Ad Hoc Committee for Technical Support to
Guyana Ministry of Health

January 31, 2017

Final Report

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Committee Charge: On February 18, 2014, the ASHA Board of Directors (BOD) approved the motion (BOD 3-2014) to establish the ad hoc committee to provide technical assistance to the Ministry of Health of Guyana (MOH) in order to strengthen its national strategic plan for early detection and intervention of communication disorders under the ASHA-Pan American Health Organization (PAHO) collaboration. On February 13, 2015, the BOD approved the resolution (BOD 3-2015) to extend the ad hoc committee until January 31, 2017.

Members: Gloria Weddington, Chair; Noma Anderson; Carol Westby; Elise Davis-McFarland; Samantha Kleindienst, International Issues Board (IIB) Liaison 2015; Diana Barreneche, IIB Liaison 2016; and Lily Waterston, ex officio.

Background
The Guyana plan was composed of three phases: (1) needs assessment, (2) service delivery model review with recommendations, and (3) implementation of project to improve service delivery. The needs assessment revealed that the country is in its infancy in meeting the needs of people with communication disorders. With only one audiological physician and no speech-language pathologists (SLPs) to deliver services to a population of almost 800,000, there were limited materials and unreliable equipment. The individual in the speech-language therapist (SLT) position was a special educator who received a bachelor’s degree in Cuba. The MOH developed an effective strategy to increase the number of service providers to the 10 regions of Guyana, which included trained technicians to conduct audiological screenings and diagnostic tests, fit hearing aids, and provide education to the people in their assigned districts. Personnel in the rehabilitation division established positions for rehabilitation technicians, who were educated to provide speech-language services as well as occupational and physical therapy.

This solution in audiology worked very well, but problems remained. The audiology equipment was old, and some equipment could not be repaired. The technician program offered no academic credit; therefore, professional advancement was unavailable to the technicians, and they needed additional training to serve their isolated communities. The audiological physician (Dr. Ruth Quaicoe) requested (1) technicians to calibrate and repair audiometers, (2) volunteer audiologists to assist with service delivery on a rotating basis, (3) volunteer audiologists to provide professional development for the technicians so they could continue to train other technicians (train the trainers), and (4) create a curriculum for the university to institute a program in both speech-language pathology and audiology in a single bachelor’s degree.

The MOH solution to increase the number of service delivery providers to people with speech and language disorders was twofold. The first solution was to establish an undergraduate program at the University of Guyana to educate graduates who could serve as medical rehabilitation technicians to assist the SLT and to provide speech-language therapy and physical/occupational therapy in a single
degree in medical rehabilitation science. The second solution was to train and employ paraprofessionals at the MOH in each of these disciplines. However, these solutions were limited, as each solution did not offer enough training to provide the necessary services for speech-language or hearing, and each solution did not allow for enough direct mentorship or access to service providers. It was determined that a program dedicated for speech and hearing is warranted because there is limited or no university-level training in audiology and because the medical rehabilitation technicians receive only a few courses in speech-language. Furthermore, mentorship and direct service provision is needed to assist with assessment, intervention, and in-service training for teachers and medical staff at the MOH.

The MOH also requested donations of books and clinical materials.

Based on the observation of these limitations, the MOH and the University of Guyana requested support from ASHA to assess and provide recommendations for how to strengthen their strategic initiative in communication sciences and disorders. With the request and support of the ASHA BOD, the following activities took place:

**Activities**

Overall, the activities consisted of three phases, which are discussed below.

1. **Phase 1 (Needs Assessment)** was completed in December 2013. The committee chair, accompanied by the ASHA Director of International Programs and the PAHO Regional Advisor for Disabilities, traveled to Guyana to discuss the collaboration with representatives of PAHO, the MOH, and the University of Guyana.

