need to be considered given the importance of developing quality speech and language services in schools.

Recommendations for Improvement of Practice and Future Research

Based on the study results, the following recommendations to assist in the improvement of practice in the field of speech pathology can be made:

1) According to Flower (1984), the use of performance appraisal allows the profession to improve regulation of professional practices of its members. Because speech-language pathologists are evaluated by school administrators and other non-field personnel, use of a tool that specifically focuses on general responsibilities and professional competencies, job setting, and experience relative to the field of speech-language pathology could improve program quality within school districts. Field-related administrative support could enhance quality programs in public schools.

2) The development of training programs for speech-language pathology supervisors was suggested earlier by Anderson (1972). The findings of this study suggest that some consideration should be given developing leadership programs for speech-language pathologists at area and state universities and collaboration between school districts and universities should be included in such programs. Training at the school district would help school administrators and teachers better understand speech pathology, and that coursework at the college level would help teachers understand speech disorders and their effects on student learning.

3) In order to enhance the support of public school speech-language programs, a similar survey assessing attitudes of parents, teachers, and other educational personnel toward speech and language services should be conducted (Phelps &

Koenigsknecht, 1977). Such research could help to improve program quality and assist to increase awareness of the relationship between academic performance and communication disorders.

4) Given that the findings of this study reveal a general consensus of administrator participants regarding the positive impact of speech-language services on student success, school based speech-language pathologist would benefit from becoming involved with school and district programs and goals (e.g., response to intervention, leadership, and shared decision making teams.)

5) Information contained in the literature regarding the critical shortage in the field and the favorable attitudes reported by administrators who supervise speech-language pathologists would be useful in district goals developed to enhance retention and recruitment of qualified field personnel.

6) Future studies should expand on current literature concerning school based speech-language pathologists' perceptions of administrative support in educational settings.

7) Because the study design was limited to a univariate analysis of school administrators' attitudes toward speech-language pathology services, a multivariate analysis of important dependent variables could be explored in studies examining attitudes of educational leaders, parents, and/or teachers toward speech-language pathology programs.

Conclusion

The results of this study provide insight as to how K-12 school administrators perceive speech and language services in public schools. Specifically, the findings of this

study are important considering the recent emphasis on supervision in the profession (O'Connor, 2008) and the growing caseload and workload demands for speech and language services in schools. The responses indicate that administrators at all professional levels reveal an overall consensus that speech-language pathologists impact student success. Also, the findings suggest that administrators value and hold similar attitudes regarding program quality and professional role of speech-language pathologists.

The research findings add to the body of the knowledge in the profession and provide information to the area of supervision in speech and language pathology. Further, the results do not permit conclusive statements to be drawn about how school-based administrators might support speech language pathologists in responding to challenges such as personnel shortages, workload/caseload issues, recruitment and retention, and reimbursement. Because these issues are important to speech-language pathologists, it is hoped that the results may facilitate further conversation among policy makers, educational leaders, and speech-language pathologists that would assist in the resolution of these issues.

APPENDICES

Appendix A

Notice of Informed Consent
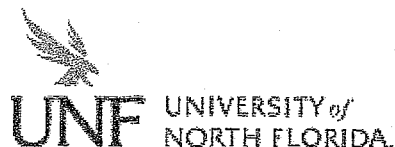
UNF UNIVERSITY of
NORTH FLORIDA.

Office of Research and Sponsored Programs
University of North Florida
1 UNF Drive
Jacksonville, FL 32224
Telephone # 904/620-2455   Fax # 904/620-2457

NOTICE OF INFORMED CONSENT

Dear School Administrator,

This is your invitation to participate in an online survey which examines school administrators;
attitudes toward speech-language impaired programs in public school settings.   Responding to
the attached **44-item** rating instrument will require only **15 minutes** of your time. To support the
clarity of the data collection and success of the project it is requested that you complete the
survey in its entirety and enroll only once in the study.

The body of literature within the field of speech--language pathology currently contains limited
information specifically addressing school administrators' opinions of this topic. Your responses
will help to improve understanding of administrators' opinions toward speech-language programs
in public schools relative to program quality, the role of the speech-language pathologist, and the
impact of services on student success.

Overall research finding from this project will assist in program planning, recruitment and
retention of school-based speech language pathologist and will ultimately enhance our daily
efforts in improving quality education for all students throughout the state of Florida.

There are no known risks involved in participation in this study. All information will be treated
confidentially and will be reported as group data. Your participation is voluntary and your
completion of the survey indicates your agreement to participate. No monetary or other
compensation is granted for participating in the study. Further, your decision regarding
participation or refusal to participate will involve no penalty or loss of benefits to which you are
otherwise entitled.

