

Speech and Language Therapy Ethics, Professional Profile and Professional Opportunities in Portugal

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How did it all start in Portugal?



Terapia da fala

1957-59

Maria Manuela de Vasconcellos e Sá Bruno Machado
1.ª bolsista da SCML para cursar speech therapy em Londres

1959-60

Maria Manuela e Sá Bruno Machado
Estágio no Institute of Physical Medicine and Rehabilitation na Universidade de Nova Iorque

Saúde e Educação

1955-58

Victor Santana Carlos
Curso de especialização em medicina física e de reabilitação na Universidade de Nova Iorque

19 julho 1956

Publicação dos Estatutos da Liga Portuguesa dos Deficientes Motores
Presidente - Dr. João dos Santos (médico)

1957-1963

Dr. José Guilherme de Melo e Castro
Provedor da Santa Casa da Misericórdia de Lisboa (SCML)

Política, Economia, Sociedade e Cultura

1933-1974

Estado Novo
Regime político autoritário e corporativista
Fundador e líder António de Oliveira Salazar afastado em 1968 por doença

1953

Calouste Gulbenkian no seu testamento estabeleceu a constituição de uma fundação internacional, com sede em Lisboa



Manuela Bruno Machado num evento em Londres nos finais de 1950.

How did it all start in Portugal?



Terapia da fala

1960-1963

Maria Teresa Múrias
2.ª bolsista da SCML para cursar speech therapy em Londres

1962

Início do primeiro curso de TF em Portugal

1969

N.º total de diplomados em TF - 9

Saúde e Educação

1961

Curso de especialização de professores para o ensino de surdos - aprovado por Despacho de Sua Excelência o Ministro da Saúde e da Assistência de 20 julho

1961

Técnicos e Auxiliares dos serviços clínicos
Portaria 18523 de 12 de junho

1962

Regulamento dos centros de preparação de técnicos e auxiliares dos serviços clínicos
Portaria 19397 de 20 de setembro
Fundação da APPACDM (atual Associação Portuguesa de Pais e Amigos do Cidadão Deficiente Mental)

1965

Centro de Saúde Mental Infantil e Juvenil de Lisboa

Fundador - Dr. João dos Santos (extinto em 1992 com a criação do departamento de Psiquiatria da Infância e Adolescência do Hospital D. Estefânia)

1966

Inauguração do CMR a 2 de julho
Oficialização da Escola de Reabilitação de Alcoitão (ERA) - Portaria 22034 de 4 junho com efeitos a 1957

How did it all start in Portugal?



Formação académica

Os primeiros cursos de TF decorreram nas instalações cedidas da Escola de Enfermagem das Casas de São Vicente de Paulo na travessa do Fidié em Lisboa, e no Hospital de Santa Maria.

1.º curso – [Jan 1962 - Jan 1965]



Maria Assunção Pereira da Silva
Maria José Esteves Oliveira
Maria Manuela L. L. F. Barbosa

2.º Curso [Out 1963 - Fev 1967]



Maria Suzete P. Carmona Dias
Maria do Céu Dias Duarte

3.º Curso – [1965 - 1967]



Ana Maria Alves Caetano
Maria Luísa Sarafana Pinto Basto
Anabela M. Sander de Souza Guerra

4.º Curso – [1966 - 1969]



Maria Fernanda Prego Lira Pinto e Silva
Maria Manuela D. A. da Silva Cabral Fialho

5.º Curso – [1967 - 1970]



Isabel Maria R. Amaral Oliveira
Maria José Antunes Baptista

6.º Curso – [1968 - 1971]



Isabel Maria Lobo Fernandes

7.º Curso – [1969 - 1972]



Maria Emília Pinto dos Santos

The Speech and Language Therapist

- ☐ The Speech and Language Therapist (SLT) is the professional responsible for the prevention, assessment, intervention and scientific study of human communication disorders, encompassing not only all the functions associated with the comprehension and expression of oral and written language but also other forms of non-verbal communication.
- ☐ The SLT also intervenes at the level of swallowing (safe passage of food and drinks through the oropharynx to ensure adequate nutrition).
- ☐ The SLT evaluates and intervenes in individuals of all ages, from newborns to the elderly, with the general objective of optimising the individual's communication and/or swallowing skills, thus improving their quality of life (Associação Portuguesa de Terapeutas da Fala – APTF 2024).



