

THE INTERSECTION OF INTERPROFESSIONAL PRACTICE AND CULTURAL
RESPONSIVENESS IN SCHOOL-BASED SPEECH-LANGUAGE PATHOLOGISTS

by

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RESPONSIVENESS IN SCHOOL-BASED SPEECH-LANGUAGE PATHOLOGISTS

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ABSTRACT

Within school systems there is currently a wide disparity between the racial and cultural makeup of educators and professionals providing service and the children actually receiving those services. Speech-language pathologists alone are comprised of almost 90% Caucasians; whereas, 50% of the students they serve in the schools are comprised of other races. A shared identity can help increase cultural sensitivity and improve service. But what if a shared identity cannot be achieved within practice? The purpose of this project was to increase our understanding of how school-based speech-language pathologists are implementing cultural responsiveness in their daily practice and the potential impact of interprofessional teamwork in supporting culturally responsive practice. A qualitative research method was used and participants were interviewed via Zoom, following an interview guide. Participant inclusion criteria included: 1) currently certified as an American Speech-Language-Hearing Association speech-language pathologist; and 2) working within an elementary school setting in the Dallas-Fort-Worth metroplex. Interview transcripts of nine speech-language pathologists were examined and content analyses completed to examine culturally responsive practices, interprofessional team activities, and how interprofessional teams supported cultural responsiveness. Results of the analyses yielded 12 themes with 33 sub-themes. The findings indicated that speech-language pathologists within the schools are currently engaged in a variety of culturally responsive practices. The respondents' responses also supported that both interdisciplinary and interprofessional teamwork can and does enhance culturally responsive practice.

Introduction

A speech-language pathologist (SLP) works with clients of all ages to treat speech, language, hearing, and literacy disorders. Speech-language pathologists are employed in a variety of settings, with most SLPs serving children in the school districts. The American Speech-Language-Hearing Association (ASHA) reports that 51% of SLPs are currently working within school districts (ASHA, 2021). Over the past decade, the diversity of the student population served by SLPs in schools has increased, with half of the students being children of color (National Center for Educational Statistics [NCES], 2019). Further, 47% of children with disabilities have been reported to be students of color (Billingsley et al., 2019). Although our student population is becoming increasingly diverse, educators and SLPs do not reflect comparable diversity (Hopf et al., 2021; Hyter & Salas-Provance, 2021). The racial disparity between students and educators is one that needs to be addressed. With growing diversity, SLPs need to be aware of, sensitive to, and responsive to the cultural differences across the diverse populations they serve (Hopf et al., 2021; Hyter & Salas-Provance, 2021; Pfeiffer et al., 2019). When a school setting embraces an atmosphere of cultural sensitivity, students and faculty respond positively and the well-being of all is enhanced (Hopf et al., 2021). Having a shared ethnic identity leads to increased sensitivities and further enhances the services being provided (Schulz et al., 2014; Vincent et al., 2011). When a shared identity is not the case, SLPs must be particularly intentional and committed to developing their cultural competencies as they work with children and families. Such cultural responsiveness is essential when SLPs assess and treat students, including when SLPs are members of interprofessional school teams.

Culturally Responsive Practice in Schools

When SLPs work with clients whose backgrounds differ from their own, it is important to consider the client's cultural and ethnic background to ensure best practice (Hopf et al., 2021; Maul, 2015; Hyter & Salas-Provance, 2021). Working with many different cultures may lead to miscommunication or misconceptions due to stereotypes (Maul, 2015). By acknowledging and respecting diverse backgrounds, professionals may avoid such misconceptions and be more culturally responsive. Cultural responsiveness (CR) is defined as the creation of professional and community space that values cultural diversity where the members involved are constantly re-evaluating and expanding their perspectives of different cultures (Hyter & Salas-Provance, 2019). ASHA (2017) defines culture as the following:

Culture and cultural diversity can incorporate a variety of factors, including but not limited to age, disability, ethnicity, gender identity (encompasses gender expression), national origin (encompasses related aspects e.g., ancestry, culture, language, dialect, citizenship, and immigration status), race, religion, sex, sexual orientation, and veteran status. Linguistic diversity can accompany cultural diversity. (p. 5)

Further ASHA (2017) emphasizes the importance of cultural sensitivity when working with all clients:

Culture and language may influence the behaviors of individuals who are seeking health, habilitative, or rehabilitative care and their attitudes toward speech, language, and hearing services and providers. Similarly, the delivery of services is impacted by the values and experiences of the provider. Providing competent care is providing service that is respectful of, and responsive to, an individual's values, preferences, and language. Care

should not vary in quality based on ethnicity, age, socioeconomic status, or other factors.

(p.6)

Culture is not a fixed set of characteristics for an individual group, yet a changing and more flexible way of life within a particular community (Hyter & Salas-Provance, 2021). Culturally responsive practice (CRP) is the implementation of cultural responsiveness within the professional realm and treatment of clients and family members and other professionals (Hyter & Salas-Provance, 2021; Minkos et al., 2017). CRP requires an interconnectedness created between healthcare and educational professionals and patients and students. Through such practice professionals enhance their cultural understanding and adjust their practice accordingly. Many professionals are guilty of “ethnic matching” in which wide assumptions are made about a particular group based on a singular experience (Kirmayer, 2012). A culturally responsive mindset encourages professionals to rethink their worldview and any stereotypes or assumptions they may have about a particular group of people. Many professionals have shifted in their terminology when discussing CRP. Historically, the term cultural competence was used, which implied that with competence come mastery of a skill. Unlike cultural competence, the construct of cultural responsiveness is viewed as an ongoing process, that one cannot simply master, and that requires continuous learning throughout the entirety of one’s practice (Hyter et al., 2021; Schulz et al., 2014)

A professional’s cultural responsiveness can be assessed through completing a checklist developed by ASHA. The “Cultural Competence Checklist: Personal Reflection,” (ASHA, 2010) asks SLPs to rate their practice regarding different realms that culture may impact service. Such realms include the culturally impact of child-rearing practices, life activities and perceptions, and communication. This checklist provides insights as to the many ways CR is implemented into

practice. ASHA (2010) also has provided indicators of culturally responsive practice, which include respecting the different cultures they encounter, accepting a client's decisions in therapy due to cultural preferences, and differentiating between a communication disorder and a communication difference. CRP is a method of understanding your own culture and considering the cultural implications of any interaction or service provided to a client. Being a culturally responsive practitioner means approaching every aspect of your work with a keen eye and modifying your practice for the clients' needs (Hopf et al., 2021).

