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Research Article

Advocacy Engagement and Self-Efficacy of School-Based Speech-Language Pathologists

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ABSTRACT

Purpose: The purpose of this study was to investigate advocacy engagement and self-efficacy of school-based speech-language pathologists (SLPs) and their perceptions of key issues in education and challenges to advocacy.
Method: A 75-item survey was used to solicit information about advocacy-related experiences of 194 school-based SLPs. The survey included subsections on advocacy engagement, identity, training, and self-efficacy and solicited open-ended responses regarding perceived issues and hindrances.
Results: Results demonstrated low percentages of respondents had received training in advocacy (15%) and participated in an event (14%). A high percentage of respondents (45%) reported feeling ill-equipped to advocate but viewed their role as advocates to be important. Overall, respondents self-rated as moderately efficacious advocates. Age and perceived advocacy importance were significant predictors of self-efficacy. Frequently cited issues in education included lack of resources and support for educators and students, teachers' rights, and mental health. Common challenges to advocacy included time constraints, lack of knowledge and support, and fear of retaliation.
Conclusions: Based on reported challenges to advocacy, more research is necessary to further investigate the extent these factors influence engagement and self-efficacy. As SLPs in this study viewed their advocacy role to be important but perceived themselves to be unprepared, additional training and professional development opportunities could support the degree to which SLPs engage in advocacy and perceive themselves to be effective advocates.
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Speech-language pathologists (SLPs) in public schools face multiple challenges (e.g., T. L. Hutchins et al., 2010). Researchers and practitioners have identified a number of complex problems, including workload issues (Dowden et al., 2006; Kalkhoff & Collins, 2012; Katz et al., 2010), lack of resources for supporting evidence-based practice (EBP) implementation (Hoffman et al., 2013), inadequate time dedicated to specialized services (Fallon & Katz, 2008), funds for services and programs (Iafrate-Bellini et al., 2010), variability in how the law is interpreted (Farquharson & Boldini, 2018), and, more recently, interruptions of services due to COVID-19 (Tambyraja et al., 2021).

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In response to the complex challenges reported by SLPs, the American Speech-Language-Hearing Association (ASHA) has encouraged SLPs to engage in advocacy. According to ASHA's (2016) Scope of Practice in Speech-Language Pathology, advocacy and outreach is classified as one of five domains of professional practice that go beyond clinical practice. SLPs advocate for the profession and individuals across the life span to promote and facilitate access to communication and reduce societal, cultural, and linguistic barriers (ASHA, 2016). The importance of advocacy is also highlighted in ASHA's annual public policy agenda, which identifies top public policy priorities in the fields of audiology and speech-language pathology, including issues impacting schools and students (ASHA, 2021a). Beyond direct service provision, SLPs are also charged with leadership activities such as student advocacy, mentorship to colleagues, parent training and support,

translating research to practice, and participating in research opportunities to advance the state of the practice (ASHA, 2010). However, the extent to which school-based SLPs engage in advocacy and perceive themselves as effective advocates has not been widely studied.

Significance of Advocacy

What Is Advocacy?

Advocacy is defined as "an activity in which one or more individuals actively work toward the betterment of people, living things, and the physical world" (Beacham & Shambaugh, 2007, p. 316), and Sosin and Caulum (1983) define an *advocate* as "one who argues for, defends, maintains, or recommends, a cause or proposal, or one who pleas the cause of another" (p. 12). Advocacy occurs at various levels of local, state, and federal government, as well as in the classroom. Although advocacy engagement has been understudied in communication science and disorders (CSD), scholars in the field of social work have identified four types of advocacy: client (or student), cause, legislative, and administrative (e.g., Schneider & Lester, 2001). All four types of advocacy exist under the broad category of policy advocacy, or efforts to change policies or practices on behalf of or with specific persons or groups (Ezell, 2001), and embrace different approaches and tactics (Moseley, 2013). For simplicity, the term *advocacy* is used here interchangeably with *policy advocacy* as school-based SLPs may engage in all four types of advocacy.

Advocacy consists of a broad collection of activities, including communication with elected officials regarding key topics in education, sharing messages through social media, and participating in informative workshops. Opportunities exist for students and professionals of CSD through ASHA's Virtual Advocacy Day where members can support ASHA's efforts by sending prewritten messages to members of Congress or by sharing materials on social media (ASHA, 2021a). Efforts can extend beyond the virtual realm with in-person events, such as ASHA's Annual Capitol Hill Day and Student Hill Day (e.g., National Student Speech-Language-Hearing Association [NSSLHA]), or various state association advocacy days. Recent efforts by ASHA and its members have increased funding for the Individuals with Disabilities Education Act (IDEA), the Early Hearing Detection and Intervention program, and CSD and rehabilitation research (ASHA, 2021b). School-based SLPs can also influence policy through membership in national or state teacher unions. In fact, union negotiations with state legislators have resulted in reduced caseloads and caseload caps for SLPs (e.g., Iafrate-Bellini, 2000).

Why Is Advocacy Important?

Engagement in advocacy is important to lead to systems change. Addressing complex challenges such as overwhelming caseloads and documentation may require targeted advocacy engagement as these policies are typically developed at the state and district levels (U.S. Department of Education, n.d.). However, federal legislations such as IDEA ensure children with disabilities, including students with communication disorders, receive a free, appropriate public education (FAPE). For example, ASHA's Take Action initiative is designed to help SLPs advocate for additional funding for Part B and Part C of IDEA to ensure FAPE requirements and reduce excessive paperwork (ASHA, 2021c). Importantly, education policies affect education professionals, students, and their families, which further necessitates that the voices of SLPs are represented throughout the stages of policymaking.

Individuals who create or influence education policy typically have no background or experience in education (Fisher & Miller, 2021). For most educators, very little participation occurs in the context of influence where education policy problems, agendas, and discourses are formed (Good, 2018). Many researchers have highlighted a disconnect between education policy design, advocacy engagement, and educators (e.g., Cowen & Strunk, 2014; Darling-Hammond, 2010; Henig & Stone, 2008). However, little is known about the perceptions of SLPs as effective advocates in the public education system.

Sufficient advocacy knowledge and skill is required to perform the roles and responsibilities of school-based SLPs (ASHA, 2016). Understanding the perceived issues in education and challenges to advocacy for SLPs is critical not only to facilitate positive student outcomes but also to aid with SLP retention efforts (e.g., Farquharson et al., 2020). National statistics data from the U.S. Bureau of Labor Statistics indicate that there is a severe shortage of school-based SLPs and that job openings for SLPs are expected to increase through the year 2028 by 27% (ASHA, 2020c). The gap in supply and demand, coupled with a high turnover rate attributable to dissatisfaction in the workplace (Edgar & Rosa-Lugo, 2007), provides additional support for the need for further study of advocacy engagement by school-based SLPs. Although there is a dearth of research describing advocacy by school-based SLPs, one plausible explanation is that engagement in advocacy is motivated by both reactive motivations and proactive efforts. For example, it is possible that SLPs may engage in advocacy as a reaction to incongruities between best practice and actual practice, incompliance with federal or state mandates, or high workload.

Influencing Factors

There are multiple factors that are likely to influence the extent to which SLPs may engage in advocacy. For the purposes of the current investigation, we will focus on self-efficacy and systemic challenges.

Self-Efficacy

Self-efficacy refers to an individual's belief in their own ability to successfully engage in a task (Bandura, 1977). Self-efficacy has strong relations with one's work-related coping skills (Chang et al., 2012; Troesch & Bauer, 2017), job satisfaction (Song & Yang, 2016), and confidence with clinical tasks (Pasupathy & Bogschutz, 2013). Individuals with high self-efficacy often have high levels of optimism (Hobfoll, 2001). As such, we anticipate that self-efficacy may influence the extent to which SLPs engage in advocacy opportunities. For instance, it is plausible that SLPs who have high self-efficacy and therefore high levels of optimism suspect that their advocacy efforts will bear fruit. Although advocacy can be challenging across community, stakeholder, and systemic levels, an individual with high self-efficacy may view these less as challenges and more as opportunities to improve practice patterns and SLP visibility. Importantly, self-efficacy is well established as a multidimensional construct (e.g., Bobbio & Manganelli, 2009; Hassan & Ibourk, 2021; Murphy et al., 2001). As such and pursuant to the aims of the present investigation, we use a multidomain self-efficacy questionnaire to determine how self-efficacy may influence both SLPs' perception of advocacy importance, as well as their advocacy engagement.

