

Regd. Under the Karnataka Societies Registration Act, Karnataka Act No, 17 Registration No. 25/67-68

PRESIDENTIAL ADDRESS

Presented by



DR S. P. GOSWAMI

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Reinterpretation and Reclassification of profession from Peripheral to Central levels

Indian Speech-Language and Hearing association has been a strong pillar for the growth and recognition of the profession of Speech Language and Hearing and its professionals in the country. Distinguished Chief Guests, Office bearers of the ISHA, awardees, dignitaries, Members of the Organizing Committee, Guest Speakers, delegates, invitees, and accompanying family members. Today, when the baton of leadership of this association is being handed over to me from Dr. M. Jayaram, I am not onlyhonoured but also extremely suspicious about my ability to push forth the zeal and commitment of my predecessors. I believe it to be my achievement if I can sustain 50% of the vision, action, precision, and pace with which ISHA leadership has been built over the years. Today, I fearfully, yet consciously and willingly take over the responsibility of the president ship of Indian Speech-Language and Hearing Association, acknowledging and drawing encouragement from all its previous leaders.As we optimistically cross our fingers hoping to head away from the two long years of Covid19 pandemic, I would like to thank each one of you for bestowing this responsibility and believing in my capabilities to serve as the ISHA president2023-24.

Nature provides samples of perfection in all domains of functioning. Look at our nervous system for a moment. It reflects perfection by virtue of its integrated, synchronous, coordinated, fine and robust functioning. That's how ISHA needs to function as well. Like each



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neuron and synapse is critical, each one of us and our cordial relationship decides the quality of our work and synergy of the system of ISHA. Disruption in any form ultimately affect the functioning of the system. Health of this organisation is decided by genial activity among each member of ISHA.

Growth of the profession - Binary to Multiple:

Our profession has seen a steady progression in all its domains, starting from its terminology, to scope to infrastructure and many more. From Speech and hearing, we have grown to Speech, Language, Swallowing, Hearing and Balance disorders. From therapists, we have come to the field of experts. In terms of our scope of practice, we have grown from anatomy to function, from impairment to community integration, from physiology to psychology, from neurology to sociology, communicable to non-communicable disease, OPD to operation theatre, Hospital to home based solutions, academic institutions to privateclinics, school based activities to university affiliations, diagnosis to medico legal and disability certification, public awareness to social policy making, national to high impact international publications, in house grants to international collaborative funded projects from government and non government organizations.Our infrastructure has highly progressed from drums to advanced electrophysiological measures, functional imaging and neuroelectrical stimulation, serving the common men and the king, serving the to-be born and the near end of life stage equally. Our members have served in renowned positions at state and central level ranging from Director of national organisations, member secretary of RCI, Registrar, Dean in medical colleges, and Chief Commissioner for Persons with disabilities. Our academic degrees have gone through similar evolution at graduate, post graduate and doctoral levels. From few small colleges, the number of institutions has grown to more than 50, patient load has increased in lakhs, number of professionals enrolled in ISHA database has moved from hundreds to thousands.

Today, we are an integral part of medical health care system. Our services are sought after by medical professionals ranging from Gynaecologist to neurologist to oncologist to endocrinologist to Gerontologist. There is definitely a need and demand for our services, but only a handful of teams take thisforward to make our services mandatory for the benefit of their patients. The demand is expected to increase further, thanks to the advancements in medical

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sciences. Mortality rate is steadily decreasing, more people thrive with impairments in communication, swallowing, hearing and balance. It is with great professional concern that I question if we are equipped to manage the booming proportion of persons living with disability. We are at a critical point wherein ensuring international quality of professionals as clinicians, researchers, academicians are need of the hour. The future of this field depends on the next generations.