2. During Phase 2, an action plan was developed and completed in December 2014 in which the committee responded to requests from the MOH and the University of Guyana. The following tasks were completed:
   a. Reviewed the medical rehabilitation services degree curriculum. The committee noted that the speech-language curriculum was insufficient for comprehensive service delivery. It contained few courses in basic sciences and introductory courses.
   b. Created a speech-language pathology/audiology (SLP/A) curriculum.
   c. Planned a campaign to recruit volunteers to assist with speech-language and audiology service delivery, training, and mentoring, as well as to hire technicians to calibrate equipment and train local technicians.
   d. Provided a list of websites for information and clinical materials.
   e. Determined ways to assist with the community awareness campaign.

3. **Phase 3** was the implementation of the project. The following tasks were completed:
   a. Recruited volunteers to travel to Guyana to assist with direct service delivery, mentoring, and training.
   b. Requested contribution of books and therapy materials for the University of Guyana and the MOH.
c. Assisted with the approval process for the speech-language pathology/audiology curriculum at the University of Guyana.
d. Assisted with the community awareness campaign.

2014 Activities

- Completed Phase 1 (Needs Assessment) and Phase 2 (Action Plan).
- Disseminated information and conducted recruitment.

Publication in SIG 17 Perspectives

Presentation at the 2014 ASHA Convention

The chair of ad hoc committee offered an update to the IIB at the 2014 ASHA Convention.

2015 Activities

- February 2015: Submitted proposed SLP/A curriculum to the University of Guyana.
- March 2015: Committee chair and two ASHA member volunteers traveled to Guyana and met with political leaders, university administrators, and university students. Chair Gloria Weddington made a 2-hour presentation to majors in medical rehabilitation sciences, some of whom were potential SLP/A majors.
- April 2015: The University of Guyana Academic Council approved the curriculum.
- June 2015: Recruitment notification was posted on the ASHA Community pages.
- July 2015: Committee proposed an accelerated schedule for classes to be offered for 3 weeks per class so that students from three academic levels could participate in the first cohort. Also, an accelerated schedule makes it possible to recruit instructors who are able to devote 3 weeks, instead of an entire semester, to a course. The university approved the schedule. The first cohort of students completed the courses in December 2017. The university suspended recruitment of new students until this first cohort completed the courses.
- August 2015: ASHA volunteer LaShundra Collins was the first ASHA member to volunteer to the Guyana Ministry of Health; she assisted with service delivery in speech-language pathology for 2 weeks.
- September 2015: Six students were recruited for the SLP/A program at the University of Guyana.
• September–October 2015: Peace Corps Volunteer and ASHA Member Erin Mercer taught the first course in speech-language pathology: BMS 1101, Introduction to Communicative Disorders.
• September 2015: Request for volunteers to teach courses at the University of Guyana and provide clinical services at the Ministry of Health was posted on the ASHA Community pages.
• October 2015: Publication in SIG 17 Perspectives:
• October 2015: Peace Corps Volunteer and ASHA Member Erin Mercer completed a letter to be sent to publishers and ASHA members requesting donations for the resource library.
• October 2015: Chair Gloria Weddington met with faculty and doctoral students about the Guyana project at Howard University. Six professors and four doctoral students volunteered to assist by teaching courses and soliciting books and materials for Guyana. One doctoral student who has family ties in Guyana volunteered to travel to teach the phonetics course in December 2015.
• October 2015: Dr. Ruth Quaicoe (MOH audiological physician) taught BMS 1102, Anatomy and Physiology of Speech and Hearing Mechanisms (Head and Neck).
• November 2015: Committee met at the ASHA Convention in Denver to discuss project evaluation. Weddington solicited donations of books and clinical materials from publishers.
• November 2015: ASHA Volunteer Kari Comer, Clinical Educator, George Washington University, taught BMS 1104, Child Language Development, via distance learning technology.
• November 2015: Peace Corps Volunteer and ASHA Member Erin Mercer taught BMS 1103, Human Growth and Development.
• November–December 2015: ASHA volunteer Sulare Telford, doctoral student at Howard University, taught BMS 1105, Introduction to Phonetics, in Guyana.

