

Schools Survey Report: Trends in Educational Audiology 2010–2022

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Introduction

The American Speech-Language-Hearing Association (ASHA) conducted the *2022 Schools Survey* to gather information about professional issues affecting school-based audiologists and speech-language pathologists (SLPs). Results from this survey are presented in a series of reports, including this report on trends in educational audiology.

The salaries presented in this report are full-time gross salaries (salaries prior to deductions). The statistic that is presented is the median (i.e., middle or 50th percentile). Median salaries are presented because they are more stable than means (i.e., averages) and are less sensitive to extreme values. To preserve confidentiality and provide more certain results, we have not reported data for groups of fewer than 25 survey respondents.

Findings from the 2010, 2012, 2014, 2016, 2018, and 2020 ASHA Schools Surveys are included in this report for comparative purposes. Questions differ among surveys, so data on all topics are not available for all survey years.

Survey Report Highlights

Workforce and Work Conditions

In 2022:

- Most (84%) survey respondents who were employed as audiologists worked full time—about the same as in past years (80%–88% from 2010 to 2020).
- Most (89%) respondents who were employed full or part time as audiologists were salaried employees—about the same as in past years (87%–93% from 2012 to 2020). The remainder were contractors or were self-employed.
- Audiologists identified limited family/caregiver involvement and support, limited understanding of my role by others, and large amount of paperwork as their top three professional challenges—the same top three challenges as in 2020.

Earnings

In 2022:

- Most (89%) audiologists were paid an annual salary in their primary job—about the same as in past years (86%–93% from 2010 to 2020). The remainder were paid at an hourly rate.
- Most (85%) audiologists who were paid an annual salary in their primary job worked 9 or 10 months per year (an academic year)—up from past years (71%–80% from 2010 to 2020).
- Audiologists reported a median academic year salary of \$76,000—up from \$72,00 in 2020 (a 6% increase).

Earnings, cont'd

In 2022:

- Audiologists who worked in a combination of schools reported a median academic year salary of \$78,000—up from \$73,799 in 2020 (a 6% increase).
- Audiologists reported an overall median calendar year salary of \$84,000—up from \$82,213 in 2020 (a 3% increase).
- About 29% of audiologists reported receiving a salary supplement for having their ASHA Certificate of Clinical Competence (CCC)—up from past years (17%–26% from 2010 to 2020).

Caseload/Workload

In 2022:

- Most (51%) audiologists indicated that a caseload approach was used to determine the number of students they served—up from past years (36%–42% from 2010 to 2020). The remainder indicated that a workload approach, or a combination of caseload and workload approaches, was used.
- Audiologists had a median monthly caseload size of 63—up from 50 in 2010 and 2012, up from 55 in 2014, and up from 60 in 2016, 2018, and 2020.
- Audiologists who worked in a combination of schools had a median monthly caseload size of 70—up from 60–65 from 2018 to 2020.
- Most (94%) audiologists served students with hearing loss—about the same as in past years (92%–95% from 2016 to 2020). Their caseloads included a higher average number of students with hearing loss than with any other disorder.
- Audiologists spent 10 hours per week on diagnostic evaluations—down from past years (12–16 hours per week from 2014 to 2020).
- Nearly half (44%) of audiologists were *not* required to make up missed sessions with students—down slightly from 48% in 2020.

Member Satisfaction Ratings

In 2022:

- About half (48%) of audiologists indicated that ASHA was doing a good or excellent job in serving its school-based members overall—up from 44% in 2020.
- More than half (51%) of audiologists indicated that ASHA was doing a good or excellent job with resources—the same percentage as in 2018 and 2020.

Workforce and Work Conditions

Full- or Part-Time Status

In 2022, most (84%) survey respondents who were employed as audiologists worked full time—the same or about the same as in past years (80%–88% from 2010 to 2020; see Table 1).

Table 1. Percentage of ASHA Schools Survey audiologist respondents who are employed full or part time, by year.

		%							
Status	2010 (n = 271)	2012 (n = 250)	2014 (n = 173)	2016 (n = 209)	2018 (n = 204)	2020 (n = 200)	2022 (n = 230)		
Employed full time	82	85	84	80	88	81	84		
Employed part time ^a	18	15	16	20	12	19	16		

Note. These data are from the 2010, 2012, 2014, 2016, 2018, 2020, and 2022 *ASHA Schools Surveys*. ^aEmployed part time was not defined in the surveys.