The Speech and Language Therapist

- ☐ The SLT can work in institutions where primary, differentiated or continuing health care is provided, such as (APTF 2024):
 - ☐ Health centres
 - ☐ Hospitals
 - ☐ Rehabilitation centres
 - ☐ Healthcare charities
 - ☐ Social reintegration institutions
 - ☐ Nursing homes
 - ☐ Nurseries and kindergartens; primary and secondary schools; universities
 - ☐ Private offices/ clinics
 - ☐ Patients' homes



Professional ID Card

- ☐ To practice the profession of Speech and Language Therapy in Portugal, it is mandatory that all professionals are registered at the Central Administration of the National Health System (D.L. 320/99 of 11 August) which recognises the professional title and issues a Professional ID Card.
- ☐ Regardless of the regime of exercise of the activity, liberal or subordinate, the periodicity with which this activity is carried out and the sector, public or private, only SLTs with a Professional License can practice the profession.
- ☐ The recruitment by employers of professionals who do not have Professional ID Card will be sanctioned in accordance with the general terms of Portuguese law (APTF 2024).



Professional ID Card

- ☐ The professionals registered with the APTF are commitment to honour and comply with the Ethical Code and the Regulations of the Association, thus respecting the ethical standards that govern the profession of Speech and Language Therapy.
- ☐ These professionals use vignettes in their documents, that certify their registration in the Association.
- ☐ The use of vignettes is voluntary, but the APTF strongly recommends their use (APTF 2024).



Speech and Language Therapy Degrees

- ❑ The SLT has a higher education degree in Speech and Language Therapy, so there is no other professional with the competence to practice the profession (APTF 2024).
- ❑ The basic training of a SLT is 4 years (Licenciatura degree), and they can later continue their training by enrolling in post-graduations, Masters and Doctorate programs.
- ❑ The public schools where it is currently possible to obtain this degree are:
 - ❑ Escola Superior Saúde da Universidade Aveiro
 - ❑ Instituto Politécnico Leiria - Escola Superior Saúde
 - ❑ Instituto Politécnico Porto - Escola Superior Tecnologias Saúde Porto
 - ❑ Instituto Politécnico Setúbal - Escola Superior de Saúde.



Who do SLTs Work With?

- ❑ SLTs have a fundamental role in the harmonious development of babies.
- ❑ In the Neonatal Care Units, they provide care in the area of feeding and communication to the newborn baby and her/ his parents.
- ❑ In preschool children, their intervention focuses on the promotion of linguistic, vocal and communication skills as well as rehabilitation of disorders in these areas (APTF 2024).



Who do SLTs Work With?

- ❑ They play a fundamental role in school-aged children and young people in the intervention of reading and writing disorders, in the enhancement of communication and stuttering.
- ❑ In adulthood, their focus of intervention is mainly on acquired language disorders, vocal and swallowing pathologies.
- ❑ They also have a leading role in promoting communication and voice skills in various professionals (APTF 2024).



Areas of Intervention: Communication

- ❑ Degenerative diseases of the Central Nervous System (CNS), autism and some syndromes can condition the communication of the child/ adult, making it impossible to use speech and/ or written language to communicate.
 - ❑ SLTs intervene by adapting and installing an augmentative and/or alternative system to communication (APTF 2024).



Areas of Intervention: Language

- ❑ Including semantics, morphosyntax, phonology and pragmatics.
- ❑ The SLT intervenes in cases of difficulty in learning to read and write.
- ❑ Language disorders can occur during a child's development or after neurological accidents, such as Cerebrovascular Accident (CVA) or Traumatic Brain Injury (TBI).
- ❑ The SLT intervenes in the acquisition language, assessing the affected component(s) and the compromised linguistic areas (APTF 2024).



Areas of Intervention: Speech

- ❑ Specific difficulties in producing speech sounds.
- ❑ For a correct articulation of sounds, it is necessary that the orofacial structures and muscles are functional.
- ❑ Neurological changes (such as a Stroke or a Traumatic Brain Injury) or immaturity of the orofacial muscles are some of the causes of changes in speech (APTF 2024).



Areas of Intervention: Fluency

- ❑ A person speaks fluently when she/ he is able to produce speech sounds continuously, thus enabling a fluent discourse, with adequate rhythm and pauses.
- ❑ Non-fluent speech is characterised by blocks, repetitions or prolongations of syllables and excessive pauses that are produced when someone stutters (APTF 2024).



Areas of Intervention: Voice

- ❑ Alterations in vocal quality indicates alteration in the structure or movement of the vocal cords, which can have an organic (e.g., nodules or polyps) or functional (vocal misuse or abuse) origin.
- ❑ The Otorhinolaryngologist is the health professional that performs specific exams and diagnoses the cause of the voice alteration.
- ❑ The SLT treats voice disorders and intervenes in the prevention of symptoms, in the cessation of vocal misuse and abuse and in the practice of vocal health (APTF 2024).



Areas of Intervention: Swallowing

- ❑ Neurological or mechanical difficulties may occur in one or more phases of swallowing, thus compromising safe nutrition and hydration.
- ❑ The SLT assesses and rehabilitates people with swallowing disorders (APTF 2024).



