





Can Structured Literacy Be a New Dimension for Interprofessional Practice Between Teachers and SLTs? Perceptions of Irish SLTs on Their Capacity and Practices in Supporting Children With Literacy Difficulties

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ABSTRACT

Background: The role of speech and language therapists (SLTs) in supporting literacy in Ireland is especially timely to consider given the expansion of multi-tiered systems of support and the increased provision of structured literacy instruction in schools. To advance SLT-teacher collaboration in literacy, we must first explore Irish SLTs' perspectives. Do they perceive themselves as having the required skills and confidence to support both children with literacy difficulties and the teachers who work with them? **Aims:** This study aimed to explore Irish SLTs' current practice and confidence in supporting literacy, as well as their readiness to collaborate with teachers to enhance children's literacy outcomes.

Methods and Procedures: Participants were members of the Irish Association of Speech and Language Therapists' Special Interest Group (SIG) in Developmental Language Disorder. Thirty-five SIG members completed an anonymous online survey, adapted from previous questionnaires, designed to explore SLTs' literacy practices, perceived scope of practice and confidence across different literacy domains. The survey also examined participants' engagement in consultative models of service provision. Outcomes and Results: Most SLTs felt that supporting children with literacy difficulties fell within their scope of practice; however, only a minority reported overall confidence to work within the literacy domain. Confidence varied across distinct areas of literacy, with participants reporting strong confidence in phonological awareness, vocabulary and morphology - key areas of structured literacy in which teachers often need guidance. In contrast, they reported low confidence in supporting spelling, which a majority of SLTs considered outside of their remit. The findings show clear support among SLTs for the consultative model of service provision, both in terms of its value and feasibility, yet most participants did not include literacy in their consultative work. Overall, there was no clear consensus about the potential contributions SLTs could make to supporting literacy instruction or the multi-tiered systems of support model in schools.

Conclusions and Implications: These findings highlight the need for interprofessional education (IE) initiatives for prospective teachers and SLTs to enhance multi-tiered systems of literacy support in schools. Structured literacy offers a focussed, equitable domain for such collaboration. Future research could explore SLT-teacher partnerships and the development of research

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scholarship in this area. Strengthening SLTs' role in structured literacy in Ireland could provide a meaningful avenue for interprofessional practice and improve literacy outcomes for children.

WHAT THIS PAPER ADDS?

What is already known on this subject

• We know that SLTs have unique linguistic knowledge in phonology, morphology and syntax, which are key domains of structured literacy. While an increasing body of international research is exploring the role of SLTs in literacy instruction, there remains a notable gap in the literature within the Irish context.

What this paper adds to existing knowledge

The study considers Irish SLTs' current practice and confidence in relation to supporting literacy outcomes. It shows a lack
of clear consensus about the potential contributions SLTs can make to supporting literacy instruction and the multi-tiered
systems of support model in schools and opens discussion on literacy as a domain of interprofessional education and practice
in Ireland.

What are the potential or actual clinical implications of this work?

We propose that Irish SLTs could offer more guidance to teachers and schools in relation to distinct areas of structured literacy instruction, as well as extend their collaborations with special education teachers (SETs) who work with dyslexic learners. However, without sufficient preparation, such collaborations have already been shown to be difficult to achieve. Our findings add to the growing support for the development of interprofessional education for prospective teachers and SLTs, and we propose that structured literacy could provide an equitable focus that such initiatives need.

1 | Introduction

A large body of research indicates that language and literacy difficulties often co-occur. We know that children with a language impairment are at heightened risk of literacy difficulties (e.g., Adlof and Hogan 2018; Botting et al. 2006; Catts et al. 2001). We also know that children with literacy difficulties often meet the clinical criteria for a developmental language disorder (DLD), with between 51% and 84% of such co-occurrence reported (Adlof and Hogan 2018). Despite these links, speech and language therapists (SLTs) have traditionally focused on developing children's oral language skills, while teachers have concentrated on written language skills such as reading and writing. This fragmented approach to supporting children with literacy difficulties is highly illogical, given the complementary skills each profession has in supporting children's learning in this area. SLTs could offer guidance on the explicit, sequential and systematic introduction of the range of linguistic concepts that underlie literacy development for both classroom and intervention-based instruction (Wilson et al. 2016). Meanwhile, teachers could offer the context in which such guidance would be most beneficial (Bauer et al.

Supporting children in this way would benefit all children with literacy difficulties, including those with dyslexia. While dyslexia is considered a neurodevelopmental difference that affects the development of fluent and accurate word reading and spelling, it exists on a spectrum of severity (Carroll et al. 2025). While all individuals with dyslexia experience literacy difficulties, not all literacy difficulties are due to dyslexia. Dyslexia is distinguished by its persistent and often lifelong nature, despite adequate teaching and intervention, whereas other literacy difficulties may be more responsive to changes in instruction or support. Having a cohesive approach to intervention could have a significant

impact on outcomes for learners with all forms of literacy difficulties.

Given the reciprocal relationship between oral language and literacy (Snow 2021), collaboration between SLTs and teachers is assumed to be best practice, and, at the very least, SLTs should focus some of their attention within the literacy domain. Indeed, many international speech-language therapy professional bodies have recognised the value of SLTs working in the literacy domain. In the United States, the American Speech and Hearing Association's (ASHA) position statement emphasised the important role of SLTs in supporting children with reading and writing difficulties, both clinically and through consultative and collaborative work (ASHA 2016). Speech-Language and Audiology Canada (2016) has also included pre-literacy and literacy skills within their scope of clinical practice. Although earlier research indicated a reluctance on the part of SLTs to adopt a role in children's literacy development (Ehren and Ehren 2001), this appears to have changed in recent times. Loveall et al.'s (2022) survey of 271 SLTs from across the United States showed that a majority of respondents (>60%) agreed that identifying, assessing, preventing and intervening in reading difficulties are within the scope of SLT practice. However, more than three-quarters of participants indicated that reading instruction was primarily the responsibility of teachers. Similarly, Australian SLTs involved in Serry and Levickis' (2020) survey overwhelmingly agreed that they should work with children who struggle to learn to read. Yet, a 'notable minority' of participants reported being neutral as to whether SLTs' practice should extend to include working with children who have spelling challenges (11%) or difficulties with extended writing (16%) (Serry and Levickis 2020, 239). In their survey of 645 full-time SLTs from 49 US states, Fallon and Katz (2011) found that only half of the participants agreed that written language fell within their scope.