CRP used within school can better equip teachers to advocate for their students and collaborate with other educators to provide better support for their educational needs (Vincent et al., 2011). CRP supports cultural equity among students and faculty and heightens awareness to potential achievement gaps related to diversity (Hopf et al., 202; Hyter & Salas-Provance, 2021; Schulz et al., 2014). Mindful implementation of CRP enhances our ability to advocate for individual students (Schulz et al., 2014). Without CRP among faculty and staff, school environments may be unwelcoming and negatively impact students' motivation to learn. Students may feel overlooked and not receive the best service structured for their specific needs (Oelke et al., 2013; Schulz et al., 2014). Other ways school based SLPs can foster cultural responsiveness in their daily practice is through simple steps, such as having diverse literature with a variety of characters or having toys and objects from an array of cultures (Derr & Services, 2018). Committing to cultural responsive practice allows for the educator to have a deeper understanding of a student's cultural background. It is clear that CRP needs to be at the forefront of every SLP's practice (ASHA, 2021). Incorporating CRP into SLPS' post-graduate continuing education can help increase both cultural knowledge and cultural awareness for staff members (Vincent et al., 2011). Cultural responsiveness can be implemented in a manner of

ways, and it takes time and practice to fully utilize. Nevertheless, the use of CRP is essential for student and professional well-being and the educational success of all students. (Hopf et al., 2021; Oelke et al., 2013; Schulz et al., 2014).

Interprofessional Practice in School Settings

Cultural responsive practice should be present throughout SLPs' interactions with client's, families, and other professionals, including other SLPs (Hyter & Salas-Provance, 2021). Often such interactions involve collaborations on interprofessional teams, which are commonly needed when serving students with special needs in schools (Ludwig & Kerins, 2018; Pfeiffer et al., 2019) Some have suggested that teams can support cultural responsiveness when working with students with diverse backgrounds (Hyter & Salas-Provance, 2021; Pfeiffer et al., 2019).

As a member of a school team, SLPs work closely alongside many other faculty and staff as they treat their clients. These teams may consist of special education teacher, general education teacher, occupational therapists, physical therapists, school psychologists, and administrative staff (Pfeiffer et al., 2019). Interprofessional practice can be described as multiple health workers from different backgrounds and disciplines coming together to provide comprehensive services by working with patients, their families, and communities to deliver the highest quality of care (WHO, 2010). IPP differs from an "interdisciplinary practice" which emphasizes a multitude of service providers who work together in assessment and development of intervention plans but are not continuing collaboration throughout the treatment of a client (Mu & Royeen, 2004). This method of interdisciplinary practice results in the professionals working isolated from one another, not actively utilizing team members as resources. The use of an interprofessional team, however, encourages professionals to communicate and collaborate on

the treatment of their client. Interprofessional practice, allows for practitioners to have a stronger connection with those they work with and the clients they serve (Oelke et al., 2013). Opening up channels of communications among professionals and clients creates the opportunity to learn from one another and of each other's cultures (Cahn, 2020; Oelke et al., 2013). This in turn results in better care of clients, as each professional is able to lend their expertise in the formation of goals and treatment plans collectively (Cahn, 2020; Oelke et al., 2013).

Many SLPs within the school find that working on IP teams comes with many challenges, such as scheduling conflicts, resistance from team members, and lack of administrative support (Pfeiffer et al., 2019). SLPs also closely interact with their client's family member and support groups, leading to additional difficulties in scheduling and communication. In order for IPP to truly succeed, team members need to all be directly involved and driven towards a common goal (Oelke et al., 2013; Pfeiffer et al., 2019). Even if one of these professionals has a smaller role to play on the team, their cooperation and dedication is necessary for the best care of the client at hand.

Despite the difficulties this model may pose, the literature shows that IPP is the most effective model for treating clients (Hopf et al., 2021) Collaborating and supporting the interprofessional team can lead to a greater success of therapy. IPP allows for a more holistic approach and aids in treating each client as an individual. IPP can help focus more care on individuals and leaves room to advocate on their behalf (Oelke et al., 2013). Overall, IPP goes beyond the individual level. IPP can help fight injustice and disparities in our healthcare (Hyter & Salas-Provance, 2021; Pfeiffer et al., 2019). Collaborating with one's IP team can ultimately improve education policies and student's educational outcomes (Pfeiffer et al., 2019). IP teams create learning opportunities and open up healthy conversations on cultural understanding, as

you interact with colleagues with diverse backgrounds (Hopf et al., 2021; Pfeiffer et al., 2019). Interprofessional collaboration fosters a culture of equity and equality in dire need within the schools (Hopf et al., 2021).

Culturally Responsive Practice within Interprofessional Teams

To be a truly ethical and responsible practitioner, cultural responsiveness and interprofessional practice need to be simultaneously addressed (Hopf et al., 2021). One cannot work on a professional team without utilizing culturally responsive practice, just as one cannot fully utilize cultural responsiveness without cooperating on a team. As school communities grow more diverse, these interprofessional teams may play an important role in supporting CRP not only at an individual student level, but also in aiding in the dismantling of systemic racism. Utilizing an interprofessional team can help lend one's attention to the structures that are limiting student success, and can ultimately allow one to see racism on a more personal level (Cahn, 2020). Sukhera and colleagues (2021) suggest that interprofessional teams may help mitigate and correct implicit bias from individuals. Working with other professionals and learning from their perspectives can allow for checks and balances to be put in place. While some may think that using a team of multiple professionals detracts from an individual's one-on-one treatment, IPP does not detract from health professionals' traditional focus on diagnosing and treating patients. IPP complements their skills by attending to the whole patient, allowing for an enduring and equitable outcome (Cahn, 2020).

Hopf et al (2021) provides a culturally responsive teamwork framework. This model identifies four domains of teamwork and how these areas can strengthen our cultural responsiveness. The four domains of practice consist of interpersonal, intrapersonal,

interprofessional, and intraprofessional. Intrapersonal practices look inwardly at one's perceptions and critical self-reflection. Interpersonal practice is how our relationship with clients and their families can be influenced by cultural bias. In this realm, SLPs should utilize clear communication with clients to prevent any communication breakdowns and empowering their clients' abilities to make decisions. Professionally, there are two realms of practice, interprofessional and intraprofessional. Interprofessional practice is what has been discussed previously and is an area where SLPs can learn about the cultural backgrounds and practices from other professionals they interact with other than SLPs (Hopf et al., 2021). Finally, intraprofessional practice is when SLPs utilize linguistically or culturally diverse SLPs as a resource for their practice. The Hopf and colleague model (2021) allows us to understand the importance of CRP in all aspects of professional interaction.

Additional support for examining CRP in collaborative practice is provided in the Interprofessional Education Collaborative's (IPEC; 2016) core interprofessional competencies related to values/ethics, roles/responsibilities, interprofessional communication, and team/teamwork. Many of these competencies reflect cultural responsiveness (CR) and are presented in Table 1. The inclusion of competencies related to CRP is further evidence of the importance of CR on interprofessional teams.