If you have any questions concerning this research prior to or during your participation in the study, please contact any individual indicated below. Should you have any questions regarding your rights as a participant or desire to report any concerns about the study, please do not hesitate to contact Dr. A. David Kline, Chair, UNF Institutional Review Board, Office of Research and Sponsored Programs at   Thank you very much for your time and attention in this very important project.
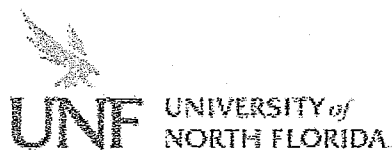
To begin the survey click here %URL%

Respectfully,

Carmen L. Jones, MED, MS, CCC-SLP
Principal Investigator/UNF Doctoral Candidate

Marcia Lamkin, Ed.D.
Program Director in Educational Leadership
University of North Florida

Appendix B

Subsequent Invitation

UNF UNIVERSITY of
NORTH FLORIDA

Office of Research and Sponsored Programs
University of North Florida
1 UNF Drive
Jacksonville, FL 32224
Telephone # 904/620-2455   Fax # 904/620-2457

SUBSEQUENT INVITATION

Dear School Administrator,

Recently you received a notice of informed consent to participate in an online survey, examining school administrators' attitudes toward speech-language impaired programs in public school settings. The
44-item survey called *Scale of Educators' Attitudes toward Speech Pathology* (SEASP) was forwarded to you with a request for you to complete the instrument in its entirety and submit the document only once.

You are encouraged to participate in this very important project which involves only 15 minutes of your time. Overall finding from this would be helpful in program planning, recruitment and retention of school-based speech-language pathologists, and improving quality education of all students throughout the state.

Please understand that your participation is *voluntary* and the **completion of the survey serves as an agreement to participate**. All information that you submit will be treated confidentially and reported as group data. If you will recall, there is no monetary or other compensation awarded for participating in the study. Your decision regarding participation or refusal to participate will involve no penalty or loss of benefits to which you are otherwise entitled.

If you have any questions concerning this research prior to or during your participation in the study, please contact any individual listed below.   Should you have any questions regarding your rights as a participant or desire to report any concerns about the study, please do not hesitate to contact Dr. A. David Kline, Chair, UNF Institutional Review Board, Office of Research and Sponsored Programs at

Again, the time and effort you have provided in this endeavor is appreciated.

Respectfully,

Carmen L. Jones, MED, MS, CCC-SLP
Principal Investigator/Doctoral Candidate
University of North Florida

Marcia Lamkin, Ed.D.
Program Director in Educational Leadership
University of North Florida

Appendix C

SEASP Background Information Section

SCALE OF EDUCATORS' ATTITUDES TOWARD SPEECH PATHOLOGY
(SEASP)
Background Information

Note: All responses will be treated confidentially and reported as group data.

1. Professional Setting:
   ___ Elementary
   ___ Middle
   ___ Secondary
   ___ Other_____

2. Do you supervise the speech-language pathologist (SLP) at your setting?
   ___ Yes
   ___ No
   If no, please indicate the job title of the person
   supervising the SLP.

   _____

   _____

Your continuation in the completion of this survey is appreciated.

3. In addition to your administrative coverage certification area, what other qualifications
   and/or Florida Certifications have you most utilized?
   ___ Elementary level
   ___ Middle level
   ___ Secondary level
   ___ Elementary *and* Secondary, grades K-12 (i.e., art, athletic coaching,
       dance, ESOL, physical education)
   ___ Academic Endorsements (i.e., American sign language, athletic coaching ESOL,
       gifted, orientation and mobility, reading)
   ___ Degreed Vocational Coverage, Vocational Endorsement *and/or* Nondegreed
       Vocational Coverage
   ___ Foreign Language Areas
   ___ Professional Service Areas, grades PK-12 (i.e., media specialist, guidance and
       counseling, psychologist)
   ___ Exceptional Student Education Areas, grades K-12 (i.e., ESE, hearing impaired,
       speech-language impaired, visually impaired)
   ___ *Certificate of Clinical Competence* (CCC) *and/or* Florida state licensure in
       speech-language pathology
   ___ Bachelor's *or* Master's degree in speech-language pathology (non-certified)
   ___ NONE OF THE ABOVE

4. Years employed in public education:
   __ 0-5 years
   __ 6-10 years
   __ 11-15 years
   __ More than 15 years

5. Indicate the population of students in your building:
   __ Elementary school (500 students or less)
   __ Middle school (700 students or less)
   __ High school (900 students or less)
   __ School serving grades K-8 (700 students or less)
   __ School serving grades K-12 (900 students or less)
   __ NONE OF THE ABOVE

6. Number of days per week speech-language
   services are provided
   __ less than 1 day
   __ 1 to 2 days
   __ 3 to 4 days
   __ 5 days

7. On the average, how many times during a month do you communicate with a speech-language pathologist concerning professional or service delivery issues?
   __ 0
   __ 1 to 10
   __ 10 to 20
   __ more than 20

8. The speech-language pathologist in your school primarily delivers services through a
   __ consultation model
   __ pull-out model
   __ co-teaching/collaborative model in the regular or special education classroom
   __ other_____

9. To what degree has your *overall* professional training assisted in increasing your familiarity with speech-language pathology and in educating exceptional students?
   __ Minimal   (i.e., "I possess *some* training in this area.")
   __ Moderate (i.e., "I have worked closely with exceptional student educators'
                throughout out my career.)
   __ Extensive (i.e., "I possess *certification and/or an advance degree* in the area
                of exceptional education or speech-language pathology.")