Systemic Challenges

Broader systemic challenges may also hinder advocacy engagement for SLPs in school settings. An investigation by Brackenbury et al. (2008) examining the time, effort, and resources necessary for SLPs to engage in EBPs estimated that 3–7 hr are required for clinicians to define a clinical research question, examine the relevant evidence, and answer the research question. However, studies continue to show that lack of time is the most reported barrier to evidence-based implementation and interprofessional collaborative practice for school-based SLPs (e.g., Green et al., 2019; Hoffman et al., 2013; Pfeiffer et al., 2019). These findings are more troubling as SLPs in their clinical fellowships (CFs) reported a decline in exposure to research and EBPs, even though exposure to research and EBPs during the CF has been shown to significantly predict the use of EBPs later in one's career (Zipoli & Kennedy, 2005).

In addition, high workloads create time constraints that may complicate advocacy engagement and have implications for SLP burnout and retention (Farquharson et al., 2020; Ferney Harris et al., 2009; T. L. Hutchins et al., 2010; Marante & Farquharson, 2021). According to ASHA (2020a), the median monthly caseload size of ASHA-certified, full-time, school-based SLPs was 47, with elementary school clinicians servicing the highest median caseload size (50). Geographically, Arizona (65), Texas (65), and Florida (60) reported the highest caseload sizes in the country (ASHA, 2020a). Many SLPs perceive their caseloads to be unmanageable (Katz et al., 2010) and have seen an increase in unmanageable workload expectations as a result of COVID-19 (Sylvan et al., 2020). It seems plausible that these factors not only impact EBPs and interprofessional collaboration but may also reduce the likelihood of advocacy.

Existing Literature on Advocacy in Education

Few studies have examined efficacy of advocacy pedagogies in preservice teacher training programs. Massengale et al. (2014) explored strategies to develop beliefs about advocacy by providing undergraduate students with training lessons aimed at fostering foundational advocacy knowledge and skills. Participants engaged in an interactive lecture, small group activities, focus groups addressing the definition of advocacy and its phases, effective and ineffective strategies, and letter writing (Massengale et al., 2014). Using a mixed-methods approach, investigators used quantitative and open-ended qualitative questions to measure advocacy participation and beliefs as well as prior advocacy experiences. Findings indicated a significant positive correlation between individual advocacy experiences and advocacy beliefs, suggesting that meaningful advocacy training contributed to shifts in self-efficacy.

A small body of research explores two perspectives of advocacy development for educators: teacher advocacy (e.g., educator activism beyond the school) and teacher leadership (e.g., educational leadership within the school; Bradley-Levine, 2018). For example, Derrington and Anderson (2020) investigated the perceptions and experiences of 138 educators who participated in a year-long fellowship to increase knowledge of educational policy and advocacy. Following the fellowship, participants were administered a survey, and responses were analyzed for group differences (Derrington & Anderson, 2020). Though associations between advocacy perceptions and years of teaching experience were found to be nonsignificant, descriptive analysis suggested that participants perceived themselves as effective policy advocates at the local level (e.g., peers, parents, and administration) but not at the state level (e.g., state representatives).

Existing research suggests that advocacy training, whether received before or after entering the workforce, increases involvement and improves self-efficacy (e.g., Bond, 2016; Derrington & Anderson, 2020; Lyons et al., 2015; Massengale et al., 2014). Conversely, barriers to advocacy, such as lack of awareness of education policy issues, limited resources and training opportunities, and accessibility to state officials, inhibit clinicians from engaging in advocacy (Heinowitz et al., 2012). Due to a paucity in advocacy literature specific to the field of speech-language pathology, additional research is needed to

understand what factors influence advocacy engagement and self-efficacy of SLPs serving in the public schools.

Research Questions

Toward addressing existing gaps and adding to the knowledge base of advocacy, this study aimed to address the following research questions:

1. To what extent do school-based SLPs engage in advocacy?
2. How do school-based SLPs perceive their preparedness and self-efficacy of advocacy in education?
3. Do demographic characteristics (i.e., age and years of experience), prior advocacy engagement, or perceived level of advocacy importance predict self-efficacy of school-based SLPs?
4. What are perceived issues in education requiring advocacy and challenges to advocacy engagement for school-based SLPs?

Method

Data for this study were gathered as part of a larger online survey study of advocacy engagement and self-efficacy distributed widely across educational personnel in the state of Florida. The project was approved by the university human subjects committee (#00002054). Utilizing Qualtrics, investigators invited educators currently employed in Florida's public schools (prekindergarten to Grade 12) to participate in the study. The larger study included 8,809 consented educational personnel, including general educators, coaches, paraprofessionals, and SLPs. This study focused on respondents who were SLPs (n = 194).

Participants

Participants were recruited using district-level public records requests and an external research data request from the Florida Department of Education (FLDOE) to obtain instructional staff e-mails. Approximately 2,709 SLPs were invited to participate in the survey. A total number of 194 SLPs opened the link and began the survey. Of those who opened the survey, 157 SLPs (81%) completed the survey in its entirety. A precise response rate could not be calculated, as some invitations failed to reach intended recipients due to technological barriers. Ultimately, there was no requirement to provide identifying information as part of this study, and survey data were stored on a password-protected university server to ensure the privacy of participants.

Demographic data for participants are displayed in Table 1. The majority of participants self-identified as White females and had an average age of 41.8 years (SD = 12.6). On average, participants reported they had worked in the schools for 14.1 years (SD = 11.3). The majority of participants (86.6%) held a master's degree, and a small percentage (9.3%) reported attaining a bachelor's degree or PhD/EdD (2%) as highest degree earned. Participants reported working primarily with students in the elementary grades (78.9%), with smaller percentages of SLPs serving students in middle (38.1%) or high school (23.2%). Due to adjustments in instruction during the COVID-19 pandemic, participants were also asked to indicate their primary method of service delivery for the 2020–2021 school year. The majority of participants provided hybrid instruction (in person and virtual instruction simultaneously; 47.9%) compared to traditional in-person (36.1%) or virtual (7.2%) instruction.

Table 1. Demographic characteristics of the sample of speech-language pathologists (n = 194).

Respondent characteristics	*n*	%
Sex		
Female	182	93.8
Male	9	4.6
Nonbinary/third gender	1	0.5
Prefer not to say	2	1.0
Ethnicity		
Hispanic or Latino	30	15.5
Not Hispanic or Latino	164	84.5
Race		
African American/Black	11	5.7
Asian/Pacific Islander	1	0.5
White	167	86.1
Multiracial/biracial	10	5.2
Other	5	2.6
Highest degree earned		
Bachelor's	18	9.3
Master's	168	86.6
PhD	3	1.5
EdD	1	0.5
Other	2	1.0
Grade levels served		
Elementary (prekindergarten to Grade 5)	153	78.9
Middle (Grades 6–8)	74	38.1
High (Grades 9–12)	45	23.2
Service delivery (2020–2021)		
In-person	70	36.1
Virtual	14	7.2
Hybrid	93	47.9
Other	17	8.8

Note. Total for grade levels served exceeds 100% because many SLPs indicated serving multiple grade levels.

Survey Instrument

The survey included 75 Likert and open-ended questions aimed at exploring engagement and perceptions of advocacy. The final survey items were informed by empirical reports of influencing factors and challenges to advocacy competence (e.g., Gartin et al., 2002; Heinowitz

et al., 2012) and were adopted and modified from existing surveys (e.g., Ratts & Ford, 2010). Specifically, the survey included six sections described in detail below including demographic questions, advocacy training history, advocacy engagement history, advocate self-identification, stakeholder engagement, and self-efficacy. For clarity, the following definition of advocacy was provided to participants prior to and during the survey: an activity by an individual or group that aims to influence decisions within the education system and includes activities and publications that influence education policy, laws, and budgets by using facts, relationships, the media, and messaging to educate government officials and the public.

Demographic Questions

Twelve items were included to solicit information about the characteristics of participants. These included questions about biological sex, age, race and ethnicity, highest level of education, certifications, years of practice, and years served in current position. We also queried participants regarding their current school district, grade levels taught, and primary method of instructional delivery during the 2020–2021 school year (e.g., in person, virtual, or hybrid).

Advocacy Training History

Six items were used to examine participants' training history in advocacy. Training in advocacy was defined for participants as any formal or informal learning opportunities related to advocacy in education, such as coursework or professional development. Participants were asked to indicate if they participated in advocacy training (e.g., yes or no) and if their school and school district provide advocacy training (e.g., yes, no, or not sure). Participants who indicated prior participation in advocacy training were probed to share where they received advocacy training (e.g., self-study, college or university, professional development course, or professional conference). An additional option (e.g., other) was provided as an open-ended text entry for participants who received training outside the presented options. Finally, questions regarding how many trainings participants attended before and during the 2020–2021 academic year were presented with an open-text numeric value entry.

