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**Tina McMeekin** has recently graduated from the Human Communication Science (Honours) program at Curtin University of Technology in Western Australia. She is currently employed at Sonic Hearing.

Correspondence to:

**Tina McMeekin**

308 Walcott St, North Perth WA 6006

phone: (08) 9271 7711; fax: (08) 9271 9044

mobile: 0422 289 206

email: [tina.bunko@student.curtin.edu.au](mailto:tina.bunko@student.curtin.edu.au)

## WEBWORDS 24

### Looking back

Caroline Bowen

**O**ddly enough, when I first heard the title song of Slim Dusty's 100th album, *Looking Forward, Looking Back*, it connoted images of our history and the work we do as speech language pathologists. Then I listened more closely. "I've come a long way down the track." You and me both, Slim old son, you and me both. And I like your groovy little play on words with "track". "Got a long way left to go/ Making songs from what I know/ Making sense of what I've seen/ All the love we've had between." And at that precise point I got it. The song is not only to do with history and work: it's about commitment, dedication and a life-long labour of love.

### Work matters

We live in an era of workforce **attrition**<sup>1</sup> and divergent career paths that often encourages graduates to explore creatively "what else" they can "do" with their vocational degrees. Our students are **urged**<sup>2</sup> to cultivate an entrepreneurial, outside-the-square mindset when it comes to personal-goal setting, and it well may be that the concept of a job for life, and an associated sense of enduring vocation, is *passé*.

Readers from the Silent Generation (born 1925–45) and Baby Boomers (born 1946–64) will recall a time when acceptance into a speech therapy training course, so called, rested largely on a successful interview. One of the key things a panel enquired of a quivering applicant was why she (usually she) believed she was particularly suited or qualified to become a speech therapist, and did she, in fact, have a sense of vocation? It was like being asked if you'd seen the light, heard the call, responded to the summons, and were ready to sacrifice all for those less loquacious than ourselves. "Oh, yes!" we breathed earnestly. "Oh, yes!" we squeaked, "I've always wanted to ..." And of course the rest of the sentence was anybody's guess, because we boomers had no encompassing **description**<sup>3</sup> of what a speech pathologist actually did.

There was just an idealistic, pleasantly nebulous jumble in your head: nothing too confronting. Little snippets of ideas

about strokes, cleft palates, and stuttering (or were you supposed to call it stammering?), and laryngectomies (thank you Readers' Digest) and electoral mutants who refused to speak (according to my Freudian friend who knew stuff), and helping people who couldn't talk, and doing good, and belonging to a profession. No thoughts of not being able to get the job done, or of how we might cope at work in a less-than-perfect system. We had no inkling of endless battles with budgets, bureaucracies, and bogged-down waiting lists, or of ever having to be disappointed in the pursuit of professional service delivery to be proud of. It was all terribly vague.

The only bit that was not vague was the part where you became very irked indeed, and scornfully contradicted people who made unfunny asides, in plummy and pretentious voices, about brown cows and the precipitation patterns of the Iberian Peninsula. "No!" we retaliated peevisly. We were certainly *not* interested in the rain in Spain or ay-ee-IOU! The job we aspired to was light years removed from **elocution**<sup>4</sup>, and what is more, it was a worthwhile career! We would be trained to do work that mattered. We would make a difference.

### Commitment

It wasn't called training for nothing. When we weren't reading and being trained to do things, we were being trained to think, and when that wasn't happening, they trained us to think about what they had trained us to do. And to challenge it. And it wasn't bad at all! We had few journals, a handful of textbooks, a tiny evidence base, hardly any standardised assessments, and most of our therapy resources were home-made. But, like the accountable, highly qualified academics in the communication disorders programs of today, our teachers had commitment in spades.

They steeped us in the arts of accurate observation, active listening, meticulous recordkeeping, respectful interviewing,

sensitive counselling, efficient teamwork, research design and methods, clinical problem solving and diagnostic reasoning. Before long we knew what a speech therapist did. She (and he, as we were now pleased to discover) assessed people's situations, collaborated with them to devise plans, and followed them through. In order to fulfil these functions we had to be active listeners and learners, and independent thinkers able to critically analyse information.

## No responsibility

The long running **National Public Radio**<sup>5</sup> Take Two series, which ended at the beginning of 2006, profiled people reinventing themselves as they transitioned, for a wide variety of reasons, from one career to another. According to reporter Ketzell Levine, the number 1 reason people wanted to switch careers was that they were not happy and wanted to do something that mattered. How ironic, then, to discover that the person they chose for a follow-up interview, further down the track, on the last day of the series was a cheerily unapologetic speech pathologist who burned out and became a checkout bloke for the health insurance and the worry-free lifestyle. When Levine caught up with him in January, he was now able to pinpoint having "no responsibility" for others as the chief benefit of his changed work circumstances. Still enjoying communicating with people, he was thrilled to be toiling for fewer hours with less stress, and never needing to take his work home with him.

Reviewing the series, Levine wrote, "It was no surprise to me, and possibly not to you, that the folks most willing to embrace change were women 40–60, who time and again were determined to find careers that were in synch with who they were. Some had kids in their teens or who were adults; some had partners, others were single. What they had in common was the need for creative freedom in order to express themselves through their work."

Levine also mused on the effect of the project on her perceptions of her own career as a journalist. "The thoughts, sentiments and stories in the letters I received were often astonishing and almost always inspiring. More than that, they helped me define what it is that keeps me engaged in my own career: a chance to touch, and be touched, by so many lives."

## Landscape view

Australian qualified SLPs have been touching lives for over 60 years. The Australian Association of Speech Therapists

was formed in 1944, and in 1949 the Australian College of Speech Therapists was founded as an unincorporated body. This five-year period marked the overlap between the Silent Generation and the Baby Boomers. Then, in 1975, the Gen-X (born 1965–81) period, it became the Australian Association of Speech and Hearing, and in 1996 **Gen-Y**<sup>6</sup> (born 1980–94) was around to see it transformed again into Speech Pathology Australia.

One of the most exciting changes SLP old-hands who have stayed inside the square have seen has been the emergence of a multi-generational, and increasingly diverse, multicultural speech pathology workforce.

At this time Generation Y makes up 20.5% (4.2m) of Australia's population. They comprise 20% of the workforce and this will double over the next five years. While they have been described as "transitional" and less loyal than previous generations, they are considered ambitious, career orientated, technically adept, socially responsible, and self-interested: knowing what they want and wanting it now. In short: people that dynamic workplaces need!

The landscape was different when most of us began our careers. Even though we were the younger generation, there were no speech pathologists at work old enough to be our grandparents. We had relative youngsters in senior positions. Over the next little while, an influx of bright, caring, thinking, male and female Gen-Y graduates will mean that the influence of four, if not five generations of speech pathologists will be felt within the workforce and throughout the profession. Looking forward to it!

## Links

- <http://www.pc.gov.au/study/healthworkforce/subs/sub053.pdf>
- <http://www.asha.org/about/credentialing/changing.htm>
- <http://www.speechpathologyaustralia.org.au/Content.aspx?p=78>
- [http://www.acsu.buffalo.edu/~duchan/new\\_history/hist19c/elocution.html](http://www.acsu.buffalo.edu/~duchan/new_history/hist19c/elocution.html)
- <http://www.npr.org/>
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