

# Philosophy of an slp

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Danielle Williams SPED 299 MyPhilosophyof Speech-Language Pathology My Philosophy of Speech-Language PathologyI believethat babies, toddlers, teenagers, adults, and elderly, many of them are afflicted with a speech impediment, there often seems to be a little hope. Many of these individuals are children, or cast out of society as young adults. Many are sent to doctors and specialists who try to determine what is wrong with them. On occasion, they will meet a person who can help them, and ultimately, change their life for the better.

This person is a Speech-Language Pathologist. I want to help individuals that have speech disorders. Many individuals believe that speech-language pathology it has its merits; however there are a few noisy people who believe that speech pathology is a useless ambition. They believe that children suffering from a speech disorder will eventually grow out of it. Children will not eventually grow out of an speech disorder. My heart is with this particular profession.

I want to help the kids and adults that has a speech disorder, care those individuals, and make sure they get the proper treatment needed for their disorder. The patients often suffer from a wide variety of problems: late development, cleft palate, hearing loss, mental retardation, brain damage, stroke, or emotional problems. I am very compassionate about this profession. An SLP work in early intervention is complex, challenging, and rewarding. In many ways, each day is different from the next.

They have several roles and responsibilities, including (1) participating in assessments to determine whether or not a child is eligible for early intervention services, (2) home visits -- working with infants and toddlers and <https://assignbuster.com/philosophy-of-an-slp/>

their families in their natural environment (usually their home), and (3) leading a therapeutic play group two mornings a week. The children that I work with are all under the age of three years old. They are eligible to receive early intervention services either because they have significant developmental delays or because they and/or their families have at least four environmental risk factors.

These environmental risk factors include "child characteristics," such as extremely low birth weight, extended hospital stays, and chronic feeding difficulties, and "family characteristics," including homelessness, substance abuse in the child's home, and violence in the home. Most of the children that an SLP work with have significant developmental delays. These include, but are not limited to, receptive and expressive language delays, autism spectrum disorders, hearing loss, Down syndrome, and Global Developmental Delay.

An SLP generally see about five families per day for home visits and assessments. They collaborate with co-workers during assessments, because they do those in groups of three in order to have a multi-disciplinary team. A typical assessment would include (an SLP), a social worker, and a special educator. On the days that an SLP lead the therapeutic play group, that takes up the entire morning, and They usually schedule a couple of home visits or an assessment in the afternoon.