Considering the multidisciplinary nature of our profession, we have accommodated, adjusted, tolerated and created job opportunities in our organisations for other professionals including Special educators, linguist, Electronics, ENT, engineers, Clinical psychologists and Bio-statisticians at faculty and technical levels. We have adhered to the principle of equity in letter and spirit. Unfortunately, the vice versa is not true. Till date, attempts from professionals of other disciplines towards recognition of services and integration of SLPs and Audiologists in their team have been scarce. We are involved in health care along with most, if not all, health care professionals. In a country wherein approximately 1500 graduates are produced in a year, less than 100 job opportunities worth-applying are called for in a year. Its time to question the sincere efforts that attempted to include and maintain our services at different levels with appropriate position, pay and privileges. This I believe is a discriminatory dual standard on our noble profession.

Compliment and Complaint to GOI: The Speech, Language and Hearing fraternity would like to thank the Government of India for launching programmes for the betterment of persons with Communication Disorders such as the NPPCD, RBSK, SSA, RPWD act, ADIP scheme,National programme on prevention and control of non-communicable diseases, Ayushman Bharat CRC in almost all states, and seven National Institutes in disability.However, we would like to mention our grievances that in most of these programmes role of Audiologist and Speech Language Pathologists is marginalised while planning and implementation as well in terms of position, pay and perks. The positions in various institutions are either lying vacant since several years or downgraded orsurrendered. Further all these are designed by medical professionals aimed at life rather than quality of life and life satisfaction of an individual. We totally understand a pill and surgery can quickly relieve the pain and will also ensure there is life. However till date there is no pill or surgery which can go beyond life and we the speech

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Language Pathologist and Audiologist are the one who works beyond life i.e. quality of life and life satisfaction index. The society across the globe has shifted its perspectives from living to quality of living, but our administration remains old-fashioned. This needs major updation and reforms. ISHA expresses its willingness to work with the Government of India for strengthening these programmes for the betterment of persons living with speech, language and hearing disabilities.

When the government opened medical colleges in every district, the positions of Speech Language Pathologists and Audiologistswere either not created, or the privileges werenot in par with national guidelines. I am sorry to say that there are only two health institutions under ministry of health and family welfare in India which have provided dignity to Speech Language Pathologists and Audiologists. These are NIMHANS Bangalore and PGIMER Chandigarh. My request to the others including AIIMSinstitutions is to please follow the model of these institutions and ensure due dignity and diligence of the profession and its professionals.

Brain-drain – A myth:

The concept of brain drain usually refers to the unavailability of manpower to carry out services in our own country, and also unavailability of man-power to enforce our professional needs and demands. Majority of our students opt to move out of the country due to lack of opportunities here. Relocation is most often by choice or by force. By choice, they relocate and become ambassadors of this profession and this nation. Hence we should bid them a peaceful farewell. Let us make their documentations simple, and affordable. Our system involves complicated procedures and we have become its prisoners for no reason of benefit. It is great to know that Indian professionals are of high demand across the globe, and this is an indication of our functional efficiency. However, when leaving the country is a forced choice, the scenario is different. If this professional was given good opportunities, recognition, pay and privileges in this country, this nation would have progressed into another level of per capita productivity. Currently, professionals in this country are facing stagnation in their career growth and this can prove fatal to the field. Remember, stagnant water is a breeding ground for mosquitoes eventually causing disease.



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Era of Young and socialisation: The issue here is probably a lack of recognition of the perspective shift that has materialized over the last century. When ISHA was formed, the society was going through industrialization era. In those days, having a job was a privilege, attrition of employees was a rare occurrence, and employer was the king. From the 1990s, the technology boom transitioned the Indian society to socialization. Today, it is not the job but job satisfaction that is a priority. In the current scenario, employers born in the industrialization era are hiring employees born in the social era that leads to a conflict in expectations and demands. The era of employee adjustment is long over. Now the ball is in their court, and employers need to work towards employee satisfaction, encouragement and motivation in order to retain the best among them. This EC of ISHA will make its best attempts to have an employment drive not only for professionals but also persons with Speech Language and Hearing, where pay, position and privileges are in par with national guidelines. We will also strive hard for the implementation of the constitutional right of "equal pay for equal work". All service of our professionals should get aligned with Pay Commission, obligatory patient care allowance, uniform age of retirement and uniform nationwide pay scales will be sought for.