Table 1

IPEC Competencies addressing CRP

Core Competency Section	Competency #	Description
Values and Ethics	VE3	Embrace cultural diversity and individual differences of the patients and populations served.
	VE4	Respect the cultures, values, and responsibilities of other health professions.

Roles and Responsibilities	RR3	Engage diverse professionals who complement one's own professional expertise, to develop strategies to meet the specific needs of patients.
	RR9	Utilize each team members unique skillset to better service provided.
Collaborative Communication	CC7	Recognize how one's uniqueness contributes to effective communication, conflict resolution, and positive interprofessional relationships.
Team and Teamwork	TT4	Integrate the knowledge and experience of health and other professions to inform health and care decisions, while respecting patient values.

Adapted from "Core Competencies for Collaborative Practice" by Interprofessional Education Collaborative, 2016.

School settings emphasize the importance of cultural responsiveness to reduce discrimination towards students, to promote an atmosphere of acceptance, and to facilitate learning. Schools are promoting interprofessional team practices as there is evidence that collaboration increases best practice. Although the literature emphasizes the importance of both CRP and IPP, little is known about how SLPs working in the schools support their CRP through IPP.

Purpose and Research Questions

The purpose of this study was to examine school-based SLPs' perceptions of how interprofessional practice may foster cultural responsiveness practice. This study will help advance knowledge within the field of what is currently being implemented in schools to help advance culturally responsive practice in interprofessional teams. The research being conducted could aid in creating standards and training for SLPs working in school settings.

The following research questions were asked:

1. How are SLPs implementing culturally responsive practices in their school-based services?
2. Do interprofessional teams support the use of culturally responsive practice in their school services? If so, what is the nature of that support?

Methodology

Participants and Recruitment

Participants were recruited via email. Initially, a recruitment message (see Appendix A) was sent from the researchers to all special education directors within the Dallas-Fort Worth (DFW) metroplex. The DFW metroplex was selected as 73% of Texas public school enrollment consists of students of color (Texas Education Agency, 2021) and the investigators are from the metroplex and have connections with area SLPs. DFW is comprised of 11 counties (Collin, Dallas, Denton, Ellis, Hunt, Kaufman, Rockwall, Johnson, Parker, Tarrant, and Wise) (Federal Reserve Bank of Dallas, 2017). The special education directors were asked to forward the recruitment email to all elementary school speech-language pathologists they oversee. The recruitment email contained a link to a Qualtrics interest survey (see Appendix B), which SLPs were instructed to complete if they were interested in participating. The interest survey contained an informed consent statement (see Appendix A), and an opportunity to express interest in participation. If the participant expressed interest, they were asked to fill out contact information, such as email address and phone number, and to select times they preferred to have the interview conducted. As participants were identified through their responses to the survey, Zoom meetings were scheduled and completed. The interviews consisted of asking open-ended questions (see

Appendix C) to explore how SLPs are using CRPs and how working as a member of an interprofessional team supports their CRP.

Due to an initial low response rate, additional recruitment strategies were implemented. Specifically, snowball recruitment was utilized by emailing SLPs in area schools who were known by the faculty researcher. Similar to the initial recruitment process, SLPs were asked to complete the interest survey if they would like to participate. They were also asked to forward the recruitment email to any colleagues of their own. A social media post to the TCU alumni group containing the recruitment message and interest survey also was published. These additional recruitment methods resulted in nine SLPs participating in the study.

Data Collection

A qualitative approach was used to collect reports describing CRP and CRP in interprofessional teams. In-depth interviews were completed using a saturation approach. This methodology allowed investigators to determine when there was adequate data gathered from participants, to develop a robust and valid understanding of CRP and CRP on IP teams (Hennik et al., 2017). Code saturation is the point at which no additional information is found and codes begin to stabilize throughout the sample. The saturation approach has proven that a small population size utilized for in-depth interviews will typically result in sufficient and comprehensive data. Common themes will appear during qualitative research quickly, thus the population size can be smaller than a typical quantitative research (Hennik et al., 2017).

Interviews consisted of asking open-ended questions and follow-up probes based on responses (see Appendix C). Definitions of interprofessional practice and interdisciplinary practice (see Appendix F) were shared during the interview to aid in discussions of teamwork.

The interviews were conducted via Zoom and video recorded with the participant's consent. The interviews ranged from 45-60 minutes in length. Automated transcription of each interview was collected via Zoom's software and additional review of all Zoom transcripts ensured accuracy and completeness of the conversations. The transcripts were de-identified and stored within a password protected folder for later data analysis.

Once the interview was completed, participants were sent an email with the link to a Qualtrics post-interview survey (see Appendix D). They were asked to complete the survey which obtained demographic information, such as their age and racial identity, and determined if they had received prior education on the topics discussed during the interview.

Data Analysis

A conventional content analysis was completed using an inductive approach to develop themes (Hsieh & Shannon, 2005; Kondracki et al., 2002). Microsoft Excel was used to facilitate the thematic analysis. Following Nowell and colleagues' (2017) steps for maintaining qualitative rigor, the analysis process included peer debriefing, researcher (student and supervising faculty member) triangulation, reflexive journaling, use of a coding framework, maintaining an audit trail of code generation, and documentation of all team meetings and peer debriefings. Our team used the constant comparison method (Glaser, 1965) to perform our thematic analysis. Important concepts from the interview transcription were coded and compared with other interviewees' answers after the conclusion of each interview. This method allowed recurring themes to appear within the data. Codes were refined further as each new interview was conducted and researchers collaborated to narrow down the themes and sub-themes.

Results

Nine area SLPs working in a school setting participated in the study. All of the participants were women and mostly Caucasian, between the ages of 28 and 63 years (see Table 2). All of the clinicians reported that they had previous training, education, or participated on a committee on topics related to culturally responsive practice. The majority of participants worked in a public elementary school setting, with one respondent working in a charter elementary school. Participants were all ASHA certified, licensed SLPs providing assessment and treatment or supervising other SLPs.

Table 2

Demographics of Survey Respondents

Characteristic		N	%
Gender	Female	9	100
	Males	0	0.0
Race	White	7	77.7
	Hispanic	2	22.2
Prior Education on CRP	Yes	9	100
	No	0	0.0
	Mean	Median	Range
Age	45.78	48	35

Caseload Diversity

Participants described their caseload diversity by discussing students' racial background (see Table 3). In addition, some SLPs discussed student diversity in terms of socio-economic factors and language diversity. It was notable that two participants stated their school district lacks diversity, so the children they serve are a more homogenous group.

Table 3

When thinking about your caseload, could you describe the cultural, racial, and ethnic backgrounds of you students?

