

February 8, 2021

Re: Written testimony in support of SB 77

From: Kansas Speech-Language-Hearing Association (KSHA)

Dear Chair Hildebrand and members of the Senate Health Committee,

Thank you for the opportunity to address SB 77, enacting the Audiology and Speech-Language Pathology Interstate Compact (ASLP-IC).

You have received oral and written testimony detailing many reasons why the Kansas Speech-Language-Hearing Association (KSHA) supports SB 77, which facilitates the interstate practice of audiology and speech-language pathology while maintaining public protection.

We wanted to elaborate on a crucial benefit to the public in relation to improving access to speech-language pathologists and audiologists.

You may or may not be aware that our scope of practice is wide, therefore, many speechlanguage pathologists and audiologists choose to specialize in certain areas of clinical practice. Many audiologists and speech-language pathologists with advanced knowledge, skills, and experience beyond the Certificate of Clinical Competence (CCC) provide very specialized services in particular areas. We would like to provide two examples of how SB 77 would allow families much needed access to specialists.

First, stuttering is a complex, multifactorial neurological condition which affects more than 3 million Americans, including our current President, Joe Biden. Stuttering has both overt and covert characteristics, with many emotional and psychological implications. Most generalists do not possess the adequate training or skills necessary to treat stuttering in a holistic and effective manner. There are less than 200 speech-language pathologists who are either board-recognized fluency specialists or generalists who specialize in stuttering. Therefore, SB 77 would allow families and individuals who stutter to access services provided by a practitioner with the necessary expertise and experience.

Secondly, the ever-changing demographics in the United States has significantly increased the cultural and linguistic diversity that speech-language pathologists encounter in clinical practice.

According to the United States Census Bureau's 2018 American Community Survey (ACS; <u>https://www.census.gov/programs-surveys/acs/</u>), approximately 30% of individuals in the U.S. do not speak English well and/or speak a language other than English at home. These data do not include children under the age of five. Based on the most recent census data regarding the number of languages spoken in the United States (U.S. Census, 2015;

<u>https://www.census.gov/newsroom/press-releases/2015/cb15-185.html</u>), it is estimated that one out of every five children in the U.S. speaks a language other than English. Yet, according to the American Speech-Language-Hearing Association, only 6.3% of speech-language pathologists and audiologists in the U.S. are bilingual service providers. Furthermore, many monolingual speech-language pathologists lack the training and support (e.g., interpreters/translators) to effectively provide diagnostic and treatment services to bilingual populations. The passing of SB 77 would allow bilingual children and adults to receive more effective diagnostic and treatment services and help prevent the over- and under-identification of bilingual speakers into special education services.

KSHA is grateful for this opportunity to discuss the benefits of passing SB 77, which would significantly improve access to speech, language, and hearing services for Kansas citizens.

Sincerely,

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