Advocacy Engagement History

Six items were selected to measure participation in advocacy events and activities. Advocacy events and activities were defined for participants as any gatherings related to advocacy in education, such as advocacy workshops, fundraisers, marches, or meetings with state and U.S. representatives. Initially, participants were asked if they participated in advocacy events (e.g., yes or no). Participants who indicated participation were asked to share where they participated in advocacy events (e.g., school event, district event, state event, national event, or virtual event). An additional option (e.g., other) was provided as an open-ended text entry for those who participated in events or activities outside the presented options. The number of events attended before and during the 2020–2021 school year by participants was then measured with an open-text numeric value entry. Lastly, two additional questions allowed participants to specify the types of advocacy activities they engaged in during the two time periods (see Supplemental Material S1 for full survey items).

Advocate Self-Identification

Nine items were used to explore participants' advocacy identity. Perceived importance and preparedness as an advocate in education were measured with two questions: "How do you view your current or potential role as an advocate in education?" and "How well-equipped do you feel to be an effective advocate?" Response options were presented on a 1–5 scale for both questions (e.g., *extremely important* to *not at all important* and *extremely well* to *not well at all,* respectively). Five items, including three open-ended questions, were used to elicit perceived issues in education and challenges to advocacy engagement. The final two items provided lists allowing participants to select prospective advocacy activities and resources of interest that could aid in future advocacy efforts.

Stakeholder Engagement

Twelve items were developed to gauge participants' engagement and perceptions of support from fellow education stakeholders. For the purpose of this section, the term *stakeholder* referred to administrators, parents, teachers (i.e., instructional staff, including SLPs), and students. Stakeholders were represented on a spectrum based on perceived distance, from the local and district levels to the state and federal levels (e.g., students and parents, fellow teachers, assistant principal and principal, school board members and superintendent, FLDOE, and state and U.S. representatives). Six items asked participants to indicate how likely they were to communicate with education stakeholders when advocating for key issues or topics in education. Response options were presented on a 1–5 scale of likeliness, including *extremely likely, somewhat likely, neither likely nor unlikely, somewhat unlikely,* and *extremely unlikely.* These six items had a high internal consistency, as measured by Cronbach's alpha ($\alpha = .80$). Participants were then asked to rate their perceived sense of support across stakeholder groups on a sliding scale from 1 (e.g., unsupported) to 10 (e.g., highly supported; $\alpha = .82$).

Self-Efficacy

Thirty items were adopted and modified from the Advocacy Competencies Self-Assessment Survey (Ratts &

Ford, 2010). These items assessed to what extent participants assessed their own competence and effectiveness as an advocate in education using a 1–5 scale (*always, most of the time, about half the time, sometimes,* and *never*). Self-assessment items were representative of six advocacy domains: stakeholder empowerment (e.g., "It is difficult for me to identify effective advocacy strategies and resources"), community collaboration (e.g., "I alert community or school groups with concerns that I become aware of through my work with students and fellow teachers"), public information (e.g., "I am able to communicate in ways that are ethical and appropriate when taking issues in education public"), stakeholder advocacy (e.g., "I am comfortable with negotiating for relevant services on behalf of students"), systems advocacy (e.g., "I am able to analyze the sources of political power and social systems that influence student and teacher development"), and social/political advocacy (e.g., "I lobby legislators and policymakers to create change in the education system"). Domain scores had a possible range between 5 and 25, and total score had a possible range between 30 and 150; with high scores indicating positive self-perception of advocacy competence and effectiveness. Cronbach's alpha for the 30 advocacy self-efficacy items was .92.

Procedure

Design of the Survey

After the initial development of survey items, the items were distributed to an advisory committee of eight reviewers who were asked to provide feedback and suggestions for revisions. The advisory committee was composed of diverse stakeholders, including teachers, SLPs, and education researchers. The feedback form consisted of seven questions that allowed members of the advisory committee to review the general content for strengths and weaknesses, evaluate the organization of the survey items along with the transitions, identify any unclear items, and make suggestions for additional items that were important to include. Finally, the reviewers were asked to rate the length, clarity, and relevancy of the survey using a 5-point scale.

Overall, reviewers reported that the survey items were relevant and worded clearly. Reviewers indicated that the topic of the survey was of increasing importance and required further exploration. The length of the first iteration of the survey (20 min) was identified as a weakness. By removing redundant items, the estimated time of completion was reduced to 18 min. Additionally, reviewers highlighted a need to define terms related to advocacy to maximize clarity. Thus, definitions with examples of advocacy, advocacy training, and advocacy events were added to the informed consent page and each respective section.

Soliciting and Collecting Survey Responses

The survey was distributed via Qualtrics (Qualtrics, 2020). Distribution lists were created to track participation during the distribution and collection period. The investigators sent a reminder invitation 1 month after the initial distribution of the survey to increase response rate (Dillman, 2000). The survey was open and available to participants for a total of 3 months from March 2021 to June 2021.

Analyses

To address Research Questions 1 and 2, descriptive statistics were used to describe the extent to which school-based SLPs engage in advocacy, as well as their perceptions and self-efficacy of advocacy. For our third research question, hierarchical regression analyses were used to examine the unique and combined predictive effects of demographic characteristics (i.e., age and years of experience), prior advocacy engagement, and perceived level of advocacy importance on self-efficacy. Specifically, we aimed to answer if prior advocacy engagement and perceived advocacy importance significantly predict self-efficacy, above and beyond age and years of experience.

Finally, we conducted a content and natural language processing analyses of open-ended responses to identify the major themes in perceived issues in education and challenges to advocacy engagement that were nominated by respondents. First, free-text comments containing participant responses were analyzed using Leximancer Version 4.5, a natural language software tool (Leximancer, 2020). The rationale for the use of Leximancer was twofold: (a) to reduce coder bias in identifying recurrent and repeated constructs and (b) to leverage advanced text analytic methods to allow for the identification of themes that goes beyond word counting. Further support for the use of Leximancer was provided by findings in the literature that compared software-aided thematic analysis and manual concept and theme coding and substantiated usability of Leximancer for the identification of themes (Harwood et al., 2015). Consistent with standard procedures for using Leximancer, an exploratory topic modeling analysis was then conducted on the free-text comments using latent Dirichlet allocation for the identification of probabilistic vectors based on lists of words relevant to topic clusters. Next, we reviewed text excerpts associated with each exploratory topic cluster to identify themes based on the repetition, recurrence, and relative relevance of specific words to a topic cluster or construct (Owen, 1984). The final constructs were then visually represented in two figures using Leximancer.

Results

Advocacy Engagement

To answer the first research question, regarding the extent to which school-based SLPs engage in advocacy,

we first report descriptive statistics. When asked about the availability of advocacy training at their school, most respondents indicated that no advocacy training was offered (n = 75 or 39%) or that they did not know if advocacy training was offered (n = 91 or 47%). Similarly, in their district, 78% of respondents reported no offerings or knowledge of advocacy training opportunities. Of the 194 respondents, only 15% reported that they have received training in advocacy. For those who have received training, the average number of trainings attended was 4.28 (SD = 4.95) and were received primarily at professional development courses (45%), through self-study (25%), and/or during their preservice training (14%). Few respondents (n = 28 or 14%) also reported that they have participated in an advocacy event. The average number of events attended was 3.96 (SD = 3.97), with most attended events taking place at the school (23%), district (30%), and/or state (20%) levels. Attending an in-person or virtual advocacy event (19%), signing a petition or open letter to a state or U.S. representative (18%), writing a letter or e-mailing a state or U.S. representative (14%), and participating in an informative advocacy workshop (13%) were among the most popular advocacy activities reported by respondents. Finally, when asked what tools would be most helpful to support future advocacy efforts, respondents selected online petitions (15%), easy access to contact information for state and U.S. representative (15%), educational sessions on specific advocacy topics or strategies (14%), advocacy alert e-mails (12%), and materials to share with colleagues about advocacy topics of interest (12%).

To describe responses related to stakeholder engagement, means and standard deviations are reported in Table 2. Respondents indicated that, when advocating for key issues or topics in education, they are more likely to communicate with fellow teachers than parents or school administrators and least likely to communicate with district administrators, state and U.S. representatives, or the state department of education. Similarly, respondents reported feeling the most supported by those within their school (i.e., fellow teachers, school administrators, students, and parents) compared to those outside their school (i.e., school board and superintendent, FLDOE, and state and U.S. representatives; see Figure 1).