Themes	Exemplifying Participant Response
Caseload Diversity Defined	<p>“Our students are predominantly Hispanic-Latino, about 70% of our population. Followed by black, followed by Asian, followed by White. So white is actually the minority in our district.”</p>
Lack of Caseload Diversity	<p>“I would the student makeup is 85 to 90% free and reduced lunch.”</p> <p>“I don't have a lot of diversity in my case load like I said..... I mean it sounds terrible but it's not terribly diverse here”</p>

Culturally Responsive Practices

Several questions were posed inquiring about culturally responsiveness. SLPs were asked to define cultural responsiveness, as well as describe their current CRP. When participants were asked to elaborate on what enhances their CRP, two major themes emerged – descriptions of culturally responsive strategies and responses reflecting culturally responsive mindsets (see Table 4). The strategies implemented by our participants included connecting with parents, learning from past mistakes, using interpreters, and using staff and parents as an educational resource. Respondents also reflected a culturally responsive mindset in which they stressed a

daily importance of CRP, accepting others, and leading others in CRP. Table 4 also presents the major response themes of the participants when asked to provide an example of a time they treated a student whose culture differed from their own. These themes included identifying specific considerations used for assessment and treatment, including difference versus disorder, acknowledging culture and diversity, family dynamics, and language differences. Many SLPs remarked that being aware of the importance of differentiating a linguistic difference and an actual speech or language disorder when treating culturally and linguistically diverse students. This knowledge ensures that they are not over-identifying children who speak languages other than English.

Table 4

Describe what the term “culturally responsive” means to you in your practice. What helps you to be culturally responsive? Tell me about an experience with a recent student that had a different cultural background than yourself. How did you approach therapy with the student?

Themes and Sub-themes	Exemplifying Participant Response
Culturally Responsive Practices	
Defining Cultural Responsiveness	“It means that we really take the time to look at the influence of culture, and how that affects our communication.”
Shared Identity	“I think I was more culturally sensitive because, being a minority as a Mexican you identify already just with that one with other minorities.”
Culturally Responsive Strategies	
Commitment to Connecting with Parents	“So, I was able to meet with a mom. I had an interpreter, and I wanted to know what she wanted for her child. Like what her greatest needs were, what she really wanted to see her accomplish, and I told her I would get those incorporated into her communication goals”

Learning from Mistakes	“So, I've made a lot of mistakes. I have done things that were very not culturally appropriate, not culturally sensitive, because I was learning but I have to tap into all of that. I do not want to offend anyone”
Use of Interpreters	“If I do have students who are coming from a home in which I believe there's a language spoken instead of English for them. I at least offer them the opportunity to have an interpreter present that's always important. So, they understand what you're telling them not just bits and pieces”
Staff and Parents as a Resource	“It's not just an interpreter I can also ask them questions about culture and other things related.”
	“This child was doing a lot of things because that's what he's been taught at home, but it looked different at school. It looked a lot different and then it wasn't until we explored the home and the family, and the culture that we really could figure out this kid did not have autism. So that really played a big role. If we had not interviewed the parents and not looked at that, we might have interpreted some of his behaviors a little bit differently”
Culturally Responsive Mindset	“We have compendiums of data where we have written up for specific cultures, and we have kind of little blurbs and examples from testing that's been done previously so people can take that and individualize that to their child that they're evaluating”
Daily Importance	
Acceptance of Others	“It impacts me every day. I don't have to think about it as much because I've been doing it so long. But there's not a day that goes by that I don't have to consider something”
Leading Others	“You have to accept culture for its beauty and the best things it can bring to the table.”

High Self- Appraisal	“I was pushing to include CLD things on the CF rating scale because there are none. And I got a lot of pushbacks, like “We don't need it there’s no reason for it.” “CFs don't need to know that” [...] But, we finally got something on there. I'm not satisfied with it. But at least it's a step.”
Considerations for Assessment and Treatment	
Difference vs. Disorder	“I give [my district] just an A plus in what we do in providing that care for each child”
	“So this little boy who I thought had speech delays it turns out it was due to him being raised in a French family. So knowing that a difference and disorder are two different things ended up turning around my speech evaluation.”
Acknowledging Culture and Diversity	“We have to be knowledgeable about their language for pragmatic and social communication differences. because there's a lot of things that we expect, as you know, here in America, that are not expected of children in other cultures. And so if we're not considering those aspects and we're trying to fit them into our box of what we feel like is appropriate, then we're really doing a disservice to the student”
Family Dynamics	“With my kids who do speak Spanish, they enter from a culture that is not mainstream American culture. I'm making sure that I am providing them with materials that are reflections of who they are. That something is not maybe just a full of children that they can't relate to visually. Whether that's because of like skin color or like ability.”
Language Differences	“So I was reading a book a couple of weeks ago with a student. And in the book there is reference to a little girl [...] and she wishes that she could hug her father again, because he's not with her. And I know that a lot of my children come from broken homes or homes, where parents, for various reasons, are not able to be with them, and that wasn't my experience growing up I had both my parents. And so one of my students stopped,

and she said, is her dad in Honduras too? [...] And I said let's step back and like talk about this because it's something that you obviously made a connection to.”

“He's bilingual and we're all English-speaking people. But with sign language, and the visuals sometimes you have to use in 2 languages, because he's he might respond better.”

“Whenever we're evaluating a child, saying, okay, what's their background? So we can say, well, what language do they speak? So even if they're Spanish speaking, then I have to see what kind? What Spanish are they? Porto Rican Spanish, are they Cuban Spanish? Is it Mexican, Spanish? Is it Tahano Spanish? Because in that you know, the dialect is different. The vocabulary semantics is different, the accent is different”

Respondents had a wide range of answers when asked if there were any challenges to implementing culturally responsive practice. Most of these challenges were caused by external factors such as assessment challenges, parent challenges, limited resources, a lack of caseload diversity, and the ignorance of others. However, one sub-theme reflected high self-appraisal of current CRP.

Table 5

Are there any barriers that make it more difficult to being culturally responsive at your school?