Based on the current literature, it seems that while SLTs agree that reading instruction is within their scope of practice, there are some limits, for example, writing. Loveall et al. (2022) suggest that many SLTs see themselves in a 'supplementary role' to reading instruction and fail to appreciate 'the language interventions that they are providing as literacy-based interventions' (p. 849). This may also be due to lower levels of confidence in addressing non-phonological aspects of literacy instruction. A national US survey by Bridges and Kelley (2023) found that the majority of the surveyed SLTs reported limited undergraduate training and clinical experience in relation to literacy and in working with children with reading and writing difficulties. Many SLTs (approximately 40%) had poor confidence in their abilities to assess and intervene with children with reading and writing difficulties, yet a similar proportion reported working with such children.

Furthermore, teachers appear to be unaware of how SLT knowledge can be leveraged to support literacy instruction within classrooms. Stephenson et al. (2023) explored the views of 61 early years' (EY) teachers about the role and scope for SLTs within the literacy domain in schools. The authors found that more than 90% of respondents agreed that SLTs have a major role in speech sound correction and developing children's oral language skills. More than three-quarters saw a major role for SLTs to work on phonological awareness. Yet, far smaller proportions of the participants felt that literacy elements like reading accuracy (30%), spelling (26%) and reading comprehension (25%) could benefit from SLT guidance. Stephenson et al. (2023) note that this limited awareness of SLTs' literacy expertise and scope of practice 'may be leading to missed opportunities for collaborative practices' (p. 1) and insufficient guidance from SLTs for teachers.

Interprofessional collaboration between health and education workers is now seen as essential to inclusive education (European Agency for Special Needs and Inclusive Education 2022), with SLTs based directly in schools in some jurisdictions (e.g., in the United States and Australia). With respect to their contribution to inclusive education, research supports the role of school-based SLTs in prevention-oriented services (e.g., Collins and Wolter 2019; Petersen et al. 2022) as well as the benefits of classroombased intervention (Cirrin et al. 2010; Green et al. 2019), with examples of this model often centred on literacy instruction (e.g., Collins and Wolter 2019). In fact, SLT services, when based within the client's classroom, offer multiple benefits including intervention in a natural setting, opportunity to target functional academic goals, increased generalisation of skills, potential for cross-professional learning and integration of preventative approaches through the provision of universal interventions for all (Green et al. 2019). Notably, in the United States, however, the 'pullout' approach continues to be the most prevalent model of service provision used by school-based SLTs (Green et al. 2019), indicating that even in jurisdictions where school-based provision is relatively well-established, inclusive classroom-based interventions face implementation barriers.

Unfortunately, the literature on interprofessional collaboration derived from healthcare settings cannot be easily translated to schools. For example, the inconsistent presence of SLTs in schools was considered a barrier to teacher–SLT interprofessional collaboration in Armstrong et al. (2023) systematic review on the experiences of SLTs and teachers collaborating in the education

context. This issue does not arise in research focused on health worker-only collaboration. Quigley and Smith (2021) further elaborate on this, noting that the education of SLTs has evolved from the medical model, while teacher education is grounded in social constructivism. In SLT education, the medical model emphasises a scientific, evidence-based approach to theory and practice (Snow 2016). In contrast, social constructivism in teacher education emphasises that learning is a social process where knowledge is constructed through interaction, collaboration and reflection with others (e.g., Barak 2016). These differing epistemological traditions compound the many challenges of collaboration between teachers and SLTs (Birch et al. 2023; Quigley and Smith 2021; Snow 2016). Nevertheless, recommendations for interprofessional collaborations originally developed for health care professionals still have clear and relevant overlap for SLTs and teachers collaborating in schools, for example, need for clarity of roles, need for trusting relationships and commitments to joint working (Armstrong et al. 2023). It should be acknowledged, though, that concepts and practices associated with interprofessional practice are highly contextual. Societal (e.g., legislative context) and organisational influences (e.g., public service delivery models) can also impact interprofessional collaboration (Birch et al. 2023). Mathers et al. (2024) work examining UK-based interprofessional collaborations between SLTs and teachers demonstrates this well. Given that the current study was conducted in the Republic of Ireland, a brief overview of the Irish context, the current status of SLT-teacher collaborations and SLTs' readiness to engage in such collaboration to support literacy development will be provided.

1.1 | Irish Context

Models of SLT services in schools differ widely. In Ireland, SLTs are educated in clinical settings and typically employed by the health sector to work in clinical environments. While a relatively small number of language classes are attached to mainstream schools (64 in total), which integrate speech and language therapy within educational provision, these classes serve only a minority of children with DLD nationally. The majority of children who require SLT services, including children with conditions of other etiologies such as Autism, Aphasia or fluency disorders, for example, access this provision through the public health system (i.e., Health Service Executive) or private speech and language therapy services situated *outside* of school settings. Consequently, SLTs often have limited exposure to children's classroom and school lives (Gallagher et al. 2023), which poses a significant barrier to developing integrated, classroom-based therapeutic approaches in Irish schools and enhancing interprofessional practice between teachers and SLTs.

Policy developments within Irish education, such as the introduction of the 'Continuum of Support'—a multi-tiered system of support closely aligned with the Response-to-Intervention (RtI) model providing layered support for children's common, distinct and unique needs (Department of Education 2017a, 2017b)—require more effective links between schools and outside professionals like SLTs. While new models of in-school delivery are under exploration to achieve this (see Lynch et al. 2020), current interprofessional practice between teachers and SLTs is largely focused on SLTs supporting the teachers in the assessment

and intervention of learners with oral language and communication difficulties (Lynch et al. 2020; Quigley and Smith 2021). It has been well recognised that teachers receive minimal speech, language and communication training; therefore, a large part of SLTs' collaboration with teachers in Ireland is focused on capacity building of teachers, and mostly related to general language and communication support (e.g., Concannon 2022; Murphy et al. 2017; Quigley and Smith 2021).