10. Has there been any professional development or an experience that has impacted your view of speech-language pathology?   __ Yes __ No

CONTINUE TO NEXT SECTION

Appendix D

Scale of Educators' Attitudes toward Speech Pathology

Scale of Educators' Attitudes toward Speech Pathology (SEASP)

Directions for SEASP

This survey consists of statements designed to sample your opinions about speech and language therapy in the public schools. There are no right or wrong answers. What is wanted is your own individual reactions to the statement. Read each statement and decide how you feel about it.

If you strongly agree, indicate "SA"
If you agree, indicate "A"
If you are undecided or uncertain, indicate "U"
If you disagree, indicate "D"
If you strongly disagree, indicate "SD"

Think in terms of the general situation rather than specific ones. Regard therapy, speech therapy, and speech and language therapy as synonymous terms. Please respond to every item.

1. Most students seen for therapy generalize noticeable progress to everyday situations.　SA　A　U　D　SD

2. The therapy program helps a speech handicapped student relate better to the peer group.　SA　A　U　D　SD

3. School psychologists generally evidence an unfavorable attitude toward speech therapy.　SA　A　U　D　SD

4. The size of the therapy caseload is too large for the therapist to provide satisfactory remedial help to each student.　SA　A　U　D　SD

5. Therapists help other educators understand how speech and language problems can be improved.　SA　A　U　D　SD

6. Taking students from the regular classroom is an effective way to deliver speech and language programs.　SA　A　U　D　SD

7. Tax money is well spent on speech and language therapy programs.　SA　A　U　D　SD

8. Many educators are apathetic toward speech and language programs.　SA　A　U　D　SD

9. Attending speech therapy sessions causes a student   SA   A   U   D   SD
to become overly concerned about being different
from other students.

10. Therapists work mostly with immature speech cases   SA   A   U   D   SD
who would outgrow the problem without therapy.

11. Therapists employ effective remedial procedures.   SA   A   U   D   SD

12. Therapists are not trained to effectively treat the   SA   A   U   D   SD
more encompassing disorders of speech and language.

13. The amount of therapy time allotted to each case   SA   A   U   D   SD
is usually satisfactory for effecting the desired
behavior change.

14. Speech therapists are not successful treating school   SA   A   U   D   SD
children with voice problems.

15. The therapy program makes a substantial contribution   SA   A   U   D   SD
to the educational goals of the school.

16. Therapists have a good knowledge of the goals of   SA   A   U   D   SD
public school education.

17. The therapy program helps a speech and language   SA   A   U   D   SD
handicapped student perform better in academic
subjects.

18. Therapists do not with a student intensely enough   SA   A   U   D   SD
to do much good.

19. Therapy provides a good program for the more   SA   A   U   D   SD
severe speech and language handicapped students.

20. Therapists work just as hard at doing their job   SA   A   U   D   SD
as anyone else.

21. Therapists get too much release time from   SA   A   U   D   SD
therapeutic duties.

22. Therapy programs are not thought of as an   SA   A   U   D   SD
integral part of the school curriculum.

23. Speech and language therapy is not meeting the needs of the public school.   SA   A   U   D   SD

24. The therapy program helps a speech and language handicapped student develop an improved self-concept.   SA   A   U   D   SD

25. Other educators feel very positive about the results speech and language programs show.   SA   A   U   D   SD

26. The gains children receive from the therapy do not justify the overall investment in the therapy program.   SA   A   U   D   SD

27. The therapy programs are disruptive of the public school curriculum.   SA   A   U   D   SD

28. The speech and language program integrates well with the total educational program.   SA   A   U   D   SD

29. Therapists are not successful in promoting good working relationships with other educators who work in the schools.   SA   A   U   D   SD

30. Therapists have the respect of other educators.   SA   A   U   D   SD

31. Therapists are successful in the treatment of language disorders.   SA   A   U   D   SD

32. Therapists are successful in treating the stuttering student.   SA   A   U   D   SD

33. Speech therapists evidence a condescending attitude toward other members of the educational staff.   SA   A   U   D   SD

34. The quality of school is inferior to similar services provided in the community (hospitals, centers, universities).   SA   A   U   D   SD

END OF SURVEY

Appendix E

Extended Invitation Notice
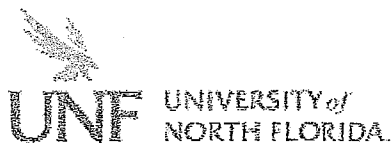
UNF UNIVERSITY of
NORTH FLORIDA.

Office of Research and Sponsored Programs
University of North Florida
1 UNF Drive
Jacksonville, FL 32224
Telephone # 904/620-2455
Fax # 904/620-2457

EXTENDED INVITATION NOTICE

Dear School Administrator,

A very important project investigating school administrators' attitudes toward speech-language impaired programs in public school settings will soon close. Many of your colleagues throughout the state have already taken advantage of this opportunity; however, your help in this endeavor is greatly needed.

Responding to the attached **44-item** rating instrument will require only **15 minutes** of your time. In an effort to support the clarity of the data collection, it is merely requested that you complete the survey in its entirety. Overall research findings from this project will assist in program planning, recruitment and retention of school-based speech language pathologists and will ultimately enhance our daily efforts in improving quality education for all Florida students.