Salaried Employee, Contractor, or Self-Employed

In 2022, most (89%) respondents who were employed full or part time as audiologists were salaried employees—the same or about the same as in past years (87%–93% from 2012 to 2020). The remainder were contractors or were self-employed (see Table 2).

Table 2. Percentage of ASHA Schools Survey audiologist respondents who are salaried employees, contractors, or self-employed, by year.

	%							
Employment status	2012 (n = 250)	2014 (n = 204)	2016 (n = 207)	2018 (n = 201)	2020 (n = 197)	2022 (n = 229)		
Salaried employee	93	89	87	91	90	89		
Contractor	7	11	13	9	8	8		
Self-employed					1	3		

Note. These data are from the 2012, 2014, 2016, 2018, 2020, and 2022 *ASHA Schools Surveys*. Dash indicates that the item was not included in the survey. Because of rounding, percentages may not total exactly 100%.



Greatest Professional Challenges

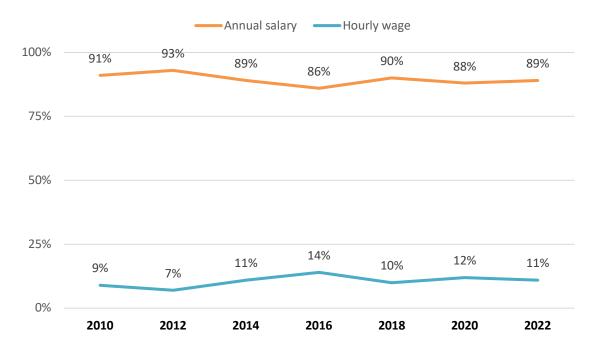
In 2022, audiologists identified *limited family/caregiver involvement and support, limited understanding* of my role by others, and *large amount of paperwork* as their top three professional challenges—the same top three challenges as in 2020 (see Appendix Table 1).

Earnings

Annual Salary or Hourly Wage

In 2022, most (89%) audiologists were paid an annual salary in their primary job—the same or about the same as in past years (86%–93% from 2010 to 2020). The remainder were paid at an hourly rate (see Figure 1).

Figure 1. Percentage of school-based audiologists who are paid an annual salary or an hourly wage in their primary job, by year.



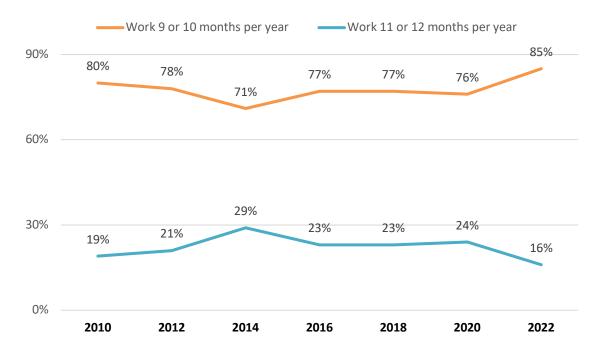
Note. These data are from the 2010, 2012, 2014, 2016, 2018, 2020, and 2022 *ASHA Schools Surveys*. Because of rounding, percentages may not total exactly 100%.

n = 270 (2010); n = 250 (2012); n = 173 (2014); n = 209 (2016); n = 202 (2018); n = 200 (2020); n = 229 (2022).

Academic or Calendar Year

In 2022, most (85%) audiologists who were paid an annual salary in their primary job worked 9 or 10 months per year (an academic year)—up from past years (71%–80% from 2010 to 2020; see Figure 2).

Figure 2. Percentage of school-based audiologists who are paid an annual salary in their primary job and who work 9 or 10 months per year or 11 or 12 months per year, by year.



Note. These data are from the 2010, 2012, 2014, 2016, 2018, 2020, and 2022 ASHA Schools Surveys. Because of rounding, percentages may not total exactly 100%. In 2010, fewer than 1% of audiologists selected worked other period on the survey. In 2012, 1% of audiologists selected worked other period on the survey. n = 223 (2010); n = 209 (2012); n = 141 (2014); n = 166 (2016); n = 164 (2018); n = 174 (2020) n = 200 (2022).

