Introduction

Continuing professional development (CPD) is fundamental to the speech and language therapy profession today. However, like many underpinning principles, this idea is not new. This paper focuses on CPD during the period from immediately after the Second World War to 1965 (when prequalifying professional education began to undergo a fundamental change from diploma to degree and from professional body to college/university examination). The College of Speech Therapists (CST) (now the RCSLT) was inaugurated in 1945 through the amalgamation of the British Society of Speech Therapists (BSST) and the Association of Speech Therapists (AST). Much of the evidence on which the following discussion is based is derived from contemporary CST literature (its journal *Speech* and the magazine *Bulletin*). Other main sources of information include an international description of the early development of the profession (Eldridge 1968) and a history of the first fifty years of the professional body (Robertson et al 1995).

Continuing professional development defined

Continuing professional development (CPD) is defined as the 'way in which you continue to learn and develop throughout your career. CPD is essential. It adds to your skills, knowledge, professional identity and ways of thinking so that you stay up to date and practise safely and effectively, now and in the future'. This subsumes the concept of lifelong learning: 'formal and informal learning opportunities that allow you to continuously develop and improve the knowledge and skills you need for employment and personal fulfilment' (Broughton & Harris 2019, p. 4). Only in 1991 was the requirement for CPD formalised by the professional body. In the early years of the professional body's existence, there was no such official requirement. However speech therapists appear to have had available a wide range of lifelong learning opportunities and to have been voracious in their uptake (despite the need often for self-funding). Opportunities, now as then, include reading and contributing to the professional journal and monthly magazine, attending a variety of study days and conferences (local, regional and international) and studying for further examinations.

Pre-1945

The concept of CPD did not appear with the launch of CST. We have documentary evidence from the BSST journal that speech therapists were interested in and able to engage in continuing professional development in the second half of the 1930s (if not before), eg Miss Ferrie's meetings in Liverpool

for speech therapists in the area 'to discuss any difficulties in their practice and to exchange ideas in connection with their work' (*Speech* 4/1, p. 23). Members of the AST's precursor organisation will also have done so, but we currently have little documentary evidence for this, eg their March 1939 weekend conference (*Speech* 4/4, p. 40). Miss Eileen MacLeod (who became the first Chairman of CST) ran a seminar course for speech therapists in what was described as 'the first of its kind to be held in this country' from 6 to 11 July 1936 (*Speech* 1/4, p. 39). It included lectures on several client-groups and discussion as well as visits to observe speech therapy in hospitals, clinics and a school. It cost £5 (about \$25 at the time, 2020 value about £360). It was aimed at practising speech therapists in the UK as a refresher course but also at giving 'American and foreign visitors an opportunity of studying British methods of speech therapy.' In *Speech* 2/2 (p. 18) we're given a report from the course, which was apparently attended only by British speech therapists. The course was to be repeated in 1938 (*Speech* 3/4, p. 31), with the cost reduced by £1 for BSST members and associates.

Early speech therapists (of independent means) also attended national and international congress and conferences (*Speech* 3/1, pp. 8-9), eg the 1935 Congress of the French Society of Phoniatrics (report in *Speech* 1/1, p. 31), the Second International Congress on Phonetic Sciences in London also in 1935 (*Speech* 1/2, pp. 31-32) and the 1936 International Congress for Logopaedia and Phoniatry in Copenhagen (*Speech* 1/4, p. 36 and 2/3, pp. 35-37). Marguerite Nielka (BSST Hon Secretary) gave a paper in French at Le Congrès Français d'Oto-rhino-laryngologie in October 1936 (*Speech* 1/3, pp. 45-46 and 2/3, pp. 16-27). The 1938 congress of the International Society for Logopedia and Phoniatry was due to take place in Salzburg at the end of July (*Speech* 3/3, p. 31) but was cancelled 'owing to the present political situation in Central Europe' (*Speech* 3/4, p. 31). A lecture series in Paris and an international congress of phonetic sciences in Ghent were also advertised in that issue (*Speech* 3/4, p. 32).

Closer to home, a course of ten lectures in Edinburgh on the mechanics of speech and voice was advertised for one guinea (£1.05) (*Speech* 3/3, p. 5). The Scottish branch of BSST was considering a 1939 summer school in speech therapy (presumably a CPD opportunity) and Glasgow members at least had benefited from lectures at their meetings in the early part of 1938, with a series planned for the 1938-39 session (*Speech* 4/3, pp. 23-24).

In addition to attending lectures, courses and conferences, associates of BSST were able to qualify as a BSST Member by written thesis, as shown in the slowly growing list in *Speech* from the late 1930s. Arthur Tolfree and Amy Swallow were among those who did so (*Speech* 4/1, p. 23).

Of course the second world war had an enormous effect on speech therapy services as well as CPD opportunities. However, a series of lecture courses from April to July 1940 was arranged by Miss Kingdon Ward. 'It is thought that this opportunity will be welcomed by many who are missing such amenities' (*Speech* 5/2, p. 5). It's not known if they were able to run.