PLEASE NOTE: 1) Miami-**Dade County** school administrators participating in this project should reference **approval number 1537.** 2) **Lee County** school administrators participating in the study may contact Dr. Richard Itzen (for details or reference the list of approved research projects found on the district's website http://accountability.leeschools.net/research_projects/

There are no known risks involved in participation in this study. All information will be treated confidentially and will be reported as group data. Your participation is voluntary and your completion of the survey indicates your agreement to participate. No monetary or other compensation is granted for participating in the study. Further, your decision regarding participation or refusal to participate will involve no penalty or loss of benefits to which you are otherwise entitled.

If you have any questions concerning this research prior to or during your participation in the study, please feel free to contact Dr. A. David Kline, Chair, UNF Institutional Review Board, Office of Research and Sponsored Programs at

Thank you very much for your time and attention in this very important project.
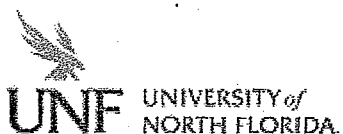
To begin the survey click here %URL%

Respectfully,

Carmen L. Jones, MED, MS, CCC-SLP
Principal Investigator/UNF Doctoral Candidate

Appendix F

Amendment Request Notice

March 12, 2009

UNF UNIVERSITY *of*
NORTH FLORIDA.

Carmen L. Jones, Doctoral Candidate

DATE: March 12, 2009

TO: Dawn O'Connor, Assistant Director of Research Integrity
                 Office of Research and Sponsored Programs

FROM: Carmen L. Jones

CC: Dr. Marcia Lamkin, Dissertation Chair
                 Leadership, Counseling, and Instructional Technology
                 College of Education and Human Services

                 Dr. Christopher Leone, Professor
                 Department of Psychology
                 College of Arts and Sciences

RE: <u>**Amendment Request   IRB File #08-201**</u>:
                 "Attitudes of K-12 School Administrators
                 Toward Speech-Language Programs in Public Schools"

This comes as a request to disseminate an "*extended invitation*" to school administrators selected to participate in my study via the UNF web survey program, EFM Community. Recent circumstances have impacted the limited number of individuals responding to my project, subsequently facilitating my involvement in the process of conducting research within specific school districts.

After beginning my study on February 3rd, I received correspondences from public school personnel representing **Miami-Dade** (Office of Program Evaluation) and **Lee** County School Districts (Department of Accountability, Research, and Continuous Improvement), requesting that I submit an application prior to conducting research within their districts. As a result, the <u>principal participants from these districts were removed</u> from the initial distribution list until such time that research approval could be obtained. The study has continued as initially proposed with principals from other counties voluntarily participating in the survey.

I presently have authorization to conduct research from both of the above school districts and would like to re-enter the e-mail addresses of the indicated principal

participants.   For further details, reference the enclosed approval letters from Miami-Dade and Lee Counties.

Once your input regarding this amendment request has been received, I will disseminate the "extended invitation" letter to the *inclusive* list of principal participants (see attachment).

Thank you for any consideration given me in this matter. I look forward to your reply.

Appendix G

The School District of Lee County

Approval Letter

THE SCHOOL DISTRICT OF LEE COUNTY

2855 COLONIAL BLVD. ● FORT MYERS, FLORIDA 33966-1102 ● (239) 334-1102 ● TTD/TTY (239) 335-1512

JANE E. KUCKEL, PH.D.
CHAIRMAN, DISTRICT 3

STEVEN K. TEUBER, J.D.
VICE CHAIRMAN, DISTRICT 4

ROBERT D. CHILMONIK
DISTRICT 1

JEANNE S. DOZIER
DISTRICT 2

ELINOR C. SCRICCA, PH.D.
DISTRICT 6

JAMES W. BROWDER, ED.D.
SUPERINTENDENT

KEITH B. MARTIN, ESQ.
BOARD ATTORNEY

March 18, 2009

Carmen,

Our District Research Committee has reviewed your proposed study "Attitudes of K-12 School Administrators toward Speech-Language Programs in Public Schools" and approved it for implementation in the School District of Lee County with the following requirements:

1) You allow us to notify school administrators prior to sending them the survey.
2) It is made clear to administrators that participation is voluntary and anonymous.
3) Our Dept. of Accountability, Research, and Continuous Improvement receive a copy (electronic) of results when the study is completed to be shared with district administrators and staff.

Thank you for your interest in conducting research in our district. We look forward to receiving the results of your study.

Signature Deleted

Richard Itzén, Director
Dept. of Accountability, Research, and Continuous Improvement

VISION: TO BE A WORLD-CLASS SCHOOL SYSTEM

Appendix G

Miami-Dade County Public Schools

Approval Letter

Miami-Dade County Public Schools

giving our students the world

March 11, 2009

Dear Ms. Jones:

I am pleased to inform you that the Research Review Committee of the Miami-Dade County Public Schools (MDCPS) has approved your request to conduct the study, "Attitudes of K-12 School Administrators Toward Speech-Language Programs in Public Schools." The approval is granted with the following conditions:

1.   Participation of a school in the study is at the discretion of the principal. A copy of this approval letter, or at least the approval number, must be presented to the principal.