Limitations of Data Analysis

Because the percentage of audiologists who were paid on an hourly basis is so small, the analyses included in this report are limited to audiologists who were paid an annual salary.

Academic and Calendar Year Salaries

In 2022, audiologists reported a median academic year salary of \$76,000—up from \$72,000 in 2020 (a 6% increase). They reported a median calendar year salary of \$84,000—up from \$81,213 in 2020 (a 3% increase; see Table 3). The *median salary* is the salary at which half of the audiologists reported more than that amount and half reported less.

Table 3. Median academic and calendar year salaries of school-based audiologists, by year.

Salary basis	2010 (n = 194)	2012 (n = 186)	2014 (n = 128)	2016 (n = 151)	2018 (n = 158)	2020 (n = 144)	2022 (n = 171)
Academic year (9–10 month) salary	60,000	63,000	67,000	70,038	67,000	72,000	76,000
Calendar year (10–11 month) salary	70,239	69,836	77,157	82,000	80,000	81,213	84,000

Note. These data are from the 2010, 2012, 2014, 2016, 2018, 2020, and 2022 ASHA Schools Surveys.

Academic Year Salaries by School Setting

The median academic year salary of audiologists varied by school setting. From 2010 to 2022, audiologists who worked in a combination of schools usually reported a higher median academic year salary than that of audiologists who worked in elementary schools. In 2022, they reported a median academic year salary of \$78,000—up from \$73,799 in 2020 (a 6% increase; see Table 4).

Table 4. Median academic year salaries of audiologists, by school setting and by year.

				\$			
School setting	2010 (n = 153)	2012 (n = 145)	2014 (n = 91)	2016 (n = 113)	2018 (n = 120)	2020 (n = 107)	2022 (n = 141)
Overall	60,000	63,000	67,000	70,038	67,000	72,000	76,000
Elementary school	58,566	60,000	65,044	72,000	65,000	70,000	73,000
Combination of schools	60,373	62,000	66,197	66,913	69,964	73,799	78,000

Note. These data are from the 2010, 2012, 2014, 2016, 2018, 2020, and 2022 ASHA Schools Surveys.

Salary Supplements

In 2022, 29% of audiologists reported receiving a salary supplement, stipend, bonus, or other type of "salary upgrade" for having their ASHA CCC—up from past years (17%–26% from 2010 to 2020). About 3% of audiologists reported receiving a supplement for doing Medicaid billing—the same percentage as in 2020 (see Appendix Table 2).

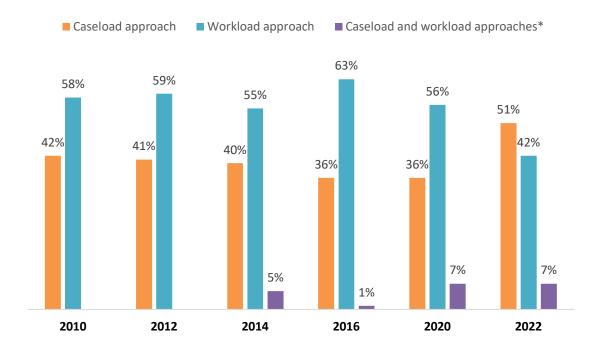
Caseload/Workload

Caseload or Workload Approach

As defined in the survey, a *caseload approach* is based on the number of students served; a *workload approach* is based on all activities required and performed.

In 2022, most (51%) audiologists indicated that a caseload approach was used to determine the number of students they served—up from past years (36%–42% from 2010 to 2020). The remainder indicated that a workload approach, or a combination of caseload and workload approaches, was used (see Figure 3).

Figure 3. Percentage of school-based audiologists who indicate that a caseload approach and/or a workload approach is used to determine the number of students they serve, by year.



Note. These data are from the 2010, 2012, 2014, 2016, 2020, and 2022 ASHA Schools Surveys. *This item was not included in the 2010 and 2012 surveys. Analysis was limited to clinicians who were employed full or part time. n = 229 (2010); n = 201 (2012); n = 147 (2014); n = 135 (2016); n = 137 (2020); n = 154 (2022).

Caseload Size

In 2022, audiologists had a median monthly caseload size of 63—up from 50 in 2010 and 2012, up from 55 in 2014, and up from 60 in 2016, 2018, and 2020. In other words, each audiologist served about 63 different students in a typical month (see Appendix Table 3).