It is interesting to note that the Irish Association of Speech and Language Therapists (IASLTs) have not yet issued clear guidelines regarding the role of SLTs in literacy. This contrasts sharply with other international professional bodies (e.g., ASHA 2016). As a result, it appears that Ireland is somewhat of an outlier when it comes to what is formally considered to be within the scope of Irish SLTs' practice. Limited research exists to determine if this viewpoint is shared by practitioners. Answering this question is increasingly necessary and pertinent within the Irish context. The role of SLTs in supporting literacy needs to be considered in the broader context of an increased awareness of the importance of RtI and structured linguistic literacy instruction among Irish educators. In Ireland, the 'science of reading' is gaining recognition and many teachers are honing their teaching approaches, for example, by introducing more explicit phonemic, morphological and syntactic awareness teaching in line with the integrated language, reading and writing approach to literacy instruction that underlies structured linguistic literacy (Buckingham 2024; Horgan 2022). As most teachers' linguistic knowledge and skills in these domains have been reported to need support (Joshi et al. 2009; Moats 2014), the contribution of SLTs in the correct implementation of evidence-based instructional approaches in Ireland could be significant.

1.2 | Current Study

Collaborative practice between SLTs and teachers in relation to literacy is significantly underdeveloped within the Irish context, despite its potential benefits for learners. It is currently unknown if Irish SLTs have the required skills and confidence to support both children with literacy difficulties and the teachers who work with such learners. To begin to address this gap, this research aims to explore SLTs' readiness to work with teachers to support literacy outcomes for learners. In particular, this research sets out to answer the following questions:

- What is the Irish SLTs' current practice in relation to supporting children's literacy outcomes?
- What do Irish SLTs consider to be their scope of practice when working in the literacy domain?
- To what extent do SLTs feel confident about their role in supporting the literacy outcomes of children with literacy difficulties/dyslexia?

2 | Method

An online, quantitative cross-sectional survey was used to gather data. The research received ethical approval from the Dublin City University Research Ethics Committee, and all procedures relating to recruitment, data storage and participant safety were adhered to.

2.1 | Participants

Purposive sampling was used to recruit respondents. Participants were fully qualified SLTs who were members of the IASLTs' Special Interest Group in DLD and were not deemed a vulnerable group for ethical purposes. This Special Interest Group (SIG) was chosen because of the close alignment of this group's interest and practice with many of the underlying features of structured linguistic literacy instruction, for example, morphology, phonology and syntax. Furthermore, current research in the field suggests that DLD and Dyslexia (although distinct) co-occur, with an estimated proportion of 50%-84% of children identified with DLD going on to develop a reading difficulty (Adlof and Hogan 2018). Such findings indicate that effective literacy instruction and intervention should be both relevant and important issues for SLTs who are members of the SIG in DLD. Information about the survey was provided through the SIG's chairperson, who was contacted by the lead researcher. For those who chose to complete the survey, an electronic link took participants to the survey, which was hosted on the Qualtrics platform. The SIG has 134 members. Forty-seven members accessed the survey (35%), and within it, 35 responded (74% completion rate) and 30 fully completed it (64%). The survey was open for a period of 6 weeks over the summer period. As per the recommendations of Wu et al. (2022), two reminders to complete the survey were sent.

2.2 | Survey Tool

An online, anonymous survey was adapted for the Irish context from the work of Serry and Levickis (2020) and Fallon and Katz (2011). The survey was piloted by two SLTs who were the researchers' colleagues and were not members of the SIG. One minor amendment was made following the pilot to better represent the range of settings SLTs may work in.

The final instrument consisted of the following four sections: (i) Respondent Characteristics, (ii) Current Practice Within Literacy Domain, (iii) Scope of SLT Practice in Relation to Literacy and (iv) Confidence. Section (i) comprised a series of basic demographic questions (e.g., years experience, professional role, caseload). The section also asked SLTs to record their current practice in relation to literacy, be it in terms of collaboration with educational professionals or within their own practice. There were four demographic questions in Section 1. Section (ii) had two closed questions that aimed to determine if these SLTs collaborated with any educational professionals or did any work relating to literacy attainment (e.g., How many years have you worked as an SLT in the literacy domain with children and/or adolescents?). The third section of the survey, containing three questions, asked respondents to use a five-point scale to rate their level of agreement to a series of statements on the scope of an SLT's practice as it related to the literacy domain (e.g., 'It is in the scope of an SLT's practice to work with children who are struggling to learn to read'). Participants used the same scale to record their agreement on the value and feasibility of identical practices (e.g., I believe it is valuable/feasible to team-teach alongside the classroom teacher). Many of these practices are recommended in

Irish educational policy as part of the RtI approach. The final question asked respondents to rate their level of confidence in working as an SLT within the field of literacy (e.g., *I am confident to provide an intervention for spelling*). The survey consisted of 10 short questions, but participants were not required to answer all of them. A total of 30 SLTs completed the entire survey, while 35 SLTs responded to the initial demographic questions and the first item related to working within the literacy domain. Given the small scale of this exploratory study, we chose to include all responses rather than exclude the five partially completed surveys. The number of respondents (*n*) for each question is reported in the Results section.

2.3 | Data Analysis

All data were analysed descriptively. Frequency of responses was reported for Likert scale questions. In the process of data analysis, in the interest of readability, and given the descriptive nature of the study, the small sample size and the limited responses at extreme ends of the scale, we collapsed the responses from a 5-item Likert scale into three categories, namely 'agree', 'neutral' and 'disagree'. Thus, in all graphs showing the level of agreement, responses 'strongly agree' and 'agree' were combined, and both are represented under 'agree'. Similarly, responses 'disagree' and 'strongly disagree' are both represented on one bar 'disagree'. Given the respondent sample size, inferential statistics were considered inappropriate.

3 | Results

Thirty-five SLTs completed the survey. Participants worked mainly in Enhanced Community Care (previously Primary Care)¹ and language class² settings and had varied years of clinical experience (Table 1). A majority of participants worked as Senior SLT (62%; n = 21) or Staff Grade SLT (35%; n = 12), and one participant worked as Clinical Specialist SLT.