Preparedness and Self-Efficacy

To answer the second research question, we examined SLPs responses to questions of their perceptions of importance, preparedness, and self-efficacy of advocacy. When asked to rate how important they view their current or potential role as an advocate in education, the majority of respondents indicated that they view their role as "extremely important" or "very important" (n = 108 or 60%); 35% (n = 65) of respondents viewed their respective advocacy role as "moderately" or "slightly important," and only 5% (n = 10) of respondents reported that their role as an advocate was "not at all important." When asked how well-equipped (i.e., skills knowledge and resources) they feel to be an effective advocate, most respondents (n = 82 or 45%) reported "slightly well" to "not well at all"; 31% (n = 57) reported "moderately well," whereas 24% (n = 43) reported "very well" to "extremely well."

Responses related to self-efficacy show moderate perceived competence and effectiveness in the stakeholder advocacy domain (M = 15.95, SD = 3.91) and the stakeholder empowerment domain (M = 14.76, SD = 2.36). Respondents expressed lower self-efficacy in their ability to build local alliances and collaborate with the community (community collaboration domain; M = 13.19, SD = 4.16). Furthermore, respondents perceived themselves to be least efficacious in their ability to assess the requirements of larger systems advocacy (systems advocacy domain; M = 11.95, SD = 4.36), engage in legislative advocacy with legislators and policymakers (social/political advocacy domain; M = 11.69, SD = 3.82), and communicate and/or disseminate information to the media and the public (public information domain; M = 11.45, SD = 3.55). Overall, respondents at large rated themselves to be moderately efficacious as advocates in education (M = 78.99, SD = 18.24). For an item-level breakdown of responses, please see Supplemental Materials S1 and S2.

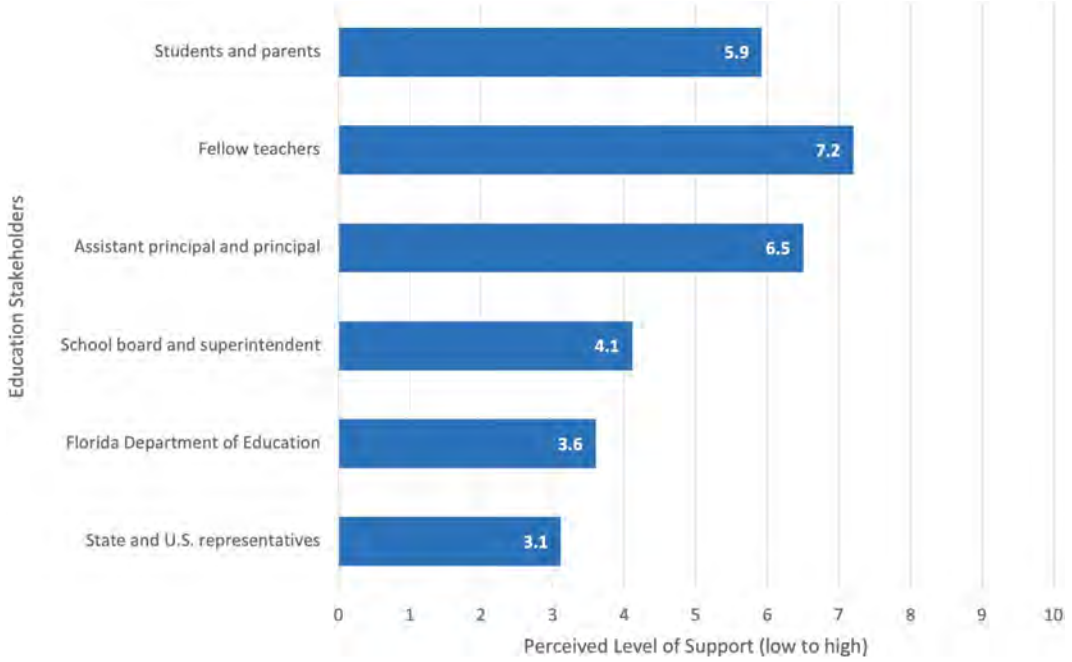
Predictors of Self-Efficacy

To address our third research question, which considered relations between demographic characteristics and other potential predictors of self-efficacy in advocacy, we

Table 2. Distribution of responses on items related to stakeholder engagement.

When advocating for key issues or topics in education, how likely are you to communicate with:	*n*	*M*	*SD*	Extremely likely	Somewhat likely	Neither likely nor unlikely	Somewhat unlikely	Extremely unlikely
Parents	170	2.65	1.19	16%	37%	21%	17%	9%
Fellow teachers	169	1.86	0.81	32%	56%	7%	3%	2%
Assistant principal and principal	169	2.70	1.15	14%	38%	19%	23%	6%
School board members and superintendent	169	3.37	1.28	5%	28%	18%	23%	26%
Florida Department of Education	169	3.44	1.31	5%	26%	20%	17%	32%
State and U.S. representatives	169	3.14	1.39	10%	33%	17%	13%	27%

Figure 1. Perceived level of support from education stakeholders.



used hierarchical multiple regression. Specifically, we evaluated the extent to which prior advocacy engagement (i.e., training and event participation) and perceived level of advocacy importance predict self-efficacy above and beyond the variance in self-efficacy accounted for by a set of demographic variables (i.e., age and years of experience). Preliminary analyses were conducted to ensure no violation of the assumptions of normality, linearity, multicollinearity, and homoscedasticity were present. Age and years of experience were entered at Step 1, explaining 5% of the variance in self-efficacy. After entry of prior advocacy engagement and perceived level of advocacy importance at Step 2, the total variance explained by the model was 17%, $F(5, 149) = 7.10$, $p < .001$. Advocacy engagement and perceived importance explained an additional 12% of the variance in self-efficacy after controlling for age and years of experience, R^2 change = .120, F change $(3, 149) = 8.33$, $p < .001$. In the final model, only age and perceived advocacy importance were statistically significant with perceived advocacy importance recording a higher semipartial correlation value ($sr = .36$, $p < .001$) than age ($sr = -.20$, $p = .015$; see Tables 3 and 4).

Issues and Challenges

Finally, we examined the open-ended responses of school-based SLPs to two questions: (a) What is the most important issue or topic in education to advocate for right now? (b) What is the most significant factor hindering SLPs from engaging in advocacy?

As visually represented in Figure 2, comments regarding the most important issues or topics requiring advocacy revealed four overarching themes of *Teachers, Education, Rights,* and *Health.* The majority of comments were strongly associated with the *Teachers* theme and addressed an amalgamation of issues relevant to the success of teachers and their efforts in the classroom. One participant's comment served as a prime example of the multifaceted issues present in the *Teachers* theme, for example, "Adequate RTI [response to intervention], training for instructional assistants that work with ESE [exceptional student education] students, retention of effective workers/teachers, funding for ESE programs/resources,

Table 3. Zero-order correlations for measured advocacy variables.

Variable	Correlations					
	1	2	3	4	5	6
1. Self-efficacy score	1	−.16*	−.06	.04	.04	.37**
2. Age		1	.85**	.14*	.13	−.11
3. Years of experience			1	.12	.09	−.05
4. Advocacy training				1	.28**	.07
5. Advocacy event					1	.15*
6. Perceived importance						1