Caseload Size by School Setting

Median caseload size varied by school setting (see Appendix Table 3).

Areas of Intervention

In 2022, most (94%) audiologists served students with hearing loss—about the same as in past years (92%–95% from 2016 to 2020). More than half (57%) of audiologists served students with auditory processing disorder—up slightly from 54% in 2020. More than half (55%) of audiologists served students with autism spectrum disorder—about the same as in recent past years (53%–58% from 2018 to 2020; see Appendix Table 4).

From 2010 to 2022, audiologists' caseloads included a higher average number of students with hearing loss than with other disorders (see Appendix Table 5).

Weekly Activities

In 2022, audiologists spent 10 hours per week on diagnostic evaluations—down from past years (12–16 hours per week from 2014 to 2020; see Table 5).

Table 5. Average number of hours per week that school-based audiologists spend on activities, by year.

			#		
Weekly activity	2014 (n = 92)	2016 (n = 76)	2018 (n = 84)	2020 (n = 74)	2022 (n = 95)
Collaborative consultation	_	_	5	3	4
Diagnostic evaluations (e.g., observation, screening, scoring, analysis)	12	12	16	14	10
Direct intervention	_	_	_	_	6
Direct intervention: Classroom-based/ integrated services	2	2	9	3	_
Direct intervention: Pullout	3	3	8	2	_
Documentation ^a	7	7	_	_	7
Medicaid billing	_	1	_	_	_
MTSS/RtI activities	1	0	3	1	_
Services to Section 504 students	1	1	4	2	_
Supervision	1	1	5	1	2
Technological support (e.g., hearing aids/cochlear implants, AAC) ^b	8	9	11	10	8
Telepractice	_	_	_	< 1	_
Other duties as assigned ^c	6	2	_	5	4

Note. These data are from the 2014, 2016, 2018, 2020, and 2022 ASHA Schools Surveys. Analysis was limited to clinicians who were employed full time and had a caseload size of at least one student. In 2014, 2016, and 2018, clinicians worked a maximum of 52 hours per week. In 2020, they worked a maximum of 55 hours per week. In 2022, they worked a maximum of 65 hours per week. Dash indicates that the item was not included in the survey. MTSS = multitiered system of support; Rtl = response to intervention; AAC = augmentative and alternative communication. aln 2014 and 2016, this item was documentation/paperwork. In 2014, this item was troubleshooting technology (e.g., hearing aids, AAC, cochlear implants, personal FM systems). In 2014, 2016, and 2018, this item was other indirect activities.

Missed Sessions With Students

In 2022, nearly half (44%) of audiologists were *not* required to make up missed sessions with students—down slightly from 48% in 2020. About one third (33%) of audiologists were required to make up missed sessions with students any time they missed a session for any reason—about the same as in past years (27%–35% from 2016 to 2020; see Table 6).

Table 6. Percentage of school-based audiologists who are required to make up missed sessions with students, by circumstance and by year.

		9	6	
Circumstance	2016 (n = 142)	2018 (n = 146)	2020 (n = 150)	2022 (n = 89)
I am not required to make up missed sessions.	53	37	48	44
When the student misses a session due to an assembly or a classroom activity.	5	10	5	8
Any time a student misses a session for any reason.	10	12	15	11
Any time I miss a session for any reason.	29	27	35	33

Note. These data are from the 2016, 2018, 2020, and 2022 *ASHA Schools Surveys*. Analysis was limited to clinicians who were employed full or part time.

ASHA Workload Calculator

In 2022, most (71%) audiologists indicated that they did not know what the ASHA Workload Calculator was—down from 76% in 2020 (see Table 7).

Table 7. Percentage of school-based audiologists who have used the ASHA Workload Calculator that is on ASHA's website or know what it is, by year.

	9	%
Posnonso	2020	2022
Response	(n = 144)	(n = 167)
Yes	1	1
No, but I know what it is	23	28
Don't know what it is	76	71

Note. These data are from the 2020 and 2022 ASHA Schools Surveys. Analysis was limited to clinicians.