Themes and Sub-themes	Example Quote
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Challenges to Culturally Responsive Practice

Assessment Challenges	“I don't have anything great like that for kids who are bilingual. so sometimes I will give them the SELF evaluation and it is not necessarily normed to account for Spanish influenced English.”
Parent Challenges	“We have a lot of parents who work nights and they sleep while their kids are at school, and they're just doing the best that they can to keep their kids fed, and housed, and so they don't really have time to sit down and talk to us on the phone”
Limited Resource Availability	<p>“I mean there's just not as many books with people of color as main characters”</p> <p>“Pictures and photos in the past you would have to search a little harder for things that were more inclusive.”</p>
Ignorance of Others	“I've had to almost control some anger at times dealing with other professionals who just like ‘Oh, there's no need for this. There's no need for this’”

Collaborative Practice

When participants were asked about their team involvement, the majority of the SLPs noted that they were working as a member of interdisciplinary teams in contrast to interprofessional teams. Although they work independently mostly and only seek out team members' assistance during an occasional interaction, most SLPs saw the impact and importance of interprofessional practice. Members of their collaborative interprofessional and interdisciplinary teams were reported to include other professionals within the schools and parents of clients. Other professionals included occupational therapists, physical therapists,

special education teachers, general education teachers, music therapists, and administrators. The SLPs who reported being members of an interprofessional teams elaborated on how they work together and support one another's goals, yet have difficulties with implementation some of the time. Another theme that appeared in the responses to this question was interprofessional practice in action. This theme was divided into sub-themes of how the team collaborates, supporting other's goals, and team members as a resource. Participants did note that some barriers are in place for the implementation of CRP on teams, which mainly consisted of time constraints and a lack of interest in working with others.

Table 6

Do you ever work on interprofessional team when treating your students? Or would you say you work with an interdisciplinary team? Please describe those teams.

Themes and Sub-themes	Example Quote
Collaborative Practice	
Interprofessional vs. Interdisciplinary	<p>“So while we each have determined the goal for that student there's some goals that really do overlap where we so it's interprofessional and interdisciplinary.”</p>
Evaluation of Interprofessional Practice	<p>“Most of the interdisciplinary is just a lot of resources consulting, getting information, that kind of stuff, but not really all working together for something.”</p>
Professional Collaboration	<p>“I think the goal is to do more of the interprofessional. Yeah, because you know, like try to avoid everyone working independent because you want to all work together for the good of one child.”</p> <p>“I work with the educational diagnostician, a school psychologist, the classroom teacher, other special ed providers, such as co-teachers or resource room teachers and administration, and even classroom aids depending on the class.”</p>

Parent Collaboration	“[Parents] are the team actually because we are there to serve them. And sometimes I learn so much from those parents just sitting back and listening like what really bothers them with their child's speech and language disorder. What bothers us may not be that important to them.”
Interprofessional Practice in Action	
How Teams Collaborate	“I’ve provided a core word board, and I actually put it up in the OT’s room and showed her how to use it, and how to support that communication, and how it can be used for both receptive and expressive language support to help her communicate with her student to get through their lessons.”
Supporting Other’s Goals	“Sometimes we will consult with each other, and I need to just hear their knowledge and background and experience. Give me some information, but we're not working together. on something. Occasionally you'll have people when there's a task to be done, and we're all going to work together. On the task, but we divide the task up and work separately from our individual perspectives.”
Team members as a Resource	“So then I look at my scores, and I see where the delay was, too, and I can maybe put a goal in for sequencing. So then I’ll add a goal for sequencing so i'm working together on my own goals and the teacher's goals. So that he or she can succeed on one of their goals, and also on his speech goal.”
	“I go to the teacher and I ask how's the student doing in class, or are you able to understand him? Because they can hear him or her communicating in class. They see this student every day versus me. I don't know how they're doing in the classroom? Are they socializing with other children on the playground in classroom? How much are they being understood?”
Barriers to Interprofessional Practice	

“Time constraints for school-based service providers, we are always stretched thin.”

“There are some places where we don’t want to work together. So you kind of have to do your own things, and just do the best you can.”

Culturally Responsive Practices on Teams

When collaborating with other team members regularly, SLPs noted that their culturally responsive practice felt enhanced. Having other professionals to use as a resource was fundamental in their development and consciousness of CRP. Other SLPs felt that they held responsibility for educating other team members on the importance of CRP, resulting in the growth of CRP within the team, and thus enhancing service throughout the school. As seen in Table 7, when participants were asked to expand on what helps them to be culturally responsive on a team, SLPs noted that additional supports are in place within the school consisting of diverse makeup of team members and district support. The diverse makeup of other members of the team aids in teaching the team about sensitivities and the importance of a shared identity. Other supports from the district consisted of education and special committees centered on topics of diversity and inclusion. SLPs also discussed their role as CRP leaders, describing how they educated other professionals about issues related to cultural and linguistic diversity.

Table 7

Is your culturally responsive practice enhanced when you are collaborating on an interprofessional team? If yes, how? Tell me about a recent interprofessional experience when treating a student whose cultural background differs from yours. What helps you to be culturally responsive on an interprofessional team?

Themes and Sub-themes	Example Quote
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Supports for CRP on Teams

SLP Role as a Leader

“I’ve been very lucky to work with a lot of people who understand the important of honoring these different cultures. And I’ll say Fort Worth ISD is at the top of the list on that one. I would say most of the professionals I worked with over there were very, very receptive to you know my input, and I was receptive to theirs. We all just worked really well together in that respect. Most of the interdisciplinary is just a lot of resources consulting, getting information, that kind of stuff, but not really all working together for something.”

Long Term Team

“And so one thing that we have to do as speech language pathologists regularly is, we really have to take the time to educate our parents and our teachers and administrators about how the score is one piece of the puzzle. Why, that scores not really representative of that student, because their culture is different. So there's a lot of responsibility. in terms of education”

Diversity of the Team

“But we've been a team for 4 years with the same members, and it's just kind of fluid and seamless, and we it's just such as a natural integrated part of our of our approach to things.”

District Support

“Our students are diverse, but it's really cool, because our staff is also very diverse. So we have a lot of teachers who share the same cultural background as their students, and are able to make that connection not only with the students, but also with the families. In a different way that I can, as a white woman.”

“I will say, our district has been doing a lot with racial education. We have a lot of committees in our department, and we have a

racial equity / diversity committee. Our district has a racial equity diversity department so we've been doing a lot about on that, and I think that that's helped a lot here.”

Participants remarked that many barriers are in place currently, preventing CRP from always happening within a team setting. Many of these barriers stem from the team members' cultural bias affecting service or leading to a lack of interest to implement CRP. Another common barrier SLPs noted was that the field of speech pathology is simply not diverse enough for true CRP to take place.

Table 8

Are there any barriers that make it more difficult to being culturally responsive on a team?

Themes and Sub-themes	Example Quote
Barriers to CR within IPP	
Cultural Viewpoints Affecting Assessment	<p>“You do get pushback sometimes, because there will be times when we say this is actually not a key communication. disorder. This is a difference, and they say, No, no; we think they have a problem. They need to qualify. and so there can be that pushback. And it is a learned skill to be able to navigate those conversations. And to be able to confidently make your case and your argument in the face of that pressure.”</p> <p>“I would say this with even with some teachers that are of Hispanic descent. It can be frustrating if I'm trying to get information from the teacher about a certain student, and I think they're coming off with certain prejudices or certain beliefs.”</p>
Wish for Improvement	<p>“It would just be nice to see more diversity that we generally don't see as much diversity in those</p>

CRP Dependent upon Individuals

roles. So that would be nice to understand and have their help to a certain extent.”