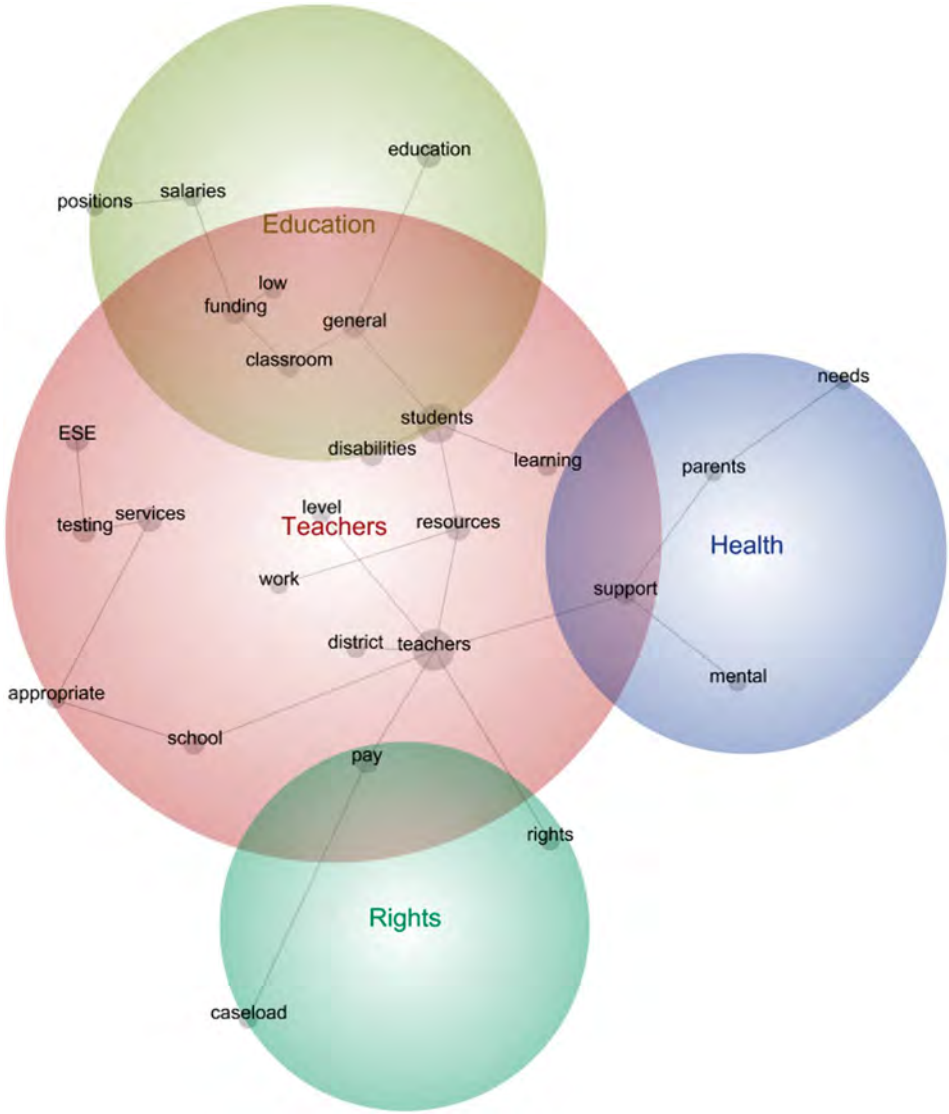
*$p < .05$. **$p < .001$.

Table 4. Results of hierarchical multiple regression on predictors of self-efficacy.

Step and predictor variables	*B*	*SE B*	β	*sr*	Change in R^2	R^2
Step 1					.05*	.05
Constant	100.03	7.09				
Age	−0.72	0.24	−.50**	−.23		
Years of experience	0.62	0.27	.39*	.18		
Step 2					.12***	.17
Constant	73.30	8.68				
Age	−0.61	0.23	−.43**	−.20		
Years of experience	0.55	0.26	.35*	.16		
Advocacy engagement						
Training	0.27	0.59	.04	.03		
Event participation	−0.02	0.65	.00	.00		
Perceived advocacy importance	6.41	1.32	.37***	.36		

*$p < .05$. **$p < .01$. ***$p < .001$.

Figure 2. Thematic analysis of free-text responses for issues requiring advocacy in education. The circles depict themes in responses related to perceived issues in education and challenges to advocacy engagement. Each word, depicted alongside a shaded circle, indicates a word that frequently occurred in free-text responses. The size of the circle reflects the frequency of occurrence with larger circles indicating more frequently occurring words or concepts than smaller circles.



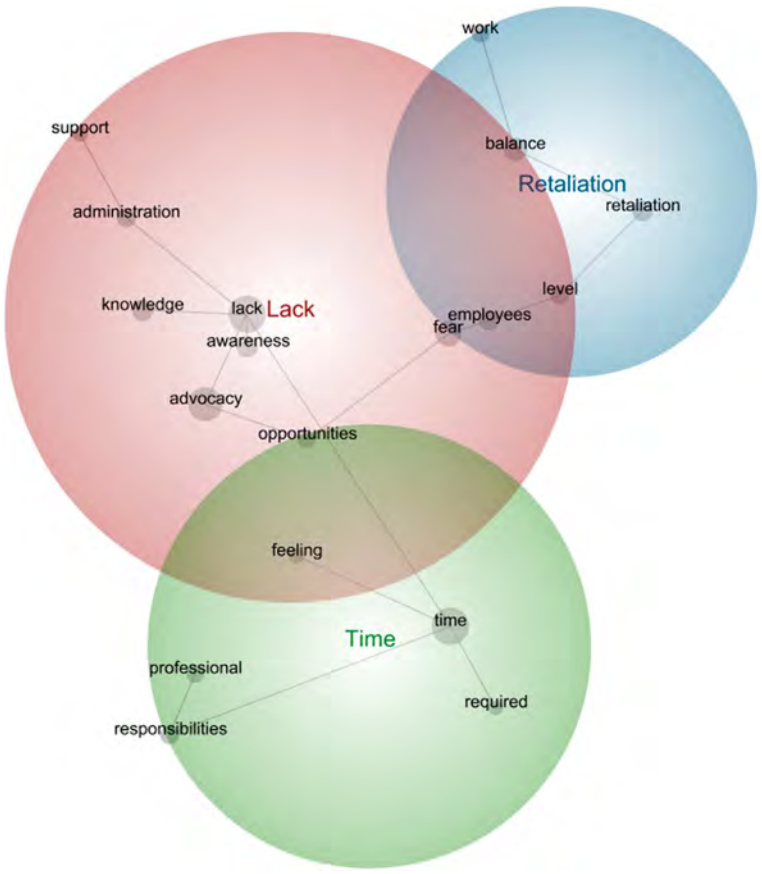
public awareness of teacher responsibilities, classroom autonomy for effective teachers." Similarly, comments in the *Education* theme were closely related to comments in the *Teachers* theme but focused primarily on issues of student education and learning, for example, "Filling in the gaps for students who are too low for general education classes but too high in skill sets for self-contained classes," and "Funding for evidence-based programs." Comments about teacher rights, including caseload and pay, were strongly associated with the *Rights* theme, for example, "Pay, caseload size, responsibilities not able to be completed during work hours, amount of paperwork" and "Teachers rights to remain healthy at the workplace." Finally, the *Health* theme included comments promoting resources for social–emotional learning and mental health for students and educators, for example, "Emotional and mental health support for students and educators."

Three overarching themes emerged from comments regarding the most significant factors hindering SLPs from engaging in advocacy: *Time, Lack*, and *Retaliation* (see Figure 3). Overall, *Time* was the most significant challenge to advocacy for school-based SLPs. One participant noted that "professional responsibilities do not allow time for advocacy," whereas another expressed that there is "so much required of us already for our jobs, who has time to do more?" A general lack of advocacy knowledge and lack of support from administration represented most comments in the *Lack* theme, for example, "Lack of knowledge of advocacy opportunities as an education professional." Finally, comments in the *Retaliation* theme cited a fear of retaliation from administrators and district-level employees as a significant hindrance to advocacy engagement, for example, "Administration backlash and lack of support."

Discussion

This study aimed to investigate advocacy engagement and self-efficacy of school-based SLPs and their perceptions of issues in education and challenges to advocacy. Key findings included relatively limited opportunities for advocacy training at the school and district levels for SLPs, as well as low training and event participation. Despite low engagement and perceived lack of preparedness, most respondents viewed their current or potential

Figure 3. Thematic analysis of free-text responses for challenges to advocacy in education.



role as an advocate to be important. When advocating for key issues in education, respondents reported a preference for communicating to stakeholders within their school rather than those outside their school. Similarly, respondents indicated that perceived level of support from these stakeholders mirrored their communication preferences. For example, SLPs reported feeling a higher level of support from stakeholders in their local environment and were more likely to communicate with them when advocating. Overall, respondents rated themselves to be most efficacious when empowering and advocating for students, parents, and fellow teachers, but least efficacious in sharing information with the public and engaging in legislative and systems advocacy. Results confirmed that age and perceived advocacy importance were significant predictors of self-efficacy. Lastly, frequently cited issues in education included lack of resources and support for educators and students, teachers' rights, and mental health; common challenges to advocacy included time constraints, lack of knowledge and support, and fear of retaliation.

Engagement in Advocacy

The finding that a majority of school-based SLPs reported no knowledge of training opportunities at their schools or in their districts substantiates the need for additional avenues of advocacy training. Although there was a broad consensus across respondents regarding the importance of advocacy, respondents reported rather low levels of engagement in trainings and events. The fact that most respondents received advocacy training through professional development courses or self-study suggests that training opportunities during preservice training are underutilized. For respondents who had engaged in advocacy, tools to improve communication with policymakers (e.g., easy access to contact information for state and U.S. representative) and access to training materials (e.g., educational sessions on specific advocacy topics or strategies) were deemed essential to improving engagement.

The finding that respondents, when advocating, were more likely to communicate with stakeholders in their local environment compared to those at state and federal levels is considered a key finding and substantiates existing evidence in the literature (e.g., Derrington & Anderson, 2020). Notably, most policies that affect school-based SLPs, such as caseload caps and documentation requirements, are typically created at the district and state levels, which may reflect a misalignment based on findings that SLPs prefer to communicate in local environments. The current findings suggest further investigation is needed to identify ways of improving access to advocacy opportunities and highlighting causes of disconnect between clinicians and advocacy. Due to the descriptive design of this study, causal inferences cannot be derived, but open-ended responses point to time constraints, lack of knowledge and support, and fear of retaliation from administration—all of which warrant further exploration.