2.   The participation of all subjects is voluntary.

3.   The anonymity and confidentiality of all subjects must be assured.

4.   The study will involve approximately 446 MDCPS principals.

5.   Disruption of the school's routine by the data collection activities of the study must be kept at a minimum.

It should be emphasized that the approval of the Research Review Committee does not constitute an endorsement of the study. It is simply a permission to request the voluntary cooperation in the study of individuals associated with the MDCPS. It is your responsibility to ensure that appropriate procedures are followed in requesting an individual's cooperation, and that all aspects of the study are conducted in a professional manner. With regard to the latter, make certain that all documents and instruments distributed within the MDCPS as a part of the study are carefully edited.

The approval number for your study is 1537. This number should be used in all communications to clearly identify the study as approved by the Research Review Committee. The approval expires on June 30, 2010. During the approval period, the study must adhere to the design, procedures and instruments which were submitted to the Research Review Committee. If there are any changes in the study as it relates to the MDCPS, it may be necessary to resubmit your request to the committee. Failure to notify me of such a change may result in the cancellation of the approval.

If you have any questions, please call me at   Finally, remember to forward an abstract of the study when it is complete. On behalf of the Research Review Committee, I want to wish you every success with your study.

Sincerely,

Signature Deleted

Joseph J. Gomez, Ph.D.
Chairperson
Research Review Committee

JJG:mp

| APPROVAL NUMBER: 1537 | APPROVAL EXPIRES: 6-30-10 |

Appendix I

University of North Florida

Institutional Review Board (IRB)

Approval Memorandum

March 19, 2009

UNF

UNIVERSITY of
NORTH FLORIDA.

Office of Research and Sponsored Programs
1 UNF Drive
Building 3, Office 2500
Jacksonville, FL 32224-2665
904-620-2455 FAX 904-620-2457
Equal Opportunity/Equal Access/Affirmative Action Institution

MEMORANDUM

DATE: March 19, 2009

TO: Ms. Carmen Jones

VIA: Dr. Marcia Lamkin
          Leadership, Counseling, and Instructional Technology

FROM: Dr. David Kline, Chair
          UNF Institutional Review Board

RE: IRB#08-20: "Attitudes of K-12 School Administrators Toward Speech-Language
          Programs in Public Schools"
          Original IRB Approval Date: 01/29/09
          Amendment Request of 03/19/09

This is to advise you that the proposed amendment to your project, "Attitudes of K-12 School
Administrators Toward Speech-Language Programs in Public Schools," has been reviewed and
approved on behalf of the Institutional Review Board to include the following:

- Dissemination of an "extended invitation" to school administrators in the following
  districts:
  o   Miami-Dade County Schools
  o   Lee County Schools--

This approval applies to your project in the form and content as submitted to the IRB for review.
Any additional variations or modifications to the approved protocol and/or informed consent forms
as they relate to dealing with human subjects must be approved by the IRB prior to implementing
such changes.

This study was reviewed and approved by the IRB on 03/19/2009 for a period of one year. Please
submit a Continuing Review status report **no later than 03/18/2010** if your study will be
continuing on after that date. *We suggest you submit your Continuing Review status report 1
month prior to the above expiration date.*

As you may know, your CITI Course Completion Report is good for 3 years. Your completion
report expires on 07/29/2010. If your completion report expires soon, or has expired, please take
CITI's refresher course and email us a copy of your updated completion report.

Should you have any questions regarding this approval or any other IRB issues, please do not
hesitate to contact our office at 620-2455.

Thank you,

Research Integrity Staff

UNF IRB Number: 09-015
Approval Date: 3-19-09
Revision Date:

Appendix J

Final Invitation Notice

UNF UNIVERSITY of
NORTH FLORIDA.

Office of Research and Sponsored Programs
University of North Florida
1 UNF Drive
Jacksonville, FL   32224
Telephone # 904/620-2455
Fax # 904/620-2457

FINAL INVITATION NOTICE

Dear School Administrator,

I realize that your daily responsibilities are often overwhelming. However, please take a moment to read this invitation which comes as an earnest request to you to participate in an important study.

The online survey called *Scale of Educators' Attitudes toward Speech Pathology* (SEASP) is designed to sample your opinions about speech and language therapy in the public schools.

Please understand that the **completion of the survey indicates your agreement to participate.** The **44-item** survey only takes **15 minutes** of your time to complete.   It is anticipated that the findings from this study will assist in program planning, recruitment and retention of school-based speech-language pathologists, and improving quality education of all students throughout the state.

To begin the survey **please click** here%URL%

Although your decision regarding participation has no monetary compensation, you will have an opportunity to contribute to the body of knowledge within the field of speech-language pathology.   All information that you submit will be treated confidentially and reported as group data.

Should you have any questions or concerns about the study, please contact any individual indicated below or Dr. A. David Kilne, Chair, UNF Institutional Review Board, Office of Research and Sponsored Programs at

Thank you in advance for your cooperation and help.