“If everyone is not open to that, you kind of have like these closed circles of decision. Members who aren't really aware, maybe, that they're not being accepting or responsive to culture, it can make things more difficult”

Discussion

This research was designed to better understand how school-based SLPs implement culturally responsive practice and how collaborative practice may support culturally responsive practice. Based on participants' responses, culturally responsive practice appears to be integrated into these SLPs' daily practice. Respondents reported monitoring and adjusting their service to better acknowledge and account for cultural differences. The majority of SLPs reported working with a diverse population of students and through this they are able to integrate CRP in daily services. Two respondents reported that they did not serve diverse groups of students. Such a view could limit their growth in CRP, as they are not actively adjusting service due to individual student racial and cultural differences. The respondents reflected their commitment to culturally responsive practice through their mindset, strategies, and specific considerations used throughout assessment and treatment. SLPs using interpreters both as a translator and as a resource for cultural understanding was consistent with others' reports of working with interpreters and supported being mindful and acknowledging others' cultures (Derr & Services, 2018). The SLPs expressed interest in improving their CRP through their multiple reports of learning from past mistakes. This strategy suggested that cultural responsiveness is an ongoing process where one is constantly realigning their beliefs and perceptions of others. A few SLPs had reported a high

self-appraisal in their CRP, feeling as though their school or district was doing a great job at culturally responsive practice. This was an interesting response and could be seen as a limitation to the development and ongoing improvement of CRP. SLPs who claim a high appraisal of their CRP skills may be prone to more mistakes and a lack of awareness of culture and how it affects service in the long run. The reported CRP challenges included conflict with parents and staff, ignorance of others about CRP, and limited resources for assessment and treatment of diverse populations. Additional responses suggested that the SLPs were working to address these challenges by educating others and assuming leadership roles as team members.

Based on the data collected, it seems that culturally responsive practices are enhanced by working on either a interprofessional or interdisciplinary team. The SLPs reported that their ability to collaborate with other professionals resulted in learning from team members' expertise and, in some cases, team members diverse cultural backgrounds. While CRP may be enhanced through team involvement, this practice is not met without challenges as well. Differing mindsets and pushback from team members can reportedly hinder an SLP's ability to advocate and integrate the use of CRP within the team.

Limitations

As is often the case in qualitative studies, participants' candor and honesty are crucial to increasing valid findings. Due to the sensitive nature of the topic, social bias may have influenced the participants' responses. That is, the topics of cultural sensitivities and team collaboration may have influenced participants to respond in a certain way. They may have held implicit biases and answered in a more positive manner than is truly reflective of their opinions and daily practice. In addition, five of the nine of the participants were alumni from Texas

Christian University (TCU). Participants noted that during their time at TCU, they took courses emphasizing the importance of interprofessional practice and culturally responsive practice. As a result, this group of participants may not truly be representative of the majority of SLPs who work in the schools. For future replications it would be ideal to gather as much data as possible from a larger set of participants with a more diverse background to ensure that outcomes could be generalized to other SLPs.

Future Implications

This study highlighted the ways school-based SLPs utilize culturally responsive practices on an individual level and on a team. Our participants each had some strategies they were using to practice cultural responsiveness within their daily practice. The students being served within the schools will only increase in their diversity in the years to come. With that in mind, improvements need to be made within the field of speech-language pathology. The findings of this project may assist in the improvement of current service. Recognizing the challenges that school-based SLPs are facing, can allow for change to be made. An increase in educating SLPs on the concepts of interprofessional practice and culturally responsive practice may be assisted with the research from this project. Both pre-professional education and post-graduate training could be increased to help improve SLP's knowledge and aid in their services. These educational experiences could highlight culturally responsive strategies and how to implement them alone or on a team. SLPs would learn strategies such as using interpreters, communicating with family members, using other staff members as a resource, and learning from mistakes. This kind of education could focus on how to overcome challenges SLPs may face while implementing CRP, such as pushback from team members and different cultural backgrounds confounding assessment. SLPs could learn how to combat these challenges and learn adaptive strategies to

better improve CRP within their setting. Finally, this research could be expanded upon and lead to further findings on the topic of culturally responsive practices and interprofessional practice. Future researchers may be able to conduct quantitative research and find tools that operationally define and measure school-based SLPs' CRP. These concepts could be applied to other health professions to better assess how CRP and IPP are being implemented within daily practice.

Overall, this project has shown that many SLPs are currently doing their part to achieve the best possible service for the students they serve. CRP appears to be enhanced through cultural diversity considerations during assessment and treatment, a culturally responsive mindset, culturally responsive strategies, and the implementation of CRP within a team serving students. Yet, the lack of resources and limited education to other staff and team members on the importance of CRP currently creates challenges for SLPs effective implementation of CRP. If we can combat these issues, CRP can become an easier, more accessible practice for all SLPs. the field of speech-language pathology still has strides to make in the improvement of CRP and IPP.

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Appendix A

Summary of Informed Consent

Overview: You are invited to participate in a research study. In order to participate, you must be a) an ASHA certified Speech-Language Pathologist (CCC-SLP) b) working in an elementary public-school c) within the Dallas-Fort-Worth (DFW) metroplex and d) 18 years of age or older.

Study Details: You are asked to complete a 3-minute interest survey to let us know that you are interested in participating in the study. If you are interested and provide your email address in the survey, you will be contacted via email by the project investigator(s) to arrange a time for a Zoom conversation. The purpose of this conversation is to understand how school-based SLPs are using culturally responsive practices individually and while part of a team. The conversation should last less than 60 minutes and focuses on your daily practice. After the Zoom conversation, you will be asked to complete a 3-4-minute survey with 4 brief questions providing information about your race, age and training. This survey is completely voluntary and you may choose to not complete it without any penalties.

Participants: You are being asked to take part because you are an ASHA certified SLP who works in a public elementary school within the Dallas-Fort-Worth metroplex. We want to explore SLPs' perceptions of culturally responsive practice and the impact of interprofessional teamwork in supporting culturally responsive practice. You will be one of 20 participants in this study.

Voluntary Participation: Your participation is voluntary. You do not have to participate and may stop your participation at any time by not answering questions on the survey or during the Zoom conversation. You may ask to discontinue the conversation at any time. Your participation or withdrawal will not affect your current or future employment status.