Advocacy Preparation

The majority of SLPs acknowledged the importance of their role in advocacy, but a similar majority felt unprepared for the role. Thus, preparation for the role of advocate must be included early and often in discussions and training of speech-language pathology students and early career professionals. Undergraduate and graduate courses as well as professional development workshops should regularly and consistently include information regarding opportunities to advocate, relevant to the topic of the course. For example, ASHA showcases multiple opportunities related to salary supplements (Deppe, 2006), Medicare reimbursement rates for services (Warren & Swanson, 2020), use of Medicaid funds (Estomin, n.d.), the need for coverage for speech generating devices (White & McCarty, 2011), and use of frequency-modulated systems in classrooms (ASHA, n.d.-a). Embedding these examples—both as current opportunities and past success stories—within preservice training and early career workshops may highlight the importance of advocacy across the SLPs' scope of practice. Indeed, SLPs in advanced leadership positions have reported on the importance of their student leadership opportunities on their later local, state, and federal advocacy experiences (e.g., S. D. Hutchins, 2019).

However, the fact that SLPs did, at least, acknowledge the importance of their role in advocacy may lend support to the effectiveness of recent efforts of ASHA/NSSLHA and state associations to cultivate advocacy competence in students and new clinicians. Research suggests that student professional organizations, such as NSSLHA, are viable ways for preservice training programs to help their students engage in advocacy (e.g., Bond, 2016). In addition, ASHA offers grants to state associations to support student advocacy; this is paired with a step-by-step set of resources to aid in planning a successful student advocacy day (ASHA, n.d.-b, 2019). Some state associations have been actively supporting student advocacy for over a decade (e.g., Polovoy, 2009).

Self-Efficacy

Of the six self-efficacy domains, SLPs reported low scores in Public Information, Systems Advocacy, and Social/Political Advocacy. Taken with reported fear of retaliation and perceived low levels of support from district administration, the state department of education, and state and U.S. representatives—this finding makes sense. Logically, if SLPs are fearful of possible backlash from upper level leadership, it follows that they would report low levels of self-efficacy related to publicly sharing information, leading potentially partisan or oppositional efforts, and dealing with confrontation, particularly with

politically powerful individuals. However, this finding is also somewhat concerning, as conflict resolution is a required knowledge and skill for SLPs who engage in clinical supervision (ASHA, 2008). New to the 2020 ASHA standards was a professional development requirement for any SLP or audiologist who formally supervises student clinicians or CFs (ASHA, 2020b). Thus, as more SLPs receive supervision professional development, we may see an increase in self-efficacy in these areas related to conflict resolution abilities. There may also be a call here for the need to raise leadership's awareness of this fear of retaliation. Messaging from educational leaders on the value of constituent input may assuage these concerns, but more research is required to assess its effectiveness.

Although supporting students and new clinicians in advocacy efforts should continue to be a priority, our results also indicate the need to support later career professionals. Specifically, we found that older SLPs reported lower self-efficacy. This is counter to our hypothesis that more experienced SLPs would be more likely to perceive themselves as effective advocates. However, our current results are in alignment with previous literature regarding caseload manageability (Katz et al., 2010). In Katz et al.'s (2010) study, SLPs with fewer years of experience reported more manageable caseloads compared to SLPs with more years of experience, and this was regardless of the actual size of the caseload. Thus, perhaps we observed aspects of burnout (Marante & Farquharson, 2021), in which SLPs who have been practicing for longer periods of time are also experiencing emotional exhaustion (Gong et al., 2013). If SLPs are experiencing emotional exhaustion, more research is needed to understand its contribution to self-efficacy.

We also found that advocacy engagement and perceived importance helped to explain significant variance in self-efficacy. This is consistent with previous studies reporting a positive correlation between an individual's advocacy beliefs and experiences and their sense of self-efficacy (e.g., Massengale et al., 2014; Ramírez Stege et al., 2017). For SLPs who prescribe to the importance of advocacy but who have not yet engaged meaningfully in advocacy may just require "getting in the ring" to obtain the necessary experiences to improve self-efficacy. However, more research is needed to investigate if these first steps in advocating lead to a cascading effect that sparks further interest in seeking advocacy experiences. Additionally, more empirical evidence is required to draw causal inferences between increased engagement and higher self-efficacy over time.

Issues in Education and Challenges to Advocacy

Central to this study were findings related to the most pressing issues in education and perceived barriers to advocacy for school-based SLPs. Participant responses to open-ended questions affirm that the most significant issues in education are complex. The themes that emerged suggest more resources (e.g., funding) and support, including those for social–emotional learning and mental health, are desired by SLPs to best serve their students and maintain a high level of practice. Along with adequate pay and caseload size, these issues are consistent with reported factors that hinder evidence-based implementation and interprofessional collaboration (e.g., Hoffman et al., 2013; Iafrate-Bellini et al., 2010; Katz et al., 2010). Unique to this study, findings also support existing evidence that illuminate the need for educators' voices in education policymaking (e.g., Good, 2018).

The fact that respondents largely identified time as a barrier is consistent with the literature on other barriers and systemic challenges to implementation of EBPs (e.g., Brackenbury et al., 2008). Although previous literature has not directly examined time constraints on advocacy, the current findings appear to be aligned with common reports that time constraints related to high workloads is among the most reported barrier to other related systems change (e.g., Green et al., 2019; Hoffman et al., 2013; Pfeiffer et al., 2019). The earlier finding that perceived advocacy importance was the best predictor of self-efficacy is significant as it indicates that lack of awareness or knowledge of advocacy may be easily remedied with adequate opportunities. However, the finding that school-based SLPs may be avoiding advocacy activities due to fear of retaliation from administration is troubling and requires further investigation. Research is needed to determine to what extent challenges to advocacy influence participation in trainings and events. Although not empirically studied, it seems reasonable that innovative tools to increase advocacy engagement (e.g., advocacy alerts and policy infographics) or more efficient modes of professional development delivery (e.g., microcredentialing) may offer solutions to these challenges.

Limitations

Several limitations should be considered when interpreting the current findings. Though the survey was broadly distributed, only 7% of invited SLPs opened the invitation to the study and attempted the survey. Due to the low response rate, our findings may not provide a comprehensive picture of the state of advocacy engagement and self-efficacy for school-based SLPs. Similarly, it is possible that the length of the survey deterred some respondents (19%) from completing the survey in its entirety. The limited range of the rating scale (1–5) should be considered when interpreting findings related to perceived advocacy importance and self-efficacy. Although use of a 5-point scale is common practice (Dillman, 2000), it is possible that the limited range negatively affected the sensitivity of the survey tool or constrained the potential for further variability in self-efficacy between participants

who varied in experience and/or engagement. In future work, it would be necessary to compare the findings with inclusion of other methods (e.g., interviews) or other question types (e.g., 100-point sliding scale) that would allow for smaller increments of the measure or detect a broader range of variability in self-efficacy. Additionally, it is likely that the relations between measures may vary depending on the type of scale or response option employed.

Potential limitations of the measures should also be considered in interpreting the results. This study considered only six aspects of advocacy, which we readily acknowledge as a limitation. Recognizing the multifaceted nature of advocacy engagement and self-efficacy, there are most likely several unmeasured factors that contribute to variability such as motivation, access to resources, history of advocacy success, and local and state policy environments. Furthermore, the use of only one state in sampling was also a limitation in this study. Although Florida was of particular interest for this study due to the reportedly high average caseload size (ASHA, 2020a), it cannot be assumed that SLPs in states with lower caseload sizes would report similar barriers. We recognize that advocacy engagement may vary across different states; however, due to practical constraints, it was not possible to sample broadly during this preliminary study. Additional research is warranted to study SLPs working in other geographical regions and contexts, as well as the consideration of potential covariance between factors in predicting advocacy engagement and self-efficacy.

Future Directions

Collectively, the findings compel the need for more extensive empirical study of the potential effects of professional development and preservice training on ratings of advocacy importance and self-efficacy. Our findings point to the need for causal research examining the extent to which professional development and self-efficacy can improve advocacy engagement by school-based SLPs. Although it is beyond the scope of the current design to conclusively identify mechanisms to improve advocacy engagement and self-efficacy, it is plausible that not all SLPs have sufficient exposure to preservice training in advocacy. Furthermore, although not empirically tested, additional training may result in increased appreciation for advocacy and a marked improvement in self-efficacy over time. Equally possible, but not tested, is that advocacy engagement varies substantially across advocacy subdomains, geographic locations, and policy environments, requiring specific training and resources unique to those areas. Given the strong relations found in this study between perceived importance of advocacy and self-efficacy, it stands to hypothesize that providing preservice training may contribute to improved advocacy engagement later in one's career. Among many factors that warrant further exploration, the current findings lend support for the need for more empirical research to develop and test innovative approaches to decreasing workloads and improving advocacy engagement and self-efficacy.