Respectfully,

Carmen L. Jones, MED, MS, CCC-SLP
Principal Investigator/UNF Doctoral Candidate

Marcia Lamkin, Ed.D.
Program Director in Educational Leadership
University of North Florida

Appendix K

Copyright Letter

AMERICAN
SPEECH-LANGUAGE-
HEARING
ASSOCIATION

October 26, 2007

Dear Carmen:

Permission is granted to use material from the LSHSS articles cited below in your dissertation. Please include attributions as follows:

Reprinted with permission from Principals' opinions on the role of speech-language pathologists serving students with communication disorders involved in violence by M. J. Ritzman and D. Sanger. Language, *Speech, and Hearing Services in Schools, 38*, 365-377. Copyright 2007 by American Speech-Language-Hearing Association. All rights reserved.

Reprinted with permission from Attitudes of classroom teachers, learning disabilities specialists, and school principals toward speech and language programs in public elementary schools by R. A. Phelps and R. A. Koenigsknecht, *Language, Speech, and Hearing Services in Schools, 8*, 23-32. Copoyright 1977 by American Speech-Language-Hearing Association. All rights reserved.
Reprinted with permission from Educators' opinions about speech-language pathology services in schools by D, Sanger, K. Hux, and K. Griess. *Language, Speech, and Hearing Services in Schools, 26*, 75. Copyright 1995 by American Speech-Language-Hearing Association. All rights reserved.
You have already contacted Dr. Sanger and Dr. Koenigsknecht, so no further author approval is required.

Sincerely
Signature Deleted

Brent Jacocks, Director
Publications Production
ASHA

Appendix L

Follow Up Letter of Appreciation

UNF UNIVERSITY *of*
NORTH FLORIDA.

Office of Research and Sponsored Programs
University of North Florida
1 UNF Drive
Jacksonville, FL   32224
Telephone # 904/620-2455
Fax # 904/620-2457

FOLLOW UP LETTER OF APPRECIATION

Dear School Administrator,

Please accept my sincere gratitude for your participation in the online survey designed to gather K-12 public school administrators' attitudes toward speech-language impaired programs in public school settings.

The responses that you submitted to the survey called Scale of Educators' Attitudes toward Speech Pathology (SEASP) will serve to enhance the body of the knowledge in the speech pathology profession. It is hoped that the findings from the study will glean a greater understanding concerning methods to improve recruitment and retention and how to develop quality communication programs in an ever changing educational system.

If you desire a report of study results, please contact me at the telephone number or e-mail address listed below. Once again, thank you for your time and effort in this very important project.

Respectfully,

Carmen L. Jones, MED, MS, CCC-SLP
Principal investigator/UNF Doctoral Candidate

REFERENCES

American Speech-Language Hearing Association. (1985). Committee

on Supervision in Speech-Language Pathology and Audiology. Clinical

supervision in speech-language pathology and audiology. A position

statement. *ASHA, 27, 57-60.* In E.S. McCrea & J.A. Brasseur (Ed.)

The Supervisory process in speech-language pathology and audiology (p.8).

Boston: Pearson Education, Inc.

American Speech-Language-Hearing Association. (1993). *Professional*

performance appraisal by individuals outside the professions of speech-

language pathology and audiology [position statement]. Retrieved from

http://www.asha.org/docs/html/PS1993-00229.html

American Speech-Language-Hearing Association. (1997). *ASHA: IDEA overview.*

Rockville, MD: Author.

American Speech-Language-Hearing Association. (2004). *Analysis of major*

issues in the IDEA reauthorization law. Executive summary. Rockville,

MD: Author. Retrieved from http//www.asha.org/about/legislation-

advocacy/federal/idea/04-law.htm?print=1

American Speech-Language-Hearing Association. (2008a). *Clinical supervision*

in speech-language pathology [position statement]. Retrieved from

http://www.asha.org/docs/html/PS2008-00295.html

American Speech-Language-Hearing Association. (2008b). *Knowledge and*

skills needed by speech-language pathologists providing clinical

supervision [position statement]. Retrieved from

http://www.asha.org/docs/html/KS2008-00294.html

American Speech-Language-Hearing Association. (2009a). *About certification*

– general information. Retrieved from

http://www.asha.org/certification/AboutCertificationGenInfo.htm

American Speech-Language-Hearing Association. (2009b). *No Child Left Behind*

(NCLB). Retrieved from http://www.asha.org/advocacy/federal/nclb/

American Speech-Language-Hearing Association. (2009c). *Personnel issues in*

education: Recruitment and retention of qualified speech-language pathologists in

the public schools. Retrieved from

http://www.asha.org/careers/recruitment/schools/slp_recruitment.htm

American Speech-Language-Hearing Association. (2009d). *What's an SLP?*

Retrieved from http://www.asha.org/public/slp.htm

Anderson, J. L. (1972). Status of supervision of speech, hearing, and language

programs in the schools. *Language, Speech, and Hearing Services in Schools,*

3, 12-22.

Bem, D. J. (1970). *Beliefs, attitudes, and human affairs.* Belmont, CA: Brooks/Cole.

Bennett, C. W., & Runyan, C. M. (1982). Educators' perceptions of the effects of

communication disorders upon educational performance. *Language,*

Speech, and Hearing Services in Schools, 13, 260-263.