Time for change: It is time to put down our demands and deserved recognition, and let us be the change that we want to see. This can be a possibility only when our services prove beneficial to our patients for which the quality of our education system should be at its best. It is learnt that our professionals have been generous in granting approval toacademic programs with inadequate teaching and learning resources. There have been instances wherein a professional is a standee for assessment purposes only. If an assessor disagrees to comply with such malpractices, their names are conveniently removed by RCI from the list, proving the proverb"if you are too good, you are someone's food" and making malpractice a norm in this field too.

Everyone is an ASLP other than an ASLP: The issue with malpractice in the field is long discussed, but little acted upon. Here, everyone is an Audiologist or Speech-Language Pathologist including the mother, teacher, driver and other caretakers of a patient who seek services of an ASLP. Further, representations on unethical use of inappropriate titles for professionals misleading the public require immediate action. Pre-fixing the title of 'Dr.' without completing doctorate study from a recognized institute is an unethical practice in our discipline. Awarding a doctoral degree without adhering to UGC guidelines is equally unethical, as this not

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only deteriorates the value of this highest academic qualification, but resultsin poor quality of services for persons with communication disorders. 'Poor solution to poor people" should not be a practice pattern in our profession.Several representations have been submitted to the RCI which has been silent towards these issues. ISHA is open to assist RCI to enhance the quality of rehabilitation practices in the country only and only if RCI bites and bites hard. This is detrimental to the profession, professional and to the individuals who entrust us for bringing a ray of hope in their life with communication disorders.

ISHA will also recommend the following reforms to RCI that could uplift this field:

- a) Transparency in admissions to the Speech Language Pathology and Audiology exclusively based on unitary merit without any extraneous consideration in any form including capitation fee of any type.
- b) Curriculum design and update in a time-bound manner commensurate with the perceived needs of the country and global trends in vogue.
- c) Putting in place a robust faculty and clinical development programme for capacity building.
- Appropriately monitored conduct of examination, free and immune from biases of any and every type.
- e) Rationalization of the prescribed infrastructural requirements and technology commensurate with the realistic needs.
- f) Evoking affordability, equity, and access in an inclusive manner in tune with societal interest.
- g) Putting in place a competency-based and a choice-based credit system in Speech Language and Hearing education with rationalized flexibility to make it globally relevant and align with NEP

Onus is on each of us: We are also equally responsible for this situation and when the fence starts eating the field, someone needs to guard it well. Ladies and gentleman, have the courage to say no. Have the courage to face the truth and do the right thing simply because it is right. These are the magic keys to see yourself and this profession grow and flourish. The coming generation need to be better equipped to face the challenges and the foundation for this needs to be laid now, by us. The future is that of technology and remote services. Today, we do



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not have a valid practice guidelines for professionals in this direction. The ethical practices for tele-assessment and tele-management needs to be laid, implemented and enforced in word and spirit. The health care system in India is facing a paradigm shift in public behaviour and expectations and every professional needs insulation against any violence. This suggestion needs to be placed at the centre for the benefit of professional practice.

ASLP as Researchers:Over the last ten years, a few Speech-Language Pathologists and Audiologists have proved their worth for research funding from various national and international agencies. In the ocean of possible opportunities, the success numbers for our profession could be low, but our profession is definitely now under their radar. We have a great scope for improving our research through focused initiatives, and quality mentoring within and across institutions. We could start appreciating each other's work through citations in professional journals, conferences and word-of-mouth. This citation is not for personal popularity but for the bigger perspective of Indian research. Indian journals also need to be priority option among our researchers for raising its standards and to make it visible internationally through indexing.