Code of Ethics (APTF 1999) Article 1 Clinical Practice

1. In their clinical practice, SLTs must ensure dignity, respect for any human being and safeguard the well-being of the patient.
2. It is the duty of SLTs to update of their scientific and technical knowledge, to better serve those who use their services.
3. The SLT cannot use his profession, nor allow others to do so, for purposes contrary to the defense of the values of dignity and respect for the human person.



Code of Ethics (APTF 1999) Article 2

Personal qualifications

1. Only SLTs who have the appropriate qualifications, recognised by the APTF and by the competent authorities, should practice the profession.
2. SLTs must have a sufficient level of competence in the oral and written expression they use in the exercise of their profession.
3. SLTs should refrain from offering services or using methods for which they are not sufficiently qualified.
4. SLTs must limit or interrupt their professional activity if a temporary change in their capacity may have harmful consequences for patients and/or the profession.
5. SLTs should provide the best possible treatment for their patients, avoid exceeding their competence, and turn to other professionals...



Code of Ethics (APTF 1999) Article 3

Professional conduct

1. SLTs must represent the profession with dignity and be governed by the norms by which it is guided.
2. SLTs should not publicize their practice and should refrain from praising their own professional competence.
3. SLTs should not allow motivations of a promotional nature or financial profit to affect the correct performance of their professional practice.
4. It is unacceptable to receive commissions or other forms of payment, for having referred patients to other professionals.
5. SLTs who participate in the promotion and development of materials, books or tools related to communication disorders, must present them in a professional and objective way...



Code of Ethics (APTF 1999) Article 3

Professional conduct (continued)

6. SLTs who work in public or private institutions should not accept directives or rules that would constitute an interference and/or limit to their professional independence and integrity.
7. SLTs must be available to ensure the theoretical and practical teaching of SLT students.
8. SLTs should never collaborate with people who practice illegal or inappropriate techniques.
9. SLTs should not, for commercial purposes, transfer patients treated in a public institution to the private sector.
10. SLTs must abstain from all direct or indirect advertising. The reputation of Speech Therapists is based on their competence and integrity...



Code of Ethics (APTF 1999) Article 4

Professional secrecy

1. Except for the purposes set out in number 4 of this article, it is an inescapable obligation of the SLT to safeguard the confidentiality of elements that he or she has collected in the professional practice or in his or her research.
2. Secrecy refers to the dissemination, by any means, of information.
3. The SLT must ensure that the documents from his work are always presented and classified to ensure that confidentiality is respected, avoiding abusive intrusions into the intimate life of individuals.
4. Individual cases can only be presented by the SLT in situations of teaching or research, if it is not possible to identify the participants.



Code of Ethics (APTF 1999) Article 5

Responsibility to patients

1. SLTs should ensure the well-being of their patients.
2. SLTs must not discriminate socially, racially, religiously or sexually while practicing their profession.
3. During an intervention, the SLT should not get involved with patients; personal relationships may disturb the therapeutic intervention.
4. SLTs should evaluate the effectiveness of their intervention and should end a service when it is clear that the patient no longer benefits from their intervention.
5. Treatment costs defined by professional standards that protect the interests of the patient and the profession, and must be clearly identified before the start of treatment...



Code of Ethics (APTF 1999) Article 6

Responsibility towards colleagues

1. The SLT must not in any case discredit a colleague or cause her/ him personal or professional harm.
2. If, for whatever reason, the patient changes therapist, communication between the two therapists is desirable, unless the patient objects.
3. In cases where a patient is assisted simultaneously by SLTs, collaboration between the two therapists concerned must be established and maintained.
4. SLTs should strive to develop the knowledge of the profession and share their experiences for research purposes.



Code of Ethics (APTF 1999) Article 7

Responsibility to the public

1. SLTs should strive to inform the public about communication disorders.
2. They must ensure the veracity of the information given to the public regarding a specific pathology.
3. They must not promote new therapeutic procedures whose effectiveness has not been proven, nor provide unqualified opinions on them.



Code of Ethics (APTF 1999) Article 8

Ethical guidelines for research

1. Within the framework of research, a high ethical level must be maintained, and the patient's well-being must not be affected. A written consent must be given by the patient or his legal representative with full knowledge of the facts.
2. Precautions must be taken not to violate the patient's right to professional secrecy.
3. The patient has the right to interrupt his/ her participation in the research study, at all times and at any time.
4. The use of clinical information must be subject to the prior agreement of the patient and the authority responsible for the process.



Code of Ethics (APTF 1999) Article 9 Relations with employers

1. The SLT who performs professional functions in official or private institutions cannot accept from these institutions' regulations or guidelines that, in any way, limit their professional autonomy or technical independence.
2. It is the duty of the SLT to support colleagues ensuring their professional independence.



O Terapeuta da Fala Pode Fazer a Diferença

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Thank
you!

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