2016 Activities

• January 2016: Peace Corps Volunteer and ASHA Member Erin Mercer taught BMS 1201, Neuroanatomy/Neurophysiology of Speech-Language-Hearing.
• January–February 2016: Dr. Ruth Quaicoe taught BMS 1202, Speech and Hearing Science–Psychoacoustics.
• January–February 2016: ASHA Volunteer Shameka Johnson, Assistant Professor at Howard University, taught BMS 1203, Child Language Disorders.
• February–March 2016: Dr. Ruth Quaicoe taught BMS 1204, Clinical Attachment 1: Audiology Observation.
• March 2016: ASHA Volunteer Phallon Doss, audiologist in private practice, taught BMS 2101, Diagnostic Audiology and Hearing Disorders.
• April 2016: ASHA Volunteer Demarcus Bush, Assistant Professor of Audiology at South Carolina State University, taught BMS 2102, Hearing and Speech Audiometry Assessment.
• April 2016: Chair Gloria Weddington, in collaboration with Silvia Martinez and Linda Rosa-Lugo, presented a panel at the annual National Black Association for Speech-Language and Hearing (NBASLH) Conference in Virginia Beach.
• April–May 2016: ASHA Volunteer Lesley-Ann Bovell, SLP in private practice, taught BMS 2103, Phonology and Articulation.
May 2016: Three members of the Guyana ad hoc committee traveled to Guyana to meet with the new government administration, provide lectures to students at the University of Guyana in the speech-language therapy and audiology program, and meet with faculty and administrators at the University of Guyana.

May–June 2016: ASHA Volunteer Lindsey Jorgensen, Assistant Professor in Speech-Language Pathology, University of South Dakota, taught BMS 2202, Aural Rehabilitation.

June 2016: ASHA Volunteers Lena Caesar, Professor in Speech-Language Pathology at Loyola University, and Sharlene Ottley, Director of Early Childhood Research, University of the District of Columbia, taught BMS 2202, Assessment in Speech and Language (Diagnostics).


July–August 2016: Peace Corps Volunteer and ASHA Member Erin Mercer taught BMS 1900/2204, Clinical Attachment (SLT).

August 2016: Dr. Ruth Quaicoe taught BMS 1901/2205, Clinical Attachment (AUD).

August 2016: Chair Gloria Weddington—along with Linda Rosa-Lugo, Silvia Martinez, and Lily Waterston—presented a panel at International Association of Logopedics and Phoniatrics (IALP) in Dublin, Ireland.

August–September 2016: Peace Corps Volunteer and ASHA Member Erin Mercer taught BMS 2900, Clinical Attachment (SLT Diagnostics).

September–October 2016: Dr. Ruth Quaicoe taught BMS 2901, Clinical Attachment (VII Audiology).

October 2016: ASHA Volunteer Phallon Doss taught BMS 3103, Amplification.

October–November 2016: ASHA Volunteer Cristina Luna, SLP in private practice, taught BMS 3102, Craniofacial Anomalies.


November 2016: Plural Publishers donated a library of more than 100 titles in speech-language pathology and audiology to the University of Guyana.

November–December 2016: ASHA Volunteer Kristine Lundgren, Associate Professor in SLP at the University of North Carolina, taught BMS 3101, Neurological Disorders.


2017 Activities


February–March 2017: ASHA Volunteer Phallon Doss taught BMS 3201, Pediatric Audiology.

March–April 2017: ASHA Volunteer Charlotte Molrine, SLP Professor at the University of Edinboro, taught BMS 3202, Motor Speech Disorders.