Black, M. E. (1964). *Speech correction in the schools.* Englewood Cliff, NJ:

Prentice-Hall.

Blomberg, J. (2007). *Press release: Regarding summary of the second FCAT external*

advisory committee meeting. Retrieved from

http://www.fldoe.org/news/2007/2007_06_15.asp

Clauson, G., & Kopatic, N. (1975). Teacher attitudes and knowledge of remedial

speech programs. *Language, Speech, and Hearing Services in Schools,*

6, 206-210.

Eagly, A. H., & Chaiken, S. (1993). *The psychology of attitudes.*

Forth Worth, TX: Harcourt Brace Jovanovich.

Edgar, D. L., & Rosa-Lugo, L. I. (2007). The critical shortage of speech-language

pathologists in the public school setting: Features of the work

environment that affect recruitment and retention. *Language, Speech,*

and Hearing Services in Schools, 38, 31-46.

Eggen, P., & Kauchak, D. (2004). *Educational psychology: Windows on*

classrooms (6th ed.). Upper Saddle River, NJ: Pearson Prentice Hall.

Ehren, B. J., Montgomery, J., & Whitmire, K. (2006). *New roles in response to*

intervention: Creating success for schools and children – A collaborative project.

American Speech-Language Hearing Association, Rockville, MD.

Elliott, A. C., & Woodward, W. A. (2006). *Statistical analysis quick reference*

guidebook with SPSS examples, Thousand Oaks, CA: Sage Publishers.

Fisher, L. (1985). Supervision. In R. Van Hattum (Ed.), *Administration of*

speech-language services in schools: A manual (pp. 54-122). San Diego:

College-Hill Press.

Fiske, S.T., & Linville, P.W. (1980). What does the schema concept buy us?

In A.H. Eagly & S. Chaiken (Eds.), *The psychology of attitudes*. Forth Worth, TX:

Harcourt Brace Jovanovich.

Florida Association of Speech-Language Pathologists and Audiologists (2007, May)

Issues and strategies affecting school-based speech-language pathologists,

Roundtable discussion held at the annual convention of Florida Association

of Speech-Language Pathologists, Marco Island, FL.

Florida Department of Education. (2009). *About the department of education.*

Retrieved from http://www.fldoe.org/Department/

Florida Department of Education. (2000). *Florida school laws* (2000 ed.).

Charlottesville, VA: Matthew Bender & Company.

Florida Department of Education. (2003). *Trends in the supply of new teachers in*

Florida. Tallahassee, FL: Office of Policy, Research and Improvement. Retrieved

from http://www.fldoe.org/evaluation/pdf/tnoct2000.pdf

Flower, R. M. (1984). *Delivery of speech-language pathology and audiology services.*

Baltimore: Williams & Wilkins.

Green, S. B., & Salkind, N.J. (2005). *Using SPSS for Windows and Macintosh: Analyzing*

and understanding data (4th ed.). Upper Saddle, NJ: Prentice Hall.

Hair, J. F., Black, W. C., Babin, B. J., Anderson, R. E., & Tatham, R. L. (2006).

Multivariate data analysis (6th ed.). Upper Saddle River, NJ: Pearson.

Individual with Disabilities Education Act (IDEA), Public Law 101-476, formerly

Public Law 14-942, Education of All Handicapped Children Act, 20 USC 1400

(1975).

Jones, C. L. (2006a). [School administrators' perceptions of the role of speech-language pathologists at school sites]. Unpublished raw data.

Jones, P. K. (2006b). The middle school principal and special education: Are principals prepared to support special education teachers in leading their students in achieving AYP? *Dissertation Abstracts International, 63*(10), 3434. (UMI No. 3068616).

Katz, D. (1960). The functional approach to the study of attitudes. *Public Opinion Quarterly, 24 (2),* 163-204.

Language, Speech, and Hearing Services in Schools. (1970). *Services and functions of speech and hearing specialists in public schools: A statement by the American Speech and Hearing Association,* 1:30-33. Author.

Lloyd, G., & Ainsworth, S. (1954). The classroom teacher's activities and attitudes relating to speech correction. *Journal of Speech and Hearing Disorders, 19,* 244-249.

Lubinski, R., & Frattali, C. (2001). *Professional issues in speech-language pathology and audiology* (2nd ed.). San Diego, CA: Singular.

Lubinski, R., & Masters, M. G. (2001). Special populations, special settings: New and expanding frontiers. In R. Lubinski & C. Frattali.(Eds.), *Professional issues in speech-language pathology and audiology* (pp.123-145). San Diego, CA: Singular.

Lubke, G. H., Dolan, C.V., Kelderman, H. K., & Mellenbergh, G.J. (2003). O*n the relationship between sources of within- and between-group differences and measurement invariance in the common factor model.* Retrieved

from http://users.fmg.uva.nl/cdolan/lubke_int.pdf

McCrea, E. S., & Brasseur, J. A. (2003). *The supervisory process in speech-language pathology and audiology*. Boston: Pearson Education.

