

# Why do men become *SLTs*?

**Fiona McKinson** finds out why the few men in speech and language therapy became SLTs – and what they think will attract more men into the profession

Men have been largely absent from the ranks of speech and language therapy, traditionally accounting for between 1-2% of SLTs. There are currently only 294 men among the Health Profession Council's 11,459 registered SLTs (2.5%).

Research by Greenwood *et al* (2006) confirms that “white women” dominate the speech therapy profession and suggest that a possible explanation for this under-representation is because of poor awareness and understanding of speech and language therapy as a profession.

Boyd and Hewlett (2001) considered the dearth of men in speech and language therapy by looking at undergraduate speech and language therapy students.

They concluded, given the few men then in training, that there was little prospect of a change in this situation in the near future.

Given this apparent state of inertia, the RCSLT used its continuing professional development network to ask those men who had taken the plunge why they had entered the world of speech and language therapy.

## **Men speak out**

A number of themes emerged from the responses we received.

Many men entered the profession having had another career, and many had had exposure to situations where they had seen first hand the benefits of speech and language therapy.

For example, **Ben Vickerstaff**, 33, has been an SLT for 11 years. He works in adult acute dysphagia with one other male SLT.

“I was interested in speech and language therapy because my mother worked in a



school for children with learning disabilities," Ben says.

"We lived opposite a Victorian asylum, and many of my 'friends' were adults with learning difficulties who were integrating with the local community."

**Patrick Kelly**, 57, has been an SLT since 1986. "I got into the field because I have stammered since three years of age and have had a huge amount of therapy on and off for 50 years," Patrick says.

Like many other respondents, Patrick also describes some of the barriers he faced when entering the profession.

"In my first post as a therapist in Bury I arrived on my first day at the health centre and the building was being painted and decorated.

"I approached the centre manager and she assumed I was one of the painters and directed me to the contractors' room. She thought I was joking when I told her I was the new SLT."

**Andrew Green**, 32, has been working as a paediatric SLT for six years.

"Luckily I was able to observe a male SLT before I made my decision to do speech and language therapy at university, which convinced me that it was an interesting career," Andrew comments.

"I remember having to attend a careers talk at the sister girls school in order to find out about speech and language therapy.

**Mark Jayes**, 36, has been a specialist SLT for three-and-a-half-years, working with adults.

Mark says, "I had studied language and psychology, had taught language and been a trainer in communication skills and done voluntary counselling work.

"I wanted to develop a career in the NHS, and speech and language therapy seemed to bring together all my professional experience, skills and interests."

**Martin Smedley**, 52, is a paediatric principal communication pathologist. He says, "I became interested in speech therapy while studying linguistics.

"In 1977 I wrote to the then National Hospitals College of Speech Sciences (now University College London), but was politely informed that only women were accepted by the college."

**Neil Thompson**, 44, has been a paediatric SLT for 11 years.

"I was looking for a practical career which would involve my interest in languages. I was also unsatisfied with my previous career – electronic design – which lacked the variety and contact with people that speech and language therapy has," Neil comments.

"When I first wrote for information from the college about a career as a speech and language therapist (back in 1990), the letter I received back began 'Dear Miss Thompson...'

**Colm O'Keeffe** is Principal SLT in Mental Health at the South London and Maudsley Foundation Trust. He qualified in 1992.

"My father had a stroke in the 1970s and I've had personal experience of the impact of communication disability. I considered training as an SLT or a clinical psychologist, but opted for speech and language therapy as it involved more direct face-to-face interventions," Colm says.

**Antony Aricci**, 40, qualified in 2004 and says, "I chose speech and language therapy after a process of elimination. I originally considered physiotherapy, but decided it wasn't exactly what I wanted. So, on the advice of my wife I spent a couple of days with an SLT and loved it."

### How can we encourage more men to join the profession?

Like many other commentators, Greenwood *et al* (2006) conclude that in order to increase the gender diversity of SLTs, the profile of the profession needs to be raised – with increased awareness of the degree level courses, the scientific and evidence-based nature of the work, and improvements on current salary scales.

There are a number of initiatives, such as the Aimhigher Healthcare Strand, which aim to promote recruitment for, and widen participation in, the health professions.

On 8 February Aimhigher ran an event in Truro, Cornwall called 'Boys into Health'. Robin Simpson-Green, one of the College of St Mark and St John ex-students and now working as a therapist in Plymouth, starred in a video shown at the event as a role model example of a young man who has recently joined the profession.