Member Satisfaction Ratings

In 2022, nearly half (48%) of audiologists indicated that ASHA was doing a good or excellent job in serving its school-based members overall—up from 44% in 2020. Ratings varied by specific area of service and by year (see Table 8).

Table 8. Ratings for what kind of job ASHA is doing in serving its school-based members, by area and by year.

			•	%					
Datina	2012	2014	2016	2018	2020	2022			
Rating	$(n \ge 257)$	$(n \ge 175)$	$(n \ge 197)$	(<i>n</i> ≥ 198)	(<i>n</i> ≥ 200)	$(n \ge 221)$			
	Overall needs ^a								
Poor	4	2	4	4	4	4			
Fair	31	24	30	33	33	29			
Good	42	56	45	44	37	41			
Excellent	7	6	5	4	7	7			
Don't know, NA	17	12	16	15	20	19			
			Adv	осасу					
Poor	7	6	8	7	10	5			
Fair	28	31	27	30	26	30			
Good	32	33	35	37	29	31			
Excellent	7	10	5	5	8	7			
Don't know, NA	25	21	26	21	27	27			
		Answer	ing school-ba	sed practice qu	uestions				
Poor	_	_	_	6	6	3			
Fair	_	_	_	34	26	28			
Good	_	_	_	34	34	36			
Excellent	_	_	_	3	8	5			
Don't know, NA	_	_	_	23	27	28			
			Continuing	g education					
Poor	8	3	6	5	4	11			
Fair	30	24	32	33	30	32			
Good	41	44	38	39	37	28			
Excellent	10	18	11	8	14	11			
Don't know, NA	10	11	14	16	15	18			
			Reso	urces ^b					
Poor	4	1	2	3	6	5			
Fair	21	15	24	28	25	24			
Good	45	53	44	44	40	40			
Excellent	16	22	16	7	11	11			
Don't know, NA	15	9	14	17	18	19			

Note. These data are from the 2012, 2014, 2016, 2018, 2020, and 2022 *ASHA Schools Surveys*. Dash indicates that the item was not included in the survey. Because of rounding, percentages may not total exactly 100%. ^aFrom 2012 to 2018, this item was *overall*. ^bFrom 2012 to 2016, this item was *with online resources*; in 2018, it was *with evidence-based resources*.

Survey Methodology

A paper survey was mailed on February 15, 2022, to a random sample of 649 ASHA-certified audiologists and 8,000 ASHA-certified SLPs who were employed in school settings in the United States. The sample was stratified by state. Small groups, such as audiologists and SLPs in Wyoming, were oversampled. A pre-notification email about the survey was sent on February 15 to the audiologists and SLPs in the sample. Paper replacement surveys were mailed to nonrespondents on March 28 and April 21.

Because small groups were oversampled, ASHA used weighting when presenting survey data.

Response Rates

Of the original 649 audiologists in the sample, 634 were eligible to complete the survey. The number of respondents was 230—a 36.3% response rate. Past ASHA Schools Survey response rates are as follows:

- 2010: 64.8% (overall); 59.1% (among audiologists)
- 2012: 63.6% (overall); 54.4% (among audiologists)
- 2014: 46.0% (overall); 38.0% (among audiologists)
- 2016: 47.4% (overall); 43.4% (among audiologists)
- 2018: 48.0% (overall); 41.3% (among audiologists)
- 2020: 40.3% (overall); 42.2% (among audiologists)

Suggested Citation

American Speech-Language-Hearing Association. (2022). *Schools survey report: Trends in educational audiology, 2010–2022.* www.asha.org

Additional Information

Companion reports are available on the ASHA website at www.asha.org/Research/memberdata/Schools-Survey/.

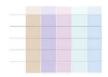
Questions?

For additional information regarding this report, please contact ASHA's Audiology Professional Practices unit at audiology@asha.org.

Acknowledgment

Without the generous cooperation of the members who participate in our surveys, ASHA could not fulfill its mission to provide vital information about the professions and discipline to the Association membership and public. Thank you!