Make in India: As a nation, we need to start appreciating our capacities and productivity. Here we are more than 55 years old, relying on foreign made products, be it our clothes, be it our vehicle, our mobile phone, attitudes, or our professional materials. But we claim in high spirits, that we are different from west in terms of society, lifestyle, language, and culture. May I then ask, why are we then still relying on diagnostic tools and therapy approaches made for a different society? We have the resources to be a leader in this field, and what we lack may be the attitude to be pro-active and set our priorities. This is my sincere request to all the researchers, academicians and clinicians of ISHA to work towards developingindigenous tests, tools and innovative treatment techniques for persons with Speech, Language, Swallowing, Hearing and Balance Disorders. Our educational resources are accessed by professionals from neighbouring countries, and hence our products may be of use not only in our country, but also in the SAARC nations. I assure that this EC of ISHA will encourage publication of indigenous tools and tests that pass quality standards, so as to make it available for professionals across the nation at reasonable prices.



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ISHA Is To Do: There is a paradigm shift in the thinking of ISHA. We have been constantly questioned on what "ISHA can do". We now shift to what "ISHA Should Do" or "ISHA Is To Do". I request all members of ISHA to propose their plans which will be reviewed, accepted and implemented for appropriate reasons at a national level. At the organizational level, its presence needs to be felt across the nation to boost the morale and confidence of its existing and prospective members. We also need to work towards development and patent of the emblem for Speech LanguagePathologists and Audiologists. This willhelp in checking on the quacks and also differentiate us from other health care professionals. Once developed, registeredASLPscan use the emblem in their office display, letterheads and visiting cards. ISHA will also design an e-ISHA flag, which can be attached to e-mail addresses of all ISHA members along with the ISHAlogo and Emblem. We will try our best to have our own premises by 26th January, 2024 where the ISHA flag will be hoisted. I request generousmonetary contribution of all members and branchesin making this a reality.

Communication is key for betterment of mankind: Although well known, there is only partial recognition of the fact that communication disordersimpacta person much more than any other disability -locomotor, visual or others. The impact of this disability is not limited to an individual but is also weaved into the social, economic, emotional domains for overall activity and participation, productivity, employability and identity. Persons affected with other conditions may be able to voice out and call for attention of policy makers, but here is a different group. We, Speech-Language Pathologists and Audiologists have the responsibility of being a voice of change for ourselves, our profession and our patients. If we are able to improve the speech, language, swallowing, balance and listening skills of persons with disability, we should definitely hope to reach the eyes, ears, mind, head and heart ofpolicy makersand policy implementers who may not really have such impairment. We are only seeking our legitimate rights without discrimination from policy makers to policy implementers.

On a lighter note, the root cause of all issues at personal, familial, inter-familial, social, community level or international border is either financial or poor communication. We, as professionals help improve communication skills. We may not be able to serve at the borders but definitely speech language and hearing is one of the best medium which can stop the conflicts in our borders.We belong to a profession which can make peace out of pieces and I hope we will be

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recognised by policy makers and policy implementers at the earliest. Till date, the problems related to our profession has been at a peripheral leveland I sincerely hope that it stops here. If it reaches the centre i.e. at cerebellum, there are all chances of irreversible damage and will lead to central imbalance. It is my humble request to the policy makers and policy implementers to accept and recognize this profession as the one that can communicate, coordinate, and converge for the betterment of mankind. The famous slogan of GOI is vivadsevishwas, vishwas se samvad, We are open to samvad with documentation at all levels provided our pay, position, perks and promotional avenues are being enhanced. If this samvad fails, we are also open to going to the corridors of court and from Sadak sesansadtak. I assure members that EC of ISHA will leave no stone unturned to protect your rights and the identity of professionals and profession at large.

Dear Colleagues, this is not the end. For ISHA, sky is not the limit. We will work in every possible sphere but not without contribution and support from each one of you. I thank all those who are here today and request you for your continued support to ISHA in all its endeavours. To conclude, all I wish to say is

> वोसॉंसकिसकामकीजिसमेंस्वरनाहो, वोस्वरकिसकामकेजिसमेंभाषानाहो, हमवोहैं, हमवोहैं, जोसॉंसकोस्वर, औरस्वरकोभाषामेंबदलदेतेहै। स्वरऔर भाषाहीहै जो इंसानकोइंसानियत मेंबदल देतीहै । हमवोहैं, हमवोहैं जो इंसानियतके लिए हैं । Jai Hind, Jai ISHA