Confidentiality: The brief interest survey will collect your name, phone number, and email address. This information will be necessary to set up the Zoom meeting and will be saved to a password protected Box folder. Only the researchers of this project will have access to this information. The Zoom conversation will be recorded and transcribed for data analysis. Your response in the surveys and the Zoom conversation will be stored in a password protected Box folder that only the researchers of this study will have access to. All project data will be destroyed 3 years after the completion of this project in May 2025.

What is the purpose of the research?

The purpose of this project is to increase our understanding of how school-based speech-language pathologists are implementing cultural responsiveness in their daily practice and the potential impact of interprofessional teamwork in supporting culturally responsive practice.

What is my involvement for participating in this study?

You will complete a brief survey which will ask you of your interest in participating in an interview on topics covering culturally responsive practice and interprofessional practice. If you select that you are not interested, the survey will end there and you will not be contacted further. If you select that you are interested in participating, you will be prompted to fill out contact information including your email address and phone number. You will then select your available times to participate in an interview which will last less than 60 minutes. This interest survey will take you about 3 minutes to complete.

If you express an interest to participate, a project investigator will contact you to find a mutually agreeable time for the Zoom conversation. This conversation includes 10 questions centered around your experience as an SLP in a school setting. The interview will likely last less than 60 minutes, will be recorded, and your answers will be transcribed for data analysis. The only people who will have access to these recordings will be the authors of this study. Recordings will be held in a password protected Box folder, and will be destroyed 3 years after the completion of this project in May 2025. Once the conversation is completed you will be asked to complete a brief 3-4 minute follow-up survey to collect information about your age, race, and training. As with all parts of this study, this post-conversation survey is completely voluntary and you may choose not to complete it without penalty to your job or other areas.

Are there any alternatives and can I withdraw?

You do not have to participate in this research study.

You should only take part in this study if you want to volunteer. You should not feel that there is any pressure to take part in the study. You are free to participate in this research or withdraw at any time. You may stop your participation at any time by not answering questions on the surveys or during the Zoom conversation. You may ask to discontinue the conversation at any time. Your participation or withdrawal will not affect your current or future employment status. Your employer will not know whether you participated.

What are the risks for participating in this study and how will they be minimized?

We don't believe there are any risks from participating in this research that are different from risk that you encounter in everyday life. As with any interview, due to personal reflection, answering questions may affect your feelings. You are free to not answer any question during the Zoom conversation and on the survey. Also, you may quit the survey and/or ask that the Zoom conversation be ended at any time without penalty.

What are the benefits of participating in this study?

You might benefit from being in this study by gaining a greater understanding about culturally responsive practices and interprofessional practice through reflecting back on current and past client interactions.

Will I be compensated for participating in this study?

No compensation will be provided for participation in this study.

What are my costs to participate in the study?

There will be no additional costs to you as a result of being in this study.

How will my confidentiality be protected?

The brief interest survey will collect your name, phone number, and email address. This information will be necessary to set up the Zoom meeting and will be saved to a password protected Box folder. Only the researchers of this project will have access to this information. The Zoom conversation will be recorded and transcribed for data analysis. These transcripts will be de-identified and saved with no identifying information. Your voluntary responses in the surveys and the Zoom conversation will be stored in a password protected Box folder that only the researchers of this study will have access to. All project data will be destroyed 3 years after the completion of this project.

Every effort will be made to limit the use and disclosure of your personal information, including research study records, to people who have a need to review this information. We cannot promise complete secrecy. Your records may be reviewed by authorized University personnel or other individuals who will be bound by the same provisions of confidentiality

What will happen to the information collected about me after the study is over?

We will not keep your research data to use for future research or other purpose. Data will be destroyed 3 years after completion of the project in May 2025.

Who should I contact if I have questions regarding the study or concerns regarding my rights as a study participant?

If you have any questions about this study or have a research-related problem, you may contact Audrey Stoltz (audrey.stoltz@tcu.edu) or Dr. Jennifer Watson (j.watson@tcu.edu). If you have any questions about your rights or are not satisfied with any part of the survey you may anonymously call the Office of Research at (817) 257-7104. You may also contact Dr. Dru Riddle, Chair, TCU Institutional Review Board, (817) 257-6811, d.riddle@tcu.edu; or Dr. Floyd Wormley, Associate Provost of Research, research@tcu.edu .

By clicking the arrow at the bottom of the screen to move on to the next page, you are indicating that you have read and understood the consent form and agree to participate in the research study. Thank you for your time and participation.

Appendix B

Interest Survey

You have been selected to participate in this research study because you are an ASHA- certified speech-language pathologist (SLP) working in an elementary public-school setting within the Dallas-Fort-Worth metroplex.

The purpose of this study is to examine school-based SLPs' perceptions of culturally responsive practices in the schools and how interprofessional practice may foster culturally responsiveness practice. If you indicate in this brief survey (less than 3 minutes) that you are interested in participating in this study, you will be contacted by the investigators to schedule a Zoom conversation with the project investigator(s) at a time that is convenient to you. During the Zoom conversation (less than 60 minutes) you will answer questions about your practice, including practice in teams. Following the Zoom conversation, you will be asked to voluntarily complete a brief demographic survey.

This study will provide you the opportunity to reflect on your own experiences and your participation will help advance knowledge within the field about current culturally responsive practices, including in teams, in the schools. As with any reflection about one's practice, your participation may trigger both positive and negative feelings. There are no other risks associated with participation in this study.

This interest survey will collect your name, phone number, and email address. This information will be necessary to set up the Zoom meeting and will be saved to a password protected Box folder. Only the researchers of this project will have access to this information. The Zoom conversation will be recorded and transcribed for data analysis. Your response in the surveys and the Zoom conversation will be stored in a password protected Box folder that only the researchers of this study will have access to. All project data will be destroyed 3 years after the completion of this project.

Decision to participate or not will not affect your employment status now or in the future. Participation in this study is completely voluntary and participants may withdraw at any time without penalty. You may withdraw by not answering questions on the survey or during the conversation without further explanation or penalty. If a participant chooses to withdraw from the Zoom conversation, they can opt to not answer the questions or discontinue the conversation whenever requested. Whether or not an individual started or completed the survey or the Zoom conversation will not be shared with anyone.

If you have any questions regarding this project, you may contact Audrey Stoltz (audrey.stoltz@tcu.edu) or Dr. Jennifer Watson (j.watson@tcu.edu). You also may contact Dr. Dru Riddle, Chair, TCU Institutional Review Board, (817) 257-6811, d.riddle@tcu.edu; or Dr. Floyd Wormley, Associate Provost of Research, research@tcu.edu

By clicking the arrow at the bottom of the screen to move on to the next page you are indicating that you have read and understood this consent form and agree to participate in the research study.

Thank you for your time and interest!