3.1 | Scope of SLT Practice

Participants stated varied experiences of working within the literacy domain. A small majority of participants, 51% (n=18), stated that they did *not* 'work within the literacy domain' and the remaining participants had between 1 and 20 years of such experience, with one participant indicating >20 years of experience (Figure 1). This is despite a majority of participants, 60% (n=18), agreeing that 'working with children who are struggling to learn to read' and continuing such work beyond preschool years (57%; n=17) ('with children who continue to have difficulty with reading') is within the scope of SLT practice (Figure 2).

However, a majority of participants considered 'working with children who have spelling difficulties' not within the scope of their work, as only 17% (n=5) agreed that 'spelling' was within the SLT's practice (and with only one clinician strongly agreeing with this). There was no clear agreement in relation to whether or not it is within the SLT practice to be involved in literacy curriculum planning and/or working with children with writing difficulties, with varied responses across the agreement categories in relation to these two areas of practice (with more SLTs agreeing that

TABLE 1 | Participants' profile (n = 35).

How many years have you worked as an SLT?	
0–1	0
2–5	20% (n = 7)
6–10	23% (n = 8)
11–20	37% (n = 13)
>20	20% (n = 7)
What best describes your professional role?	
Staff grade SLT	34% (n = 12)
Senior SLT	63% (n = 22)
Clinical specialist	3% (n = 1)
Private practitioner	0
Other	0
Which category best describes your work setting?	
Language class	31% (n = 11)
ECC/PCC	60% (n = 21)
CDNT	3% (n = 1)
CV agency	0
Private practice	0
Education sector (not language class)	0
Other	6% (n = 2)
Level of schooling of the current caseload	
Preschool	46% (n = 16)
Early primary	66% (n = 23)
Later primary	34% (n = 12)
Early secondary	14% (n = 5)
Later secondary	6% (n = 2)
All levels	23% (n = 8)

Note: For 'Level of schooling of current caseload', multiple categories could be selected, so percentages representing the level of schooling within SLTs' current caseload will not total 100.

'writing' is within the scope of SLT's practice). This may reflect the diversity of the sample in terms of professional work setting, namely, it is possible that SLTs working in language classes may have greater involvement in literacy curriculum planning.

'Working at the preschool education level' was considered by a clear majority of respondents to be the role of SLT (83%; n=25). Thus, the value of the role of the SLT in getting children 'reading-ready' had a strong clinical consensus.

3.2 | Perceived Confidence in Working Within Literacy Domain

Only 13% (n = 4) of participants stated that they felt confident to work in the literacy domain (Figure 3). Not one participant

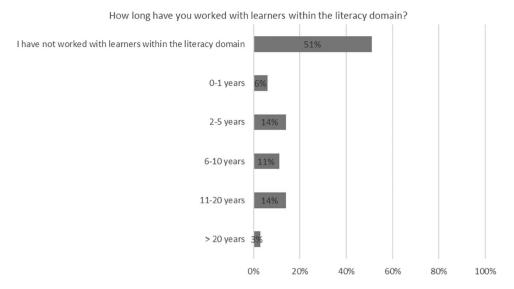


FIGURE 1 Participants' stated experience of working within the literacy domain (n = 35).

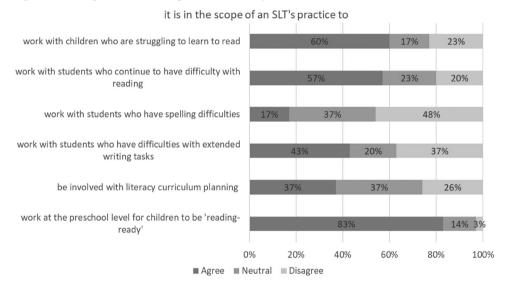


FIGURE 2 Participants' perceptions of SLT's scope of practice in relation to literacy (n = 30).

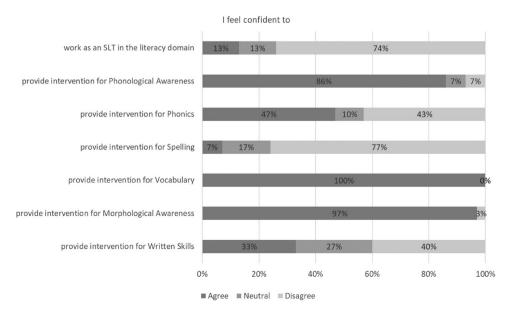


FIGURE 3 Participants' stated level of confidence in providing intervention for different literacy domains (n = 30).

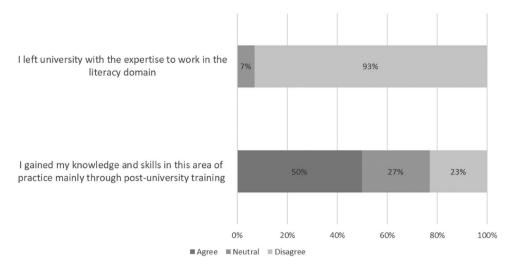


FIGURE 4 Participants' perception of their 'expertise' in the literacy domain (n = 30).

agreed that their university degree prepared them to work in the literacy domain; rather 93% (n=28) agreed or strongly agreed that their undergraduate education had *not* prepared them to work as an SLT in the literacy domain, with 50% (n=15) stating that they had relied on post-university training to gain knowledge and skills in this area (Figure 4). There were a variety of responses to this question, most likely indicating varied access to training opportunities for SLTs in this area, possibly due to varied professional contexts of the participants (e.g., SLTs in language classes may have better opportunities to access continuous professional development related to literacy).

A clear majority of clinicians expressed confidence in providing intervention for phonological awareness (86%), vocabulary (100%) and morphological awareness (97%) (Figure 3). Confidence in providing intervention for phonics and written skills was more varied, with 47% of SLTs in the survey stating that they were confident to provide intervention in phonics and only one-third stating that they were confident in their provision of interventions to support writing. A majority, 77% (n=23), reported that they were *not* confident that they could support a spelling-based intervention.