• July 2017: ASHA Volunteer Phallon Doss taught BMS 4103, Electrophysiological Measures in Audiology.
• September 2017: ASHA Volunteer Elise Davis-McFarland, ASHA President-Elect, was scheduled to teach BMS 4202, Counseling. However, her commitments as ASHA President-Elect made it difficult for her to perform this service; therefore, she recommended Dr. Jairus-Joaquin Matthews, who taught the course in her place.
• October 2017: ASHA Volunteer Henriette Landon, SLP Professor at San Jose State University, taught BMS 4203, Early Intervention.
• June 2017: Chair Gloria Weddington and the faculty completed an action plan for the next 5 years.
• June 2017: University of Guyana was approved for a final Peace Corps Response Volunteer to manage the program for the 2018–2019 academic year.
• Dr. Quaicoe, audiological physician, retired from the MOH and was appointed to coordinate the speech therapy/audiology program.
• June 2017: The University of Guyana dedicated the library that had been donated by Plural Publications.
• June 2017: PAHO agreed to provide scholarships for one student in speech-language and one student in audiology for graduate education, upon the students’ agreement to join the University of Guyana faculty upon graduation.
• A second cohort of students will be recruited for the 2018–2019 academic year.
• The MOH has a new name now: “Ministry of Public Health.”

Below is a summary of the results and outcomes from the work of the Ad Hoc Committee for Technical Support to Guyana Ministry of Health, University of Guyana, Peace Corps Response, PAHO, and the Guyana Ministry of Health. Continued limitations requiring more support and effort are highlighted.

Summary of Results and Continued Areas of Need

1. The committee developed a curriculum in speech-language pathology and audiology that is consistent with similar programs in South America. Committee members designed the curriculum, authored the course syllabi, and submitted the curriculum to the university. The chair traveled to Guyana to meet with university faculty and administrators to negotiate core requirements and schedules.

2. Audiology
   a. The committee members recommended a technician for calibrating equipment. However, this position has yet to be filled.
   b. We have been unable to obtain donated equipment, which leaves the provision of audiological services quite limited.
   c. The Peace Corps Response Volunteer Audiologist was selected but was unable to accept the position. No replacement has been identified.
   d. Volunteer audiologists were recruited to teach audiology classes, but none visited Guyana to assist with service delivery. There is still a need for on-site service provision, training, and supervision.

3. Speech-Language Pathology
a. The request for service providers yielded one pediatric SLP from Washington, DC, who spent 2 weeks assisting with service delivery and training.

b. A Peace Corps Response Volunteer SLP was selected and placed at the university to manage the program in speech-language/audiology. The first volunteer spent 1 year (2015–2016) in Guyana, where she taught courses, supervised practica, and offered lectures to various groups in Guyana. The volunteer left Guyana in September 2016 but continued to coordinate the program from her home in the United States.

c. A second Peace Corps Response Volunteer in SLP was selected. This volunteer arrived in Guyana in March 2017 and assumed the responsibilities of the first volunteer. There is a need to eventually fill this position permanently in order to maintain the continuity and integrity of the program. However, Peace Corps Response has approved a replacement for the second volunteer, who departed in November 2017. They were encouraged that the University of Guyana was moving toward sustainability upon receiving the action plan that was developed in June 2017.

d. Therapy materials were donated by Academic Therapy and Super Duper, and books have been donated by Plural Publishers. However, the University of Guyana still needs materials for clinical practica and library books for students.

e. ASHA volunteers have taught most of the classes in the program at the University of Guyana. This model of teaching has been successful to date but will eventually need to be replaced by trained students from the University of Guyana in order to maintain sustainability. Internal instruction and professorships will need to be a focus of the University of Guyana program and recruitment.

Conclusions

The Ad Hoc Committee for Technical Support to Guyana Ministry of Health has concluded 3 years of activities assisting Guyana to improve service delivery to people with communication disorders. The majority of the goals have been met.