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References

American Speech-Language-Hearing Association. (n.d.-a). *Hearing assistive technology systems (HATS) for children*. https://www.asha.org/public/hearing/hearing-assistive-technology-for-children/

American Speech-Language-Hearing Association. (n.d.-b). *Student advocacy day*. https://www2.asha.org/Advocacy/stateleaders/Student-Advocacy/

American Speech-Language-Hearing Association. (2008). *Knowledge and skills needed by speech-language pathologists providing clinical supervision*. https://www.asha.org/policy/ks2008-00294/

American Speech-Language-Hearing Association. (2010). *Roles and responsibilities of speech-language pathologists in schools* [Professional issues statement]. https://www.asha.org/policy/PI2010-00317

American Speech-Language-Hearing Association. (2016). *Scope of practice in speech-language pathology* [Scope of practice]. https://doi.org/10.1044/policy.SP2016-00343

American Speech-Language-Hearing Association. (2019). *ASHA 2019 state association grants*. https://www2.asha.org/uploadedFiles/ASHA-2019-State-Association-Grants.pdf

American Speech-Language-Hearing Association. (2020a). *2020 Schools survey: SLP caseload and workload characteristics*. https://www.asha.org/siteassets/surveys/2020-schools-survey-slp-caseload.pdf

American Speech-Language-Hearing Association. (2020b). *Professional development requirements for the 2020 audiology and speech-language pathology certification standards*. https://www.asha.org/certification/prof-dev-for-2020-certification-standards/

American Speech-Language-Hearing Association. (2020c). *Supply and demand resource list for speech-language pathologists*. https://www.asha.org/uploadedFiles/Supply-Demand-SLP.pdf

American Speech-Language-Hearing Association. (2021a). *ASHA 2021 public policy agenda*. Nxtbook. https://www.nxtbook.com/nxtbooks/asha/publicpolicyagenda_2021/

American Speech-Language-Hearing Association. (2021b). *House appropriations committee advances funding legislation; Includes significant increases for IDEA, EHDI, and CSD research*. https://www.asha.org/news/2021/house-appropriations-committee-advances-funding-legislation-includes-significant-increases-for-idea-ehdi-and-csd-research/

American Speech-Language-Hearing Association. (2021c). *Promote access to education services and supports*. https://cqrcengage.com/asha/file/FbYiRC6m9sU/SchoolBasedFundingIssueBrief2021.pdf

Bandura, A. (1977). Self-efficacy: Toward a unifying theory of behavioral change. *Psychological Review, 84*(2), 191–215. https://doi.org/10.1037/0033-295X.84.2.191

Beacham, C. V., & Shambaugh, N. (2007). Advocacy as a problem-based learning (PBL) teaching strategy. *International Journal of Teaching and Learning in Higher Education, 19*(3), 315–324. https://www.isetl.org/ijtlhe/pdf/IJTLHE240.pdf

Bobbio, A., & Manganelli, A. M. (2009). Leadership self-efficacy scale: A new multidimensional instrument. *TPM—Testing, Psychometrics, Methodology in Applied Psychology, 16*(1), 3–24. http://www.tpmap.org/wp-content/uploads/2014/11/16.1.1.pdf

Bond, N. (2016). Preservice teacher leaders learn to advocate legislatively through professional organizations. *Journal of Curriculum and Teaching, 5*(2), 25–36. https://doi.org/10.5430/jct.v5n2p25

Brackenbury, T., Burroughs, E., & Hewitt, L. E. (2008). A qualitative examination of current guidelines for evidence-based practice in child language intervention. *Language, Speech, and Hearing Services in Schools, 39*(1), 78–88. https://doi.org/10.1044/0161-1461(2008/008)

Bradley-Levine, J. (2018). Advocacy as a practice of critical teacher leadership. *International Journal of Teacher Leadership, 9*(1), 47–62. https://files.eric.ed.gov/fulltext/EJ1182705.pdf

Chang, E., Eddins-Folensbee, F., & Coverdale, J. (2012). Survey of the prevalence of burnout, stress, depression, and the use of supports by medical students at one school. *Academic Psychiatry, 36*(3), 177–182. https://doi.org/10.1176/appi.ap.11040079

Cowen, J., & Strunk, K. O. (2014). *How do teachers' unions influence educational policy? What we know and what we need to learn*. The Education Policy Center at Michigan State University. https://files.eric.ed.gov/fulltext/ED558142.pdf

Darling-Hammond, L. (2010). Teacher education and the American future. *Journal of Teacher Education, 61*(1–2), 35–47. https://doi.org/10.1177/0022487109348024

Deppe, J. (2006). Advocacy pays off, new salary bills pass in Oklahoma and Rhode Island. *The ASHA Leader, 11*(12), 1–19. https://doi.org/10.1044/leader.AN.11122006.1

Derrington, M. L., & Anderson, L. S. (2020). Expanding the role of teacher leaders: Professional learning for policy advocacy. *Education Policy Analysis Archives, 28*(68), 1–17. https://doi.org/10.14507/epaa.28.4850

Dillman, D. (2000). *Mail and Internet surveys: The tailored design method* (2nd ed.). Wiley.

Dowden, P., Alarcon, N., Vollan, T., Cumley, G., Kuehn, C., & Amtmann, D. (2006). Survey of SLP caseloads in Washington State schools: Implications and strategies for action. *Language Speech and Hearing Services in the Schools, 37*(2), 104–117. https://doi.org/10.1044/0161-1461(2006/013)

Edgar, D. L., & Rosa-Lugo, L. I. (2007). The critical shortage of speech-language pathologists in the public school setting: Features of the work environment that affect recruitment and retention. *Language, Speech, and Hearing Services in Schools, 38*(6), 31–46. https://doi.org/10.1044/0161-1461(2007/004)

Estomin, E. (n.d.). *Success story: Returning SLP-generated Medicaid funds to the SLP budget*. American Speech-Language-Hearing Association. https://www.asha.org/slp/schools/salaries/success-estomin/

Ezell, M. (2001). *Advocacy in the human services*. Cengage Learning.

Fallon, K. A., & Katz, L. A. (2008). Augmentative and alternative communication and literacy teams: Facing the challenges, forging ahead. *Seminars in Speech and Language, 29*(2), 112–119. https://doi.org/10.1055/s-2008-1079125

Farquharson, K., & Boldini, L. (2018). Variability in interpreting "educational performance" for children with speech sound disorders. *Language, Speech, and Hearing Services in Schools, 49*(4), 938–949. https://doi.org/10.1044/2018_LSHSS-17-0159

Farquharson, K., Therrien, M., Barton-Hulsey, A., & Brandt, A. F. (2020). How to recruit, support, and retain speech-language pathologists in public schools. *Journal of School Leadership,* 1052684620966062. https://doi.org/10.1177/1052684620966062

Ferney Harris, S., Prater, M. A., Dyches, T. T., & Allen Heath, M. (2009). Job stress of school-based speech-language pathologists. *Communication Disorders Quarterly, 30*(2), 103–111. https://doi.org/10.1177/1525740108323856

Fisher, K., & Miller, K. M. (2021). Legislative advocacy for special educators. *Teaching Exceptional Children, 53*(3), 244–252. https://doi.org/10.1177/0040059920970988

Gartin, B. C., Murdick, N. L., Thompson, J. R., & Dyches, T. T. (2002). Issues and challenges facing educators who advocate for students with disabilities. *Education and Training in Mental Retardation and Developmental Disabilities, 37*(1), 3–13. https://www.jstor.org/stable/23879578

Gong, T., Zimmerli, L., & Hoffer, H. E. (2013). The effects of transformational leadership and the sense of calling on job burnout among special education teachers. *Journal of School Leadership, 23*(6), 969–993. https://doi.org/10.1177/105268461302300603

Good, A. G. (2018). *Teachers at the table: Voice, agency, and advocacy in educational policymaking*. Rowman & Littlefield.