3.3 | Methods and Collaborative Approaches Perceived as Valuable

A majority of participants (73%; n=22) agreed that providing consultative support for 'another person' to conduct an SLT-recommended intervention is 'valuable'. *Consultation* to preschool settings about preparing children to be 'reading-ready' when starting school was also considered 'valuable' to the majority of participants (73%; n=22) (Figure 5). This may indicate a preference for a consultative approach of SLT provision among the participants. Similarly, when asked about working *directly* with children ('intervene directly with children') both in and outside of the classroom, a majority of participants agreed that such a model of service provision is 'valuable' (60%). However, the consultative model was considered to be 'valuable' 73% (n=22) by a greater number of participants than the direct model of SLT provision *within* the classroom 60% (n=18).

Fewer than half of the participants considered 'team teaching' alongside *mainstream* teachers to be 'valuable' (40%; n=12). Yet far more participants considered that 'team teaching' with *specialist* teachers (i.e., SET) to be 'valuable' (60%; n=18). Notably, a sizeable number of participants (47%; n=14) indicated 'neutral' in their response to whether 'team teaching alongside the classroom teacher' is 'valuable' and many participants (30%; n=9) indicated this in relation to 'team-teaching' with specialist teachers. This indicates that there may not be a clear consensus among the SLT community on this aspect of interprofessional practice, and/or that SLTs' perceptions on who they should engage with for interprofessional practice may vary depending on their professional context.

Similarly, there was no clear consensus in relation to using an RtI model when providing intervention, while 50% (n = 15) agreed this to be 'valuable', a comparable number responded 'neutral' (40%; n = 12).

3.4 | Methods and Collaborative Approaches Perceived as Feasible

Only 20% (n=6) stated that 'to team-teach alongside the classroom teacher' is 'feasible' (Figure 6). The responses to whether 'team-teaching alongside the specialist teaching staff (i.e., SET)' is 'feasible' were more positive, but again only 37% indicated that it is 'feasible' (n=11; it may be that this difference in perceptions is attributable to individual SLT experience). Similarly to the responses indicating which methods and approaches were 'valuable', a clear majority of participants (73%; n=22) agreed that providing consultative support for 'another person' to conduct SLT intervention is 'feasible' and further that consultation to preschool settings about preparing children to be 'reading-ready' when starting school is 'feasible' (63%; n=19).

In relation to working directly with children, a small majority of participants (53%; n = 16) stated that 'intervening with children outside the classroom' is 'feasible', but only 30% (n = 9) stated that it is 'feasible' to 'intervene with children *within* the classroom'. Together with the lack of clear agreement on 'team-teaching

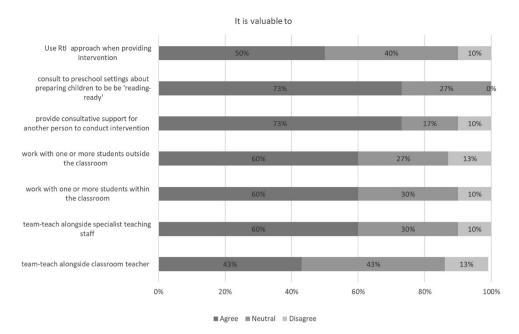


FIGURE 5 Methods and approaches perceived by the participants as valuable (n = 30). The choice items for the methods and approaches, while not specifically related to literacy, were included because they represent areas of broad potential SLT practice that are relevant in working with teachers and schools. This question was previously included in the survey by Serry and Levickis (2020), which we adapted in our research.

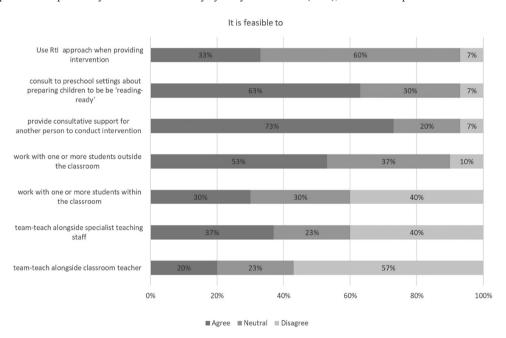


FIGURE 6 Methods and approaches perceived by the participants as feasible (n = 30).

alongside the classroom teacher,' this finding may indicate a lack of consensus on if and how SLTs should work with mainstream classroom teachers. The responses in relation to 'feasibility' of using the RtI model when providing intervention were varied, namely, while 33% (n=10) stated that this is 'feasible' as many as 60% (n=18) gave a 'neutral' response.

In order to explore the relationship between professional values and perceived practical constraints, we compared participants' ratings of various service delivery methods in terms of their perceived *value* and *feasibility* (Figure 7). Interestingly, there was a considerable gap between SLTs' perception of what is 'valuable'

and what is 'feasible' in relation to 'team teaching alongside teachers' (both mainstream and specialist teachers) and working 'within the classroom' (Figure 7), all of which represent school-based practice. While approximately one-third of the participants worked in language classes, for the remaining (and majority) of SLTs surveyed, the lack of opportunity to work with children in their school setting may account for the discrepancy between perceived 'value' and 'feasibility' for school-based methods of service delivery.

Perhaps unsurprisingly, considering the participants' stated confidence in relation to working within the literacy domain

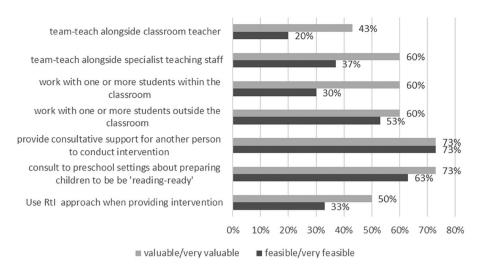


FIGURE 7 Comparison of methods and approaches perceived by the participants as valuable and feasible (n = 30).

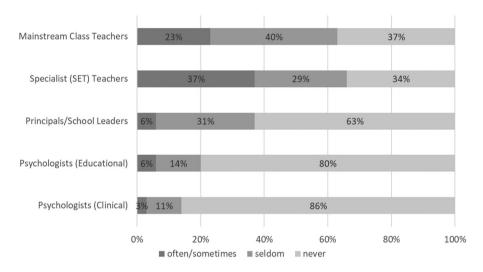


FIGURE 8 For each of the professionals, consider if and/or how often you give guidance to them regarding a learner's literacy progress? (n = 30). Given low responses to the options 'often' and 'sometimes', to enhance readability, the responses 'often' and 'sometimes' were combined. We believe this does not affect the interpretation of the findings.