Appendix



Appendix Table 1. *Greatest professional challenges of school-based audiologists who are clinical service providers, by year.*

				%			
Professional challenge	2010 (n = 280)	2012 (n = 266)	2014 (n = 183)	2016 (n = 214)	2018 (n = 204)	2020 (n = 150)	2022 (n = 169)
Budget constraints	_	_	_	66	66	47	37
Ethical challenges	_	_	_	14	12	11	10
High caseload/workload size	51	46	44	42	50	42	32
Inadequate workspace and facilities	19	19	28	27	30	38	32
Incorporating optimal service delivery models	_		21	27	36	26	21
Lack of funding to attend professional development programs	_	_	_	_	_	37	30
Lack of training to work with specific disorders or special populations	_	_	_	_	12	12	11
Large amount of paperwork	59	49	52	39	38	53	44
Legal challenges (e.g., due process)	_	_	_	_	12	10	10
Limited family/caregiver involvement and support ^a	41	42	42	43	50	53	47
Limited support from the administration	26	29	28	32	34	25	24
Limited time for collaboration	_	_	28	23	28	17	19
Limited understanding of my role by others	50	50	48	61	46	53	46
Low salary	29	29	25	36	31	26	18
Medicaid billing	_		_	12	11	13	_
Out-of-pocket professional expenses	33	34	28	25	21	21	26
Personnel shortage	_	_	_	17	16	19	20
Providing clinical services for multilingual students and families	_	_	_	_	_	_	16
Travel/distance between schools	_	_	29	23	26	33	27
Volume of meetings						33	34

Note. These data are from the 2010, 2012, 2014, 2016, 2018, 2020, and 2022 *ASHA Schools Surveys.* Dash indicates that the item was not included in the survey. ^aFrom 2010 to 2018, this item was *limited parental involvement and support.*

Appendix Table 2. Percentage of school-based audiologists who receive a salary supplement, stipend, bonus, or other type of "salary upgrade," by reason for receiving the upgrade and by year.

			9	%		
Reason	2010 (n ≥ 231)	2012 (n ≥ 222)	2014 (<i>n</i> ≥ 149)	2016 (<i>n</i> ≥ 193)	2020 (n ≥ 182)	2022 (n ≥ 212)
ASHA CCCs	22	20	26	17	20	29
Certified specialization areas (e.g., reading/literacy, autism)	_	_	_	_	_	1
Extra duties (e.g., Medicaid billing, supervision)	8	8	9	4	_	_
Medicaid billing	_	_	_	_	3	3
Multilingual skills/experience ^a	1	2	2	1	_	3
National Board Certification for teachers	_	_	_	5	_	_
Recruitment/retention bonus	3	3	4	1	_	_
Results of performance evaluation ^b	_	3	4	13	_	_
Supervision	_	_	_	_	_	3
Supervision of assistants or aides	_	_	_	_	3	_
Supervision of graduate students	_	_	_	_	4	_

Note. These data are from the 2010, 2012, 2014, 2016, 2020, and 2022 ASHA Schools Surveys. Dash indicates that the item was not included in the survey. ^aFrom 2010 to 2016, this item was bilingual services. ^bFrom 2012 to 2014, this item was results of value-added assessment.

Appendix Table 3. *Median monthly caseload size of audiologists, by school setting and by year.*

				#			
School setting	2010 (n = 175)	2012 (n = 158)	2014 (n = 100)	2016 (n = 99)	2018 (n = 98)	2020 (n = 96)	2022 (n = 108)
Overall ^a	50	50	55	60	60	60	63
Special day or residential school	n/r	n/r	n/r	n/r	n/r	n/r	n/r
Elementary school	50	50	40	75	61	n/r	63
Administrative office	n/r	n/r	n/r	n/r	n/r	n/r	n/r
Combination of schools	50	45	54	60	65	60	70
Other	n/r	n/r	n/r	n/r	n/r	n/r	n/r

Note. These data are from the 2010, 2012, 2014, 2016, 2018, 2020, and 2022 ASHA Schools Surveys. Analysis was limited to clinicians who were employed full time. ${}^{a}Overall$ includes respondents who did not indicate a school setting. n/r = not reported (to preservice confidentiality and provide more certain results, we do not report data for groups of fewer than 25 survey respondents).

Appendix Table 4. Percentage of school-based audiologists who serve students in areas of intervention, by area and by year.