1. Are you interested in participating in this study?

Yes

No

2. If yes, please provide your email address and phone number below:

3. Please select your preferred time to schedule an interview:

a. Weekends

b. After School

c. Early Mornings

d. Other: _____

Appendix C

Interview Guide

As you may recall from our previous communications, the purpose of this project is to better understand school-based SLPs' perceptions of culturally responsive practice and the ways in which a team may foster the develop of culturally responsive practices. All questions will be open-ended and you are free to elaborate as much or as little as you would like. Also, you are free to skip any question and to end the interview at any time. Just to remind you, our Zoom conversation will likely be less than 60 minutes, will be recorded, transcribed, and retained (for 3 years) without identifying information.

1. Please describe your work in your school. Who do you see on your caseload? How long have you worked in the schools?
2. When thinking about your caseload, could you describe the cultural, racial and ethnic backgrounds of your students?
3. In our profession, there are lots of discussion, including more recent conversations, about the importance of being “culturally responsive” when providing services to children with communication disorders. Describe what the term “culturally responsive” means to you in your practice.
 - a. How are you culturally responsive to your students?
 - b. What helps you to be culturally responsive? Are there any barriers that make it more difficult to be culturally responsive at your school?
4. Tell me about an experience with a recent student that had a different cultural background than yourself. How did you approach therapy with the student? With the family? Did this interaction differ/look similar to your interactions with students with whom you share a cultural background?
5. We are now going to focus on your role as a team member. An interprofessional team is defined as a group of professionals working collectively and collaboratively to a set goal

- for a specific client. Interprofessional teams are thought to be different from interdisciplinary teams, which may have independent goals and less collaboration with other professionals working with the same client. Do you ever work on interprofessional teams when treating your students? Or would you say you work with an interdisciplinary team? Please describe those teams. How do you work together?
- a. How frequently do you meet as a team?
 - b. Do you have common goals for the student?
6. Is your culturally responsive practice enhanced when you are collaborating on an interprofessional team? If yes, how?
- a. What helps you to be culturally responsive on an interprofessional team? Are there any barriers that make it more difficult to be culturally responsive on a team?
 - b. Does your culturally responsive practice on interdisciplinary teams differ from your practice when on interprofessional teams?
7. Tell me about a recent interprofessional experience when treating a student whose cultural background differs from yours. Was the student's cultural background addressed by the team? How?
- a. [If they report working on interdisciplinary and not interprofessional teams, ask the same question about interdisciplinary teams.]
8. Do you have any other comments about culturally responsive practices in your school?
- 9.
10. Do you have any other comments about culturally responsive practices when on a interprofessional team? [or interdisciplinary team]

Appendix D

Post-Interview Survey

Thank you for your participation in today's conversation. Your commitment to improving our services in the field of speech-language pathology is greatly appreciated.

This voluntary, 4-question survey asks you about your identity and training. This survey should take about 3-4 minutes to complete. As previously stated, your responses will be stored in a password protected Box folder that only the researchers of this study will have access to. All identifying information will be destroyed 3 years after the completion of this project in May of 2025. Your participation in this survey is completely voluntary and may withdraw at any time without penalty. You can opt to not answer any question and whether you started or completed the interview will not be shared with anyone.

1. How would you define your racial identity?

2. Do you identify with any other underrepresented group? (e.g., LGBTQ+ community, nondominant religious groups)

Yes

No

If yes, please elaborate.

3. What is your age in years?

4. Have you had previous training, education, or participated on a committee on topics related to culturally responsive practice?

Yes (If so, please briefly describe your training and experiences related to culturally responsive practice.)

No

Appendix E

Recruitment Email Message

Dear Special Education Director:

My name is Audrey Stoltz and I am an undergraduate speech-language pathology student at Texas Christian University completing an honors research project under the supervision of Dr. Jennifer Watson. The purpose of this study is to examine elementary school-based SLPs' perceptions of culturally responsive practice and how interprofessional teamwork may foster culturally responsive practice. ***I am contacting you to ask that you forward this email to all elementary school SLPs under your supervision.***

As indicated in the message below, SLPs are asked to complete a 3-minute interest survey found at the link provided. If they indicate an interest in participating in the study, the SLP will be contacted to participate in a Zoom conversation with a project investigator(s) which will last less than 60 minutes. Following the conversation, the SLP may voluntarily complete a 3-4 minute survey providing age, race, and training.

This study has been approved by the Texas Christian University Institutional Review Board

(#). Participation in this project is completely voluntary and participation and responses will not be shared with anyone. No participant identifying information will be retained post-conversation.

Your time and willingness to share this message with your district's SLPs participate are greatly appreciated and ultimately will help us improve the quality of services provided to children.

Feel free to contact me with any questions you may have at audrey.stoltz@tcu.edu .

Thank you for your help!

Audrey Stoltz

Speech-Language Pathology Undergraduate Student

Texas Christian University

Recruitment Message:

Dear Speech-Language Pathologist:

We are conducting a research study examining school-based SLPs implementation of culturally responsive practice and the impact of interprofessional teams in supporting cultural responsive practice. I am emailing to ask if you to complete a brief interest 3-minute survey, indicating that you are willing to participate. If you express an interest in participating in the survey, we will contact you at the email address you provide to schedule a time to participate in a Zoom conversation (not lasting more than 60 minutes) with the project investigator(s) at a time that you choose. Following the conversation, you may voluntarily complete a 3-4 minute survey providing age, race, and training. Decision to participate or not will not affect your employment status now or in the future. Participation in this study is completely voluntary and participants may withdraw at any time without penalty. Whether or not you started or completed the interview will not be shared with anyone.

The interest survey will collect identifying information such as your name, phone number, and email address. All identifying information will be saved to a password protected Box folder that only project investigators have access to. The Zoom conversation will be recorded, transcribed and retained without identifying information. All identifying information in the interest survey and de-identified conversation videos and transcripts will be destroyed 3 years after the completion of this project in May of 2025.

If you are interested in participating, please complete the brief interest survey by clicking the link [insert link] or type this address in your browser [insert link address]

There will be no compensation for participation in this study. Beyond the reactions that often accompany conversations describing one's own behaviors, there are no known risks involved in this research.

If you have any questions, please do not hesitate to contact me (audrey.stoltz@tcu.edu) or Dr. Jennifer Watson (j.watson@tcu.edu).

Your participation in this study will help support the quality of services for all children we serve. Thank you for your time and interest.

Audrey Stoltz

Speech-Language Pathology Undergraduate Student

Texas Christian University

Appendix F

Types of Teams

1. Interprofessional Team

- Members work together and collaborate to create goals for a specific client.
- Collectively working toward the same goal.

2. Interdisciplinary Team

- Members typically set individual goals for a client.
- Involves less overlap and collaboration