(Figure 3) and their views on their scope of practice (Figure 2), a clear majority of the participants do *not* currently give guidance to other professionals regarding their children's literacy progress (Figure 8), and this includes both mainstream and specialist teachers.

4 | Discussion

4.1 | Confidence and Preparation for Supporting Literacy Development

The purpose of this study was to explore SLTs' readiness to work with teachers to support literacy outcomes. One aim of this research focused on the extent to which participants felt confident about their role in supporting learners with literacy difficulties. While the majority of SLTs in this study felt that it is within the scope of their practice to support children who are struggling to learn to read and those who continue to experience literacy

difficulties, it is concerning that only a minority (13%) reported feeling confident to work within the literacy domain. While low levels of confidence among SLTs have been historically reported in previous research in this area (Blood et al. 2010; Fallon and Katz 2011), the proportion of Irish SLTs surveyed, who feel confident to work with literacy, appears to be considerably lower than figures cited in recent studies from other jurisdictions. For instance, in a large-scale Australian survey, 48% of SLTs 'agreed' and 18% 'strongly agreed' that they felt confident to work in the literacy domain (Serry and Levickis 2020). Similarly, in the United States, Loveall et al. (2022) stated that SLTs 'generally reported feeling confident in their abilities to define, assess and provide therapy for a wide range of reading subskills' (p. 845). Although close to one-third of the participants in this study are school-based SLTs (i.e., working in language classes in primary schools) and hence play a key role in the development of children's individualised educational plans, confidence levels for literacy intervention are still low for the vast majority of participants surveyed. While recognition of the role of SLTs in identifying and supporting children with literacy difficulties has expanded considerably in recent years (McLean et al. 2021), the lack of confidence among Irish SLTs may impact their readiness to support children with literacy difficulties.

Preservice education and training experiences likely account for low confidence levels reported in this study. Consistent with findings from several studies internationally (e.g., Bridges and Kelly 2023; Fallon and Katz 2011; Loveall et al. 2022), this research highlights gaps in coursework and training in reading and writing in university programs. It is noteworthy that not one participant in the current study stated that they felt prepared to work in the area of literacy upon graduation. This research also highlights varied access to post-university training opportunities. While 50% of participants reported that they had engaged in literacy training since qualifying as an SLT, this figure is relatively low by international standards. In the Australian study, where confidence levels are higher, a greater proportion of SLTs (80%) reported that they had acquired skills in literacy through post-university training (Serry and Levickis 2020), which suggests more limited access to professional learning for SLTs in the Irish context. It appears that current education and training opportunities for preservice and qualified SLTs in Ireland are inadequate in developing their confidence and competence to work within the literacy domain. This finding has important implications for interprofessional education (IE). To date, the discourse between teachers and SLTs in Ireland has focused on supporting teachers to provide effective oral language instruction and to identify and support learners with Speech, Language and Communication Needs (SLCN) (Lynch et al. 2020), with a large part of this discourse initiated and led by SLTs (e.g., Quigley and Smith 2021). However, to realise the full potential of interprofessional collaboration in educational contexts, it is crucial that SLTs are sufficiently equipped to work in the literacy domain, where the scope for interprofessional practice is significant and growing.

This study further explored SLTs' perceived confidence to provide intervention for discrete areas of language and literacy. Consistent with previous research (Fallon and Katz 2011; Loveall et al. 2022; Serry and Levickis 2020) SLTs' stated levels of confidence were highest for linguistic-based sub-skills, including vocabulary, morphological awareness and phonological awareness, which are crucial components of structured literacy interventions. Research has repeatedly demonstrated low teacher-knowledge of language constructs, which underpin structured literacy (Moats 2014; McLean et al. 2021), indicating areas of shared practice in which SLTs' linguistic knowledge could be leveraged to support children's literacy outcomes. By contrast, participants' confidence levels were considerably lower for interventions in phonics, written expression and in particular, spelling, which are located within the written language modality. Similarly, only a minority of SLTs (17%) 'agreed' that supporting children with spelling difficulties was within their scope of practice, which is interesting given that phonology and morphology are recognised as key elements of effective spelling interventions (Galuschka et al. 2020). The potential contribution which SLTs could make to structured linguistic literacy is evidently underrecognized by Irish SLTs, while the complementary backgrounds of SLTs and teachers (e.g., SLTs' knowledge of linguistic concepts and teachers' knowledge of literacy curriculum) may offer opportunities to blend the respective expertise of each profession to support the implementation of structured literacy in Ireland (Kazmierczak-Murray et al., 2025).

4.2 | Approaches to Service Delivery: Value Versus Feasibility

In terms of approaches to service provision, there was clear support among the participants for the use of the consultative model, including providing consultative support to preschool staff to ensure that children are 'reading ready' and, more generally, consulting with others to provide indirect intervention. Participants surveyed evidently value their consultative role at a preschool level, yet it is notable that in Ireland, there are currently no *national* structures to harness this support and advance the collaborative work of SLTs within early years' (EY) services, although there are some excellent local and regional examples of interprofessional work between SLTs and EYs such as Chit Chat of the Childhood Development Initiative (CDI) (Hayes and Irwin 2016).

The consultative model was the prevailing approach adopted by the National Council of Special Education (NCSE) in their 'In-School and Early Years Therapy Support Demonstration Project' (Lynch et al. 2020). While the process evaluation of this pilot project highlighted benefits for therapists' collaborative and consultative work in addressing SLCN (Lynch et al. 2020), there is no mention that SLTs' consultative work included areas of literacy instruction besides those domains of natural crossover (e.g., vocabulary or morphological awareness in Murphy et al. 2017). Similarly, the majority of SLTs surveyed in our research do not include literacy in the scope of their consultative work, which is unfortunate considering their linguistic expertise and stated confidence levels in providing intervention in phonological awareness, vocabulary and morphological awareness, all of which are key elements of structured literacy interventions. Given the proposed expansion of in-school therapy support for schools in the Republic of Ireland (NCSE 2024), the omission of literacy from SLTs' scope of practice may be a missed opportunity for school-based SLTs to advance their collaborative work with teachers and to support the implementation of structured linguistic literacy in schools.