	%								
Area	2010 (n = 175)	2012 (n = 158)	2014 (n = 100)	2016 (n = 99)	2018 (n = 98)	2020 (n = 96)	2022 (n = 108)		
Acquired brain injury ^a	8	9	0	6	16	11	13		
Auditory processing disorder	44	31	43	45	46	54	57		
Augmentative and alternative communication ^b	18	15	12	23	27	28	25		
Autism spectrum disorder ^c	32	33	31	46	53	58	55		
Childhood apraxia of speech	9	8	9	14	14	13	12		
Cognitive communication disorders	_	_	14	30	21	30	28		
Dysphagia (swallowing/feeding disorders)	3	5	0	5	6	5	3		
Fluency disorders	7	10	6	7	15	8	12		
Gender affirming voice care	_	_	_	_	_	_	1		
Hearing loss ^d	84	63	76	92	92	95	94		
Language disorders: Pragmatics/social communication	15	18	17	31	32	27	27		
Language disorders: Semantics, morphology, syntax	_	_	15	29	28	22	24		
Reading and writing (literacy)	15	9	9	17	15	14	21		
Selective mutism	5	6	5	5	3	7	5		
Speech sound disorders ^e	16	19	12	20	23	19	22		
Voice or resonance disorders	3	4	1	0	7	6	6		

Note. These data are from the 2010, 2012, 2014, 2016, 2018, 2020, and 2022 ASHA Schools Surveys. Analysis was limited to clinicians who were employed full time. Dash indicates that the item was not included in the survey. ^aFrom 2010 to 2016, this item was *Traumatic brain injury*. ^bFrom 2010 to 2020, this item was nonverbal, augmentative and alternative communication. ^cFrom 2010 to 2012, this item was Autism spectrum disorders, including pervasive developmental disorder and Asperger's. ^dFrom 2010 to 2012, this item was hearing disorders. ^eFrom 2010 to 2014, this item was articulation/phonological disorders.

Appendix Table 5. Average number of students that school-based audiologists serve in a typical month, by area and by year.

	#								
Area	2010 (<i>n</i> varies)	2012 (<i>n</i> varies)	2014 (<i>n</i> varies)	2016 (<i>n</i> varies)	2018 (<i>n</i> varies)	2020 (<i>n</i> varies)	2022 (<i>n</i> varies)		
Acquired brain injury ^a	n/r	n/r	n/r	n/r	n/r	n/r	2*		
Auditory processing disorder	5	12	14	8	6	7	7		
Augmentative and alternative communication ^b	7	n/r	n/r	n/r	5	7	6*		
Autism spectrum disorder ^c	7	10	7	8	13	11	9		
Childhood apraxia of speech	n/r	n/r	n/r	n/r	n/r	n/r	2*		
Cognitive communication disorders	_	_	n/r	11	n/r	9	11*		
Dysphagia (swallowing/feeding disorders)	n/r	n/r	n/r	n/r	n/r	n/r	1*		
Fluency disorders	n/r	n/r	n/r	n/r	n/r	n/r	3*		
Gender affirming voice care	_	_	_	_	_	_	2*		
Hearing loss ^d	50	79	80	59	48	61	65		
Language disorders: Pragmatics/social communication	8	20	n/r	27	27	19	33*		
Language disorders: Semantics, morphology, syntax	_	_	n/r	26	26	n/r	39*		
Reading and writing (literacy)	21	n/r	n/r	n/r	n/r	n/r	39*		
Selective mutism	n/r	n/r	n/r	n/r	n/r	n/r	1*		
Speech sound disorders ^e	27	34	n/r	n/r	n/r	n/r	31*		
Voice or resonance disorders	n/r	n/r	n/r	n/r	n/r	n/r	13*		

Note. These data are from the 2010, 2012, 2014, 2016, 2018, 2020, and 2022 ASHA Schools Surveys. The numbers included in this table were provided by audiologists who <u>did</u> serve students in the areas listed. The *n* values vary widely because audiologists did not serve students in all areas. *n/r* = not reported. Dash indicates that the item was not included in the survey. *This data point is from a group of fewer than 25 survey respondents and is therefore less reliable. ^aFrom 2010 to 2016, this item was *Traumatic brain injury*. ^bFrom 2010 to 2020, this item was *nonverbal*, *augmentative and alternative communication*. ^cFrom 2010 to 2012, this item was *Autism spectrum disorders*, *including pervasive developmental disorder and Asperger's*. ^dFrom 2010 to 2012, this item was *articulation/phonological disorders*.