RCSLT CEO Kamini Gadhok adds, "Encouraging men to join speech and language therapy needs to be addressed

through looking at the whole organisational system – including public perceptions, training recruitments, work experience and career development."

A Department of Health spokesperson says, "We recognise the significant value of speech and language therapy to children and adults with speech, communication, language and swallowing disorders.

"While there is no specific target for these services, SLTs make a significant contribution to national priorities, such as achieving access targets, improving the patient experience with better discharge from hospital, improving public health and improving educational outcomes.

## In Australia, they have a SIG 'Blokes in Speech Pathology'

"It is for primary care trusts in partnership with local stakeholders to determine how best to use their funds to meet national and local priorities for improving health and to commission services accordingly.

"The Department has no specific policy initiatives as such in encouraging more male SLTs.

"However, the Allied Health Professionals Federation with funding from the DH recently published *Picture yourself as one of these*, which promotes the role of SLTs among young people and gives an example of a male trainee SLT enjoying his training.

"The RCSLT's recent publication *A career in speech and language therapy* also profiles a male SLT student.

"Both of these documents will help raise the profile of the profession and increase awareness of the degree level courses, the scientific, evidence-based nature of the work, and current salary scales in order to increase gender diversity of SLTs.

"The NHS careers website also has information promoting the pay and benefits of SLTs, which should also increase awareness amongst prospective male trainees."



**Table one: possible measures to encourage more men into the profession**

Problems	Possible solutions
<ul style="list-style-type: none"> <li>■ Lack of awareness of speech and language therapy among boys</li> </ul>	<ul style="list-style-type: none"> <li>■ Early/targeted recruitment via careers services etc</li> <li>■ Workshops in schools with male sixth formers to give them the real picture</li> <li>■ Promote language teaching and linguistics in schools so more boys become interested</li> <li>■ Offer mentor support by male SLTs, where possible, to prospective applicants</li> </ul>
<ul style="list-style-type: none"> <li>■ Historically seen as a profession with poor pay and costly training</li> </ul>	<ul style="list-style-type: none"> <li>■ Promote speech and language therapy as the excellent career opportunity it is</li> </ul>
<ul style="list-style-type: none"> <li>■ Perceived poor working conditions. Seen as a role with little opportunity for advancement and under- recognition of achievements. Lack of respect from within employing organisations</li> </ul>	<ul style="list-style-type: none"> <li>■ Increase the profile of the profession within NHS organisations. Emphasise the benefits of successful speech and language therapy intervention for other professional groups</li> </ul>
<ul style="list-style-type: none"> <li>■ Perceived female stereotype</li> <li>■ Working with children and communication seen as 'feminine'</li> </ul>	<ul style="list-style-type: none"> <li>■ Image rebrand (eg communication therapists) to counter existing stereotypes</li> <li>■ Target publicity to highlight the evidence-based, scientific analytical nature of our work and the variety of other clients/professionals we work with</li> <li>■ Provide more positive images of male SLTs in the media</li> <li>■ Set up a working party to try to come up with better ideas</li> </ul>

### What do our men think?

We asked our male SLTs for their views on how to get more men into the profession. Their replies are summarised in table one.

**Colin Barnes**, 41, a Specialist SLT in elderly mental health, says, "I think College does a good job already promoting a balanced image of RCSLT."

"When I started, *Bulletin* especially was more full of pictures of twin set and pearls. I don't think it's about getting men or women, but identifying people who are suited to the job."

**Gino Hipolito**, 30, has been an SLT for two years following his studies in Australia. "We should highlight job satisfaction through face-to-face contact with clients/patients," Gino says.

"This has been a common theme in the reason for males to join speech and language therapy in the McAllister and

Neve (2005) study."

"In Australia, they have a SIG 'Blokes in Speech Pathology'. You could possibly start one up and use it as a think-tank to come up with a strategic plan to recruit more males."

**John Swan**, 36, qualified in 1996. "I have been pleased to see posters and things like *Bulletin* front covers showing photos of SLTs of both sexes, and I think this is more male effective. I think our professional profile has improved enormously in the 10 years since I qualified."

**Wayne Wilson**, 52, has been an SLT for seven-and-a-half-years. He says, "We need exposure. Not in a speech and language therapy male nude calendar or anything, but more targeted publicity."

"Perhaps there should be joint information packs on all of the bio-medical/therapy degrees, eg information from all the allied health profession groups together."

### References:

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### Acknowledgement:

Many thanks to all the SLTs who replied to our questions. We had far too much information to use here, but we will pass on your comments to the RCSLT Membership and Communications Board.