This study also sought the perceptions of SLTs regarding the value and feasibility of a number of inclusive classroom-based approaches to service delivery. Classroom-based intervention, which addresses children's needs in the least restrictive environment, is the approach to service provision most closely aligned to policy developments in inclusive education in Ireland (DES 2017b), and research supports the value of such naturalistic interventions provided in settings where target skills will be applied (Archibald 2017). With respect to SLTs' perceived value for working with one or more children within the classroom versus working with them outside the classroom, there was no difference (Figure 5). However, considerably more participants felt that working with children outside of the classroom is feasible (53%) versus direct intervention within the classroom (30%). Significantly, there was limited support among participants for the value of team teaching alongside the class teacher (40%), with even fewer participants (20%) rating this model as feasible. In general, the feasibility of classroom-based service delivery was not supported by SLTs in this study, and this finding may be attributed to current models of service delivery in the Irish context and potential lack of opportunity for SLTs to work within classrooms.

Interestingly, there was greater support for team teaching alongside specialist (SEN) teachers than alongside teachers in the mainstream class. Indeed, this finding may simply reflect the profile of our sample, with close to one third of participants working in language classes with 'specialist' SEN teachers and are therefore likely to have experience of team teaching in this context. However, to date, Irish scholarship on interprofessional practice has focused largely on SLTs' collaboration with mainstream class teachers and oral language instruction in mainstream classes (Gallagher et al. 2023; Quigley and Smith 2021), yet classroombased service provision is largely underdeveloped in Ireland, with research only beginning to emerge. Significantly, this research has not extended its focus to SLT-teacher collaborative practice to support learners with literacy difficulties, an area which evidently requires further exploration. Teacher collaboration has been identified as a key factor in the success of classroom-based approaches to service delivery (Cirrin et al. 2010). As this field of enquiry continues to grow in Ireland, understanding factors which support effective interprofessional practice between SLTs and teachers will be crucial for the successful implementation of inclusive approaches.

4.3 | Perceptions of Response to Intervention (RtI): Tensions and Ambiguity

Although there is strong support in the research literature for the role of SLTs as important stakeholders in the RtI framework (Petersen et al. 2022; Powell 2018), the findings of our research reflect varied perspectives among participants regarding its value and feasibility. While 50% of SLTs felt that using the RtI framework when providing interventions is valuable, only 37% felt it to be feasible, with a large proportion of participants (40% and 57%, respectively) selecting a 'neutral' response. Previous studies, which have explored the opinions of SLTs towards RtI, have indicated that SLTs generally viewed RtI as important, yet challenging to implement (Sanger et al. 2012; Serry and Levickis 2020). However, the responses to our survey point towards tensions in the Irish SLT community surrounding their role in RtI. This is unfortunate given that in Ireland, the RtI framework (or Continuum of Support) has become the key mechanism in schools for identifying children with learning needs and providing interventions of proportionate intensity (DES 2017b). However, the lack of integration between education and health services in Ireland presents barriers for SLTs to engage with or contribute to school-based RtI frameworks.

Several factors may account for the lack of consensus among participants concerning the value and feasibility of RtI. Considering that recent policy advice highlights inadequate access to therapeutic support across Ireland (NCSE 2024), engagement in RtI may be perceived by SLTs as an added burden to their already demanding caseloads (Ukrainetz 2006; McKenna et al. 2021). Concerns have also been raised that RtI may lead to delayed referrals for children who require language services (McKenna et al. 2021), negating the prevention-oriented nature of the framework for children with complex and pervasive language disorders. In

a seminal paper, Ebbels et al. (2019) caution that 'children with the greatest needs require the largest proportions of SLT time and specialist skills' (Ebbels et al. 2019, 12), with a later response paper questioning whether SLTs' engagement in Tiers 1 and 2 of the RtI framework is the best use of limited SLT resources, if interventions do not have an individualised focus for children on clinical caseloads (Norbury et al. 2019). SLTs' involvement in RtI can serve multiple purposes, including proactive identification and intervention for children at risk of adverse academic outcomes and provision of direct and indirect individualised interventions for children with identified needs or disability, based on clinical assessment (Ebbels et al. 2019). The number of 'neutral' responses by participants regarding the nature of RtI was significant, which leads to questions about whether there is a clear understanding about the potential contributions SLTs can make to RtI. While it was not within the scope of this study to explore SLTs' perceptions of the distinct roles they could potentially play, future qualitative research would enrich our understanding of SLTs' views regarding their involvement in prevention-oriented activities while balancing their 'duty of care' to children and young people on clinical caseloads (Ebbels et al. 2019, 6).

5 | Implications for Clinical Practice and Future Directions

Our study findings have implications for preservice education and professional learning opportunities for SLTs in Ireland. In Ireland, the scope and interest in interprofessional practice between teachers and SLTs are growing. For example, the national roll out of in-school therapy services to all schools has been recommended in recent policy advice (NCSE 2024). To ensure that teachers and SLTs are sufficiently prepared for increased opportunities and expectations for interprofessional practice, there is a need to expand our understanding of effective design and evaluation of interprofessional education (IE) initiatives (Kazmierczak-Murray et al., 2025), including both those for preservice and qualified teachers/SLTs. Professional learning initiatives designed specifically for SLTs and teachers would facilitate opportunities for the bidirectional sharing of knowledge, while the development and implementation of such initiatives would also create opportunities to determine the efficacy of IE. Such initiatives could take a variety of formats, including the following:

Communities of practice (CoPs): There is an overwhelming lack of confidence among SLTs regarding their role in literacy, yet SLTs have important expertise to contribute to this field (e.g., expertise in phonological awareness, morphological awareness, vocabulary). Leveraging their expertise may support the implementation of structured literacy in the Irish context and bridge a researchpractice gap in literacy instruction in schools. Interprofessional CoPs comprising SLTs and teachers, and focused on literacy specifically, could offer important opportunities to truly leverage the complementary knowledge/skill sets of each profession and provide rich professional learning opportunities for teachers and SLTs alike. We believe that the focus on literacy in such CoPs could help to establish a firm starting point for collaboration by shifting from the more traditional mindset of 'providing teacher training' to 'partnering with teachers' (Archibald 2017, 3-4; Kazmierczak-Murray et al., 2025). Research focused on

collaboration between teachers and SLTs indicates that teachers are often unaware of how SLTs' knowledge and skills could support their instruction in the classroom, which may pose potential barriers to forming collaborative relationships necessary for interprofessional practice (Brimo and Huffman 2023). IE may help to address this issue while also developing core interprofessional competencies necessary for effective collaboration (Glover et al. 2015; Suleman et al. 2014), and structured linguistic literacy could offer an equitable focus for small group exploratory IE projects.

Preservice IE: Our findings add to the growing support for the development of IE for prospective teachers and SLTs (Suleman et al. 2014; Wilson et al. 2016). In Ireland, this could be explored through shared professional practice placements or shared modules, and structured linguistic literacy could provide the focus that such initiatives need.

Future research might focus on the content of university curricula and practicum experience for SLTs trained in Ireland. For example, to what extent do university curricula educate student SLTs about the integrated nature of listening, speaking, reading and writing, and how SLTs can align their linguistic knowledge to reading and writing instruction/intervention for school-going children experiencing literacy difficulties?

Our study offers some important future directions, for example, in relation to developing research on collaboration of SLTs with SETs. To date, Irish scholarship on interprofessional practice has focused largely on SLTs' collaboration with mainstream class teachers and oral language instruction in *mainstream* class (Gallagher et al. 2023; Quigley and Smith 2021). We argue that the contribution of SLTs within the provision of structured literacy could be significantly strengthened, as it offers a focused and equitable domain for both IE and practice for SLTs and teachers.

Interesting patterns emerged from our research regarding SLTs' perceptions of the RtI framework. Future research is needed to provide a more comprehensive picture of how SLTs perceive RtI in terms of its value and feasibility, and to what extent they feel they should be involved in this framework at a school level. Understanding SLTs' perspectives is relevant and timely since the proposed expansion of school-based therapeutic supports in Ireland will likely impact SLTs' current practice for service provision in the future. In-depth qualitative interviews with SLTs could inform the development of survey items to specifically examine these aspects of SLTs' service delivery in an Irish context. The survey used in this exploratory study was adapted from previous research conducted in Australia (Serry and Levickis 2020) and the United States (Fallon and Katz 2011). In future Irish research, greater adaptation of the survey questions relating to the service delivery and RtI would be beneficial to uncover insights on the existing and planned SLT service delivery in Ireland (e.g., differentiation between literacy support in mainstream and special education).

5.1 | Study Strengths and Limitations

There are important limitations to consider when interpreting the findings of this research. First, the study's findings are based on a small sample of responses, which restricted our analysis in relation to the differences of responses between SLTs working in language classes and those working in the health sector. Additionally, the self-selection of participants may introduce bias, as those with a particular interest or confidence in literacy might have been more likely to respond. While the survey design enabled the collection of broad perspectives across participants, the absence of qualitative data restricts the depth of insight into participants' reasoning and experiences. Incorporating interviews or focus groups in future phases would not only strengthen the research design through data triangulation, but support a more nuanced exploration of SLTs' experiences, perceived challenges and contextual influences. Qualitative methods could have also contributed to the design and refinement of survey items, increasing their relevance and interpretability. However, for the purpose of this exploratory study, we used and adapted a previously developed survey from related research (Fallon and Katz 2011; Serry and Levickis 2020).

Despite these limitations, the study has several strengths that contribute to its value as a preliminary investigation. Drawing on established survey instruments helped ensure content relevance and supported comparisons with prior work. The adapted survey was piloted with two SLTs to enhance clarity and appropriateness for the target population. Additionally, although the sample was small, it comprised SLTs with a specific interest or experience in DLD, offering valuable, context-specific insights into a topic that has not been previously explored in an Irish context. This study offers valuable preliminary insights into SLTs' perceptions of their capacity and practices in supporting children with literacy difficulties. The views of this particular group of clinicians are especially important given that language disorders have a high co-occurrence with dyslexia and literacy difficulties (Adlof and Hogan 2018; Botting et al. 2006; Catts et al. 2001).

Together, these strengths support the study's contribution as an exploratory investigation. While the findings are not generalisable, they offer meaningful, context-specific insights into the practices and perspectives of SLTs in Ireland. Future research could build on this work by using mixed methods to enrich and triangulate findings, providing a more comprehensive understanding of the factors shaping SLT practice in literacy support.

6 | Conclusion

Collaborative practice between SLTs and teachers in relation to literacy is significantly underdeveloped within the Irish context, despite its potential benefits for learners. The role of SLTs in supporting literacy needs is especially timely to consider with policy developments within Irish education focused on the introduction of the multi-tiered 'continuum of support' and an increased provision of structured literacy instruction by Irish educators. We therefore explored the SLTs' views on their practices and confidence in working with learners with literacy difficulties and within the literacy domain.

Our findings show a lack of clear consensus about the potential contributions SLTs can make to supporting literacy instruction and the multi-tiered model of support in schools. This finding adds to the growing support for the development of IE for prospective teachers and SLTs (Suleman et al. 2014; Wilson

et al. 2016). In Ireland, this could be explored through shared professional practice placements or shared modules, and we propose that structured literacy could provide an equitable focus that such initiatives need.

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Ethics Statement

The research has received full ethical approval from the Dublin City University Research Ethics Committee.

Conflicts of Interest

The authors declare no conflicts of interest.

Data Availability Statement

The dataset for this study is available from the corresponding author on request.

Endnotes

- ¹Enhanced Community Care is a community healthcare service in Ireland.
- ²In Ireland, language class is a commonly used name for a special education class for children with DLD. Children attending this class have access to small group teaching and SLT. After 2 years, they typically transition to a mainstream school.

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