Mintzberg, H. (2001). The five basic parts of the organization. In J. M. Shafritz & J. S. Ott (Eds.), *Classics of organization theory* (pp. 222-233). Orlando: Harcourt College Publishers.

Moore, M. (2007). New governance structure adopted. *The ASHA Leader, 12*(6), 1, 24-25.

Morgan, G. A., Leech, N. L., Gloeckner, G.W., & Barrett, K.C. (2007). *SPSS for introductory statistics: Use and interpretation* (3rd ed.). Mahwah, NJ: Lawrence Erlbaum Associates.

Neidecker, E. A. (1980). *School programs in speech-language: Organization and management*. Englewood Cliffs, NJ: Prentice-Hall.

Noll, J.W. (2004). *Taking sides: Clashing views on controversial educational issues* (12th ed.). Guilford, CT: McGraw-Hill.

Northouse, P. G. (2004). *Leadership: Theory and practice* (3rd ed.). Thousand Oaks, CA: Sage.

O'Connell, P. F. (1997). *Speech, language, and hearing programs in schools: A guide for students and practitioners*. Gaithersburg, MD: Aspen Publications.

O'Connor, L. C. (2008). A look at supervision in the 21st century. *The ASHA Leader, 3*(5), 14-18.

Phelps, R. A., & Koenigsknecht, R. A. (1977). Attitudes of classroom teachers,

learning disabilities specialists, and school principals toward speech and language programs in public elementary schools. *Language, Speech, and Hearing Services in Schools, 8,* 23-32.

Public Law 108-1442 All Handicapped Children Act of 1975 (Public Law 94–142), 20, USC, 1400 (2004).

Public Law 105-17 Individuals with Disabilities Act of 1997, 20 USC, 1400 (1997).

Public Law 94-142 Education of All Handicapped Children Act 20, USC, 1400 (1975).

Ritzman, M. J. (2006). Principals' opinions on the role of speech-language pathologists serving students with communication disorders involved in violence. *Dissertation Abstracts International, 67*(07). (UMI No. 3225886).

Rosa-Lugo, L. I., Rivera, E. A., & McKeown, S. W. (1998). Meeting the critical shortage of speech-language pathologists to serve the public schools – Collaborative rewards. *Language, Speech, and Hearing Services in Schools, 29,* 232-242.

Ruscello, D. M., Lass, N. J., Fultz, N. K., & Hug, M. J. (1980). Attitudes of educators toward speech-language pathology services in rural schools. *Language, Speech, and Hearing Services in Schools, 11,* 139-144.

Sanger, D. D., Hux, K., & Griess, K. (1995). Educators' opinions about speech-language pathology services. *Language, Speech, and Hearing Services in Schools, 26,* 75-86.

Schetz, K .F., & Billingsley, B.S. (1992). *Speech-language pathologist' perceptions of administrative support and non-support.* Language, Speech, and

Hearing Services in Schools, 23: 153-158.

Shaughnessy, A., & Sanger, D. (2005). Kindergarten teachers' perceptions of language and literacy development, speech-language pathologists, and language interventions. *Communication Disorders Quarterly, 26*(2), 67-84.

Signoretti, L. F., & Oratio, A. R. (1981). A multivariate analysis of teachers' attitudes toward public school speech pathology services. *Language, Speech, and Hearing Services in Schools, 12,* 178-187.

Smith, D. D. (1998). *Introduction to special education: Teaching in an age of challenge* (3rd ed.). Boston, MA: Allyn and Bacon.

Tomes, L., & Sanger, D. D. (1986). Attitudes of interdisciplinary team members toward speech-language services in public schools. *Language, Speech, Hearing Services in Schools, 17,* 230-240.

United States Department of Education. (2002). *Outline of programs and selected changes in the No Child Left Behind Act of 2001.* Retrieved from http://www.ed.gov/nclb/overview/intro/progsum/progsum.pdf

Van Hattum, R. (1985a). Introduction. In R. Van Hattum (Ed.), *Administration of speech-language services in schools: A manual.* San Diego: College-Hill Press.

Van Hattum, R. (1985b). *Organization of speech-language services in schools: A manual.* San Diego: College-Hill Press.

Curriculum Vitae

CARMEN L. JONES

EDUCATION

Ed.D.	University of North Florida, Jacksonville, Florida
Major:	Educational Leadership and Administration
M.Ed.	University of North Florida,
Major:	Educational Leadership and Administration
M.S.	Tennessee State University, Nashville, Tennessee
Major:	Speech-Language Pathology
B.S.	Atlantic University, Savannah, Georgia
Major:	Education – Speech Correction

PROFESSIONAL EXPERIENCE

Admissions and Placement Specialist, Speech-Language Pathologist, Duval County Public Schools, Jacksonville, Florida.

Director of Rehabilitation, Manor Care Health Services, Jacksonville, Florida.

Speech-Language Pathologist, Orange County Public Schools, Orlando, Florida.

Contract Speech Language Pathologist, Crossroads in Communication, Jacksonville, Florida.

PROFESSIONAL ORGANIZATIONS

American Association of School Administrators

American Speech-Language-Hearing Association

Phi Delta Kappa International, First Coast Chapter (#1533)

Florida Association of Speech Pathologists and Audiologists