- **Goal 1:** Complete a curriculum in speech-language pathology and audiology for the University of Guyana – **Completed**
- **Goal 2:** Advertise using ASHA websites to recruit potential volunteer service providers in speech-language pathology and audiology, and invite them to travel to Guyana to assist the speech-language therapist and audiologist with assessment and intervention for people with communication disorders – **Completed**
- **Goal 3:** Select resources for education and service delivery – **Completed**
- **Goal 4:** Select volunteer service providers to (1) teach courses in speech-language pathology at the University of Guyana; (2) provide professional development to audiology technicians; (3) assist with direct service delivery in audiology and speech-language pathology; and (4) supervise practicum – **Partially Completed** (The ad hoc committee assisted the University of Guyana in selecting instructors and service providers to volunteer to teach and work with clients for the MOH and provide professional development activities in 2015 and 2016. The goal of assisting the university in recruiting ASHA volunteers to supervise practicum was not accomplished.)
- **Goal 5:** Follow up on the proposed SLP/A curriculum at the University of Guyana, and advocate for implementation – **Completed**

Future activities:
• Continue to advertise for volunteers to assist with speech and hearing services in Guyana.
• Continue to advertise for volunteers to teach courses at the University of Guyana.
• Continue to assist the University of Guyana in establishing a partnership with a university program in the United States.
• Monitor the program at the University of Guyana and evaluate activities, including instruction and student performance.
• Continue to assist with announcing available teaching and clinical volunteer positions as the University of Guyana and the MOH begin recruitment of volunteers and permanent staff.
• Continue to encourage U.S. speech-language pathology and audiology programs to offer practica in Guyana.

Recommendations

1. The Ad Hoc Committee for Technical Support to Guyana Ministry of Health has been a vital lifeline for the Guyanese to build capacity to deliver competent services to people with disabilities in communication; however, there is still substantial need for development and growth in several areas, as mentioned above. Despite achieving the intended goals for the last 3 years, the ad hoc committee strongly recommended that ASHA continue to support the efforts at the University of Guyana in order to reach a level of sustainability that will reduce the risk of reduced or backward progress made to date.

2. **Members of the ad hoc committee** will continue to assist with recruiting faculty, supervisors, and clinicians; mentoring students; and soliciting materials and textbooks for the program. We were beginning to help with locating a U.S. partnership that would provide instructors and supervisors and help with graduate education of University of Guyana students. Finally, the ad hoc committee will assist the university with grant writing.

3. **Recognize the volunteers publicly** so that they know our organization appreciates their time, effort, and commitment to the success of this project (for example, Gloria Weddington will prepare a note with pictures to be published in the People section of *The ASHA Leader*. This note will highlight volunteers’ services, and ASHA is encouraged to provide certificates of gratitude to each volunteer at the IIB meeting in Boston in November 2018). This project would not have been possible without the tireless efforts of these volunteers to ensure that the Guyanese students have high-quality instruction.

4. ASHA is encouraged to continue promoting these projects so that we remember our role in the expansion of services to people in developing countries. In turn, governments seeking to improve their services to people with disabilities will look to our organization for guidance and leadership.

5. The ad hoc committee recommends that ASHA support the efforts of our partners in Guyana and other countries to obtain external funding for sustaining the projects that we helped them develop.

6. In 2018, Guyana will have five newly educated speech and hearing professionals. However, it is possible that the program at the University of Guyana might end if it does not receive external assistance with recruitment of instructors, a partnership with a U.S. university, and funding. ASHA members will continue to volunteer on an individual basis; however, without the backing of our powerful organization, there could be detrimental effects to the current success of the newly developed—and still in its infancy—speech and hearing undergraduate program at the University of Guyana.

7. The ad hoc committee strongly recommends that ASHA determine the duration of international projects based on need; therefore, this means that some projects might last for 1 year, whereas others might be supported for a longer duration. We believe that our ad hoc
committee ended prematurely, which is why committee members continue to assist as individual volunteers. If we had ended our support when the committee ended, the Guyana program would have encountered significant difficulties impacting program continuation.