Green, L., Chance, P., & Stockholm, M. (2019). Implementation and perceptions of classroom-based service delivery: A survey of public school clinicians. *Language, Speech, and Hearing Services in Schools, 50*(4), 656–672. https://doi.org/10.1044/2019_LSHSS-18-0101

Harwood, I. A., Gapp, R., & Stewart, H. (2015). Cross-check for completeness: Exploring a novel use of Leximancer in a grounded theory study. *The Qualitative Report, 20*(7), 1029–1045. https://doi.org/10.46743/2160-3715/2015.2191

Hassan, O., & Ibourk, A. (2021). Burnout, self-efficacy and job satisfaction among primary school teachers in Morocco. *Social Sciences & Humanities Open, 4*(1), 100148. https://doi.org/10.1016/j.ssaho.2021.100148

Heinowitz, A. E., Brown, K. R., Langsam, L. C., Arcidiacono, S. J., Baker, P. L., Badaan, N. H., Zlatkin, N. I., & Cash, R. E. (2012). Identifying perceived personal barriers to public policy advocacy within psychology. *Professional Psychology: Research and Practice, 43*(4), 372–378. https://doi.org/10.1037/a0029161

Henig, J. R., & Stone, C. N. (2008). Rethinking school reform: The distractions of dogma and the potential for a new politics of progressive pragmatism. *American Journal of Education, 114*(3), 191–218. https://doi.org/10.1086/529500

Hobfoll, S. E. (2001). The influence of culture, community, and the nested-self in the stress process: Advancing conservation of resources theory. *Applied Psychology, 50*(3), 337–421. https://doi.org/10.1111/1464-0597.00062

Hoffman, L. M., Ireland, M., Hall-Mills, S., & Flynn, P. (2013). Evidence-based speech-language pathology practices in schools: Findings from a national survey. *Language, Speech, and Hearing Services in Schools, 44*(3), 266–280. https://doi.org/10.1044/0161-1461

Hutchins, S. D. (2019). Adventures in advocacy. *The ASHA Leader, 24*(3), 24–25. https://doi.org/10.1044/leader.LML.24032019.24

Hutchins, T. L., Howard, M., Prelock, P. A., & Belin, G. (2010). Retention of school-based SLPs: Relationships among caseload size, workload satisfaction, job satisfaction, and best practice. *Communication Disorders Quarterly, 31*(3), 139–154. https://doi.org/10.1177/1525740109336870

Iafrate-Bellini, P. (2000). Sometimes one voice does make A difference: Utilizing union negotiations to manage caseload. *SIG 16 Perspectives on School-Based Issues, 1*(1), 2–4. https://doi.org/10.1044/sbi1.1.2

Iafrate-Bellini, P., Green, C. M., & Kuhles, N. L. (2010). School funding advocacy, grants, grant writing, and ASHA's school finance committee. *SIG 16 Perspectives on School Based Issues, 11*(1), 15–20. https://doi.org/10.1044/sbi11.1.15

Kalkhoff, N. L., & Collins, D. R. (2012). Speech-language pathologist job satisfaction in school versus medical settings. *Language, Speech, and Hearing Services in Schools, 43*(2), 164–175. https://doi.org/10.1044/0161-1461(2011/11-0007)

Katz, L. A., Maag, A., Fallon, K. A., Blenkarn, K., & Smith, M. K. (2010). What makes a caseload (un)manageable? School-based speech-language pathologists speak. *Language, Speech, and Hearing Services in Schools, 41*(2), 139–151. https://doi.org/10.1044/0161-1461(2009/08-0090)

Leximancer. (2020). *Leximancer*. https://www.leximancer.com

Lyons, J. C., Webster, S. R., Friedman, B. L., Schiavoni, S. P., Lit, K. R., & Cash, R. E. (2015). A preliminary study exploring the efficacy of advocacy training. *Professional Psychology: Research and Practice, 46*(6), 409–413. https://doi.org/10.1037/pro0000044

Marante, L., & Farquharson, K. (2021). Tackling burnout in the school setting: Practical tips for school-based speech-language pathologists. *Perspectives of the ASHA Special Interest Groups, 6*(3), 665–675. https://doi.org/10.1044/2021_PERSP-20-00262

Massengale, K. E. C., Childers-McKee, C., & Benavides, A. (2014). Exploration of undergraduate preservice teachers' experiences learning advocacy: A mixed-methods study. *Journal of the Scholarship of Teaching and Learning, 14*(3), 75–93. https://doi.org/10.14434/josotl.v14i3.5071

Mosely, J. (2013). Recognizing new opportunities: Reconceptualizing policy advocacy in everyday organizational practice. *Social Work, 58*(3), 231–239. https://doi.org/10.1093/sw/swt020

Murphy, D. A., Stein, J. A., Schlenger, W., & Maibach, E. (2001). Conceptualizing the multidimensional nature of self-efficacy: Assessment of situational context and level of behavioral challenge to maintain safer sex. *Health Psychology, 20*(4), 281–290. https://doi.org/10.1037/0278-6133.20.4.281

Owen, W. F. (1984). Interpretive themes in relational communication. *Quarterly Journal of Speech, 70*(3), 274–287. https://doi.org/10.1080/00335638409383697

Pasupathy, R., & Bogschutz, R. J. (2013). An investigation of graduate speech-language pathology students' SLP clinical self-efficacy. *Contemporary Issues in Communication Science and Disorders, 40,* 151–159. https://doi.org/10.1044/cicsd_40_F_151

Pfeiffer, D. L., Pavelko, S. L., Hahs-Vaughn, D. L., & Dudding, C. C. (2019). A national survey of speech-language pathologists' engagement in interprofessional collaborative practice in schools: Identifying predictive factors and barriers to implementation. *Language, Speech, and Hearing Services in Schools, 50*(4), 639–655. https://doi.org/10.1044/2019_LSHSS-18-0100

Polovoy, C. (2009). Ohio, Oklahoma, and Texas model student advocacy. *The ASHA Leader, 14*(12), 32–33. https://doi.org/10.1044/leader.AN2.14122009.32

Qualtrics. (2020). *Qualtrics*. https://www.qualtrics.com/

Ramírez Stege, A. M., Brockberg, D., & Hoyt, W. T. (2017). Advocating for advocacy: An exploratory survey on student advocacy skills and training in counseling psychology. *Training and Education in Professional Psychology, 11*(3), 190–197. https://doi.org/10.1037/tep0000158

Ratts, M. J., & Ford, A. (2010). Advocacy Competencies Self-Assessment Survey: A tool for measuring advocacy competence. In M. J. Ratts, R. L. Toporek, & J. A. Lewis (Eds.), *ACA advocacy competencies: A social justice framework for counselors* (pp. 21–26). American Counseling Association.

Schneider, R. L., & Lester, L. (2001). *Social work advocacy: A new framework for action*. Cole.

Song, M., & Yang, N. (2016). Impact on self-efficacy, self-directed learning, clinical competence on satisfaction of clinical practice among nursing students. *Advanced Science and Technology Letters, 132,* 124–129. https://doi.org/10.14257/ASTL.2016.132.22

Sosin, M., & Caulum, S. (1983). Advocacy: A conceptualization for social work practice. *Social Work, 28*(1), 12–17. https://doi.org/10.1093/sw/28.1.12

Sylvan, L., Goldstein, E., & Crandall, M. (2020). Capturing a moment in time: A survey of school-based speech-language pathologists' experiences in the immediate aftermath of the COVID-19 public health emergency. *Perspectives of the ASHA Special Interest Groups, 5*(6), 1735–1749. https://doi.org/10.1044/2020_PERSP-20-00182

Tambyraja, S. R., Farquharson, K., & Coleman, J. (2021). Speech-language teletherapy services for school-aged children in the United States during the COVID-19 pandemic. *Journal of Education for Students Placed at Risk, 26*(2), 91–111. https://doi.org/10.1080/10824669.2021.1906249

Troesch, L. M., & Bauer, C. E. (2017). Second career teachers: Job satisfaction, job stress, and the role of self-efficacy. *Teaching and Teacher Education, 67,* 389–398. https://doi.org/10.1016/j.tate.2017.07.006

U.S. Department of Education. (n.d.). *The federal role in education*. https://www2.ed.gov/about/overview/fed/role.html

Warren, S., & Swanson, N. (2020). *2021 Medicare fee proposal decreases payments*. The ASHA Leader Live. https://doi.org/10.1044/leader.PA.25102020.26

White, S. C., & McCarty, J. (2011). Reimbursement for AAC devices. *The ASHA Leader, 16*(2), 3–7. https://doi.org/10.1044/leader.BML.16122011.3

Zipoli, R., Jr., & Kennedy, M. (2005). Evidence-based practice among speech-language pathologists: Attitudes, utilization, and barriers. *American Journal of Speech-Language Pathology, 14*(3), 208–220. https://doi.org/10.1044/1058-0360(2005/02)