

Setting a Prioritized Agenda to Drive Speech-Language Therapy Research in Health

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For which topic were research priorities identified?

speech-language therapy

In which location was the research priority setting conducted?

Australia - Australia

Why was it conducted at all?

Prioritized research agendas are viewed internationally as an important method for ensuring that health research meets actual areas of clinical need. There is growing evidence for speech-language therapy-prioritized research agendas, particularly in disorder-specific areas. However, there are few general research priority agendas to guide speech-language therapy research. Therefore, there is a need to develop a prioritized SLT research agenda according to the perspectives of clinical SLTs, academic SLTs and SLT consumers. Further more, the SLT specific prioritized research agendas to date have largely concentrated on SLT disorder-specific areas (such as aphasia).

What was the objective?

to collaboratively develop a prioritized research agenda for an Australian public health context with clinical speech-language therapists (SLTs), academic SLTs and consumers of speech-language therapy services

What was the outcome?

a ranking list of 20 research topics

How long did the research prioritization take?

No information provided.

Which methods were used to identify research priorities?

group discussion; survey

How were the priorities for research identified exactly?

Step 1: survey: participants were asked to list the main clinical population they provided services to (e.g., adults, paediatrics), the nature of their facility (e.g., hospital, community health centre), up to three SLT areas within health they thought needed further research, outcome was a list of areas requiring further research grouped within nine categories. Step 2: focus groups: with nominal group technique to develop prioritized research agendas, each list was explored separately with clinical SLTs, academic SLTs and SLT consumers (as separate groups), six NGT sessions were conducted in total, participants initially discussed the meaning of the topic of interest (e.g., What does service delivery mean?), then reviewed and discussed the survey results, participants then had the opportunity to generate new ideas, participants then clarified and discussed the expanded list, participants were then asked to rank their top 10 priorities, votes were then analyzed to create a ranked prioritized list across the three groups (clinical SLTs, academic SLTs and SLT consumers), after a prioritized lists had been developed for each group an overall ranked prioritized list (research agenda) for each of two topics (service delivery and expanded scope of practice). Step 3: validation of two research agendas: the two prioritized research agendas were presented as part of a panel presentation session during the 2019 Combined Speech Pathology Australia and New Zealand Speech Therapists' Association conference in Australia, panel session attendees were randomly divided into eight small working groups, each group discussed the research agenda in relation to three questions: Is the agenda applicable to the wider SLT profession? Is the agenda applicable to your service? Are there any areas missing?

Which stakeholders took part?

11 clinical SLTs, 12 academic SLTs, 4 consumers of speech-language therapy services (3 consumers who had experienced speech-language therapy services, 1 carer).

How were stakeholders recruited?

Participants were recruited for Stage 2 to one of three groups (clinical SLTs, academic SLTs, consumers of speech-language therapy services). Clinical SLTs were recruited by snowball sampling of public SLT interest groups. Academic SLTs were also recruited by snowball sampling of public SLT groups and by emails sent from the research team to SLT colleagues within academic and research fields. Clinical SLTs were recruited by snowball sampling of public SLT interest groups. Academic SLTs were also recruited by snowball sampling of public SLT groups and by emails sent from the research team to SLT colleagues within academic and research fields. Only SLTs were used during the validation stage as a convenience sample.

Were stakeholders actively involved or did they just participate?

Stakeholders were mere participants of the research prioritization process; they were not actively involved in the