1945-1965

Professional journal

BSST produced a journal from 1935 (*Speech*), which was adopted as the journal of the newly formed CST in 1945. From 1958-1965 it was entitled *Speech Pathology and Therapy*. A total of 40 editions (two per annum) were published between 1946 and 1965. The content of papers in the journal show how speech therapists' work and knowledge were developing during this time and how the range of clinical areas considered by the profession continued to increase (see Table 1).

Areas not discussed in the first ten years of the journal but appearing in the post-war years include language disorder in children, the influence of vision, hearing and posture on speech, bilingualism, autism and the potential contribution of speech therapy for elderly people. The expanding scope of the speech therapist's work is reflected in a proportionate decrease in papers which considered stammering and cleft lip and palate compared to the earlier period. As the profession developed, the breadth as well as depth of work increased and embraced more disorders and client-groups. The onus was on practising speech therapists to continue to expand their knowledge and to assimilate and apply new material. With little support from their training establishments or employers, it appeared that the majority of opportunities were created by, as well as for, speech therapists themselves.

Apart from information about client-groups and disorders, the journal papers also dealt with wider issues such as terminology, speech therapy working practices, clinical audit and instrumental technology. The development of recording techniques and their wider availability reflect a tool which speech therapists were beginning to learn about and employ in their work. Gramophone records and open-reel tapes have given way to digital tape-recorders and computer analysis. Therapists were still able to learn from the experience of people now considered to be the early pioneers of the profession, such as Joan van Thal, Anne McAllister and Beryl Oldrey who continued to produce papers for the journal. Winifred Kingdon Ward (who was the most prolific author in the early years) did not have anything published in the professional journal in these post-war years. This

change was perhaps because she retired from training school work in 1948 - although she continued her clinical work until very much later (obituaries in *Bulletin* No. 325).

Knowledge was being provided in the journal from many different professional backgrounds (see Figure 1) but mainly from within speech therapy. Medicine and psychology are well-represented but linguistics, which now forms one of the main strands in pre-qualifying education is absent but for three papers by phoneticians. The wide range of professions reflects the diversity of the speech therapist's knowledge-base.

Table 1. Topics of papers in the professional journal (1946-65)

Subject of paper	No. papers
Clinical area:	
Developmental disorders of speech and language	24
Aphasia	20
Dysfluency	16
ENT/orthodontics	16
Hearing impairment	11
Dysphonia	6
Physical disability	5
Cleft lip and palate	5
Developmental written language disorder	5
Elderly	4
Mentally handicapped	4
Mental health	2
Autism	2
Acquired phonetic disorders	2
Professional issues:	
Instrumental technology	9
Speech therapy in other countries	6
Normal development	3
Speech therapy working practices	3
IQ tests	3
Clinical audit	3
Terminology	2
Relaxation	1
Other	9

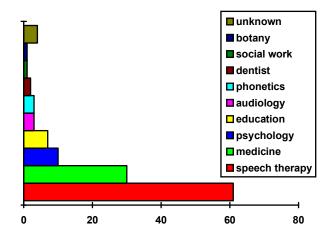


Figure 1. Authors' professions

Papers included in the journal were original (67%), reprints (11%) or written versions of lectures given mainly in the refresher courses (22%). Referencing remained minor, which possibly reflects the continuing paucity of primary written sources compared to today. The breadth of knowledge in some areas compares well with today's standards, although the profession may now use different terminology and have a more objective evidence-base for practice. Scientific method and rigour may be lacking but many of the papers describe very clearly the same phenomena discussed more recently, eg the lack of correlation between age and speed of recovery (Mitchell, 1955, 1960). The need for widely accepted terminology became urgent. An approved list of professional terminology was first mooted in March 1947. This suggestion gave rise to some heated correspondence at that time, but it was not until 1960 that the list appeared in the journal in its final form, including definitions of dyseneia (articulation defects arising from defects of hearing), dyslalia (defect or slow development in articulation) and periphrasis (circumlocution) as well as many other terms which remain familiar to speech and language therapists today (CST, 1960).

Bulletin

CST began to produce a news-sheet in 1945 (*Bulletin*) which included notices and reports of public lectures and meetings and lectures from the Areas (Scottish (including Northern Ireland), Northern, Midland and Southern) as well as clinical articles, a bibliography, a section for members' letters and news from headquarters. This more frequent publication (initially quarterly when paper was still rationed and eventually monthly apart from one month in summer) gave speech therapists more immediate direct and indirect access to a range of lifelong learning opportunities.

In addition, *Bulletin* was seen as 'a useful trial ground for those whose ability in this field is less familiar to the Editors of our more important publication [*Speech*]' (letter from Miss Rosser in

Bulletin No. 2) and thus itself a source for lifelong learning. Early (and later) editorials frequently urged members to write papers, eg in No. 21 the Editor suggests that readers should write an article for Bulletin regularly and suggests a length of two pages of double-spaced foolscap (but does not suggest suitable content). For a time in the 1950s the Areas were being asked to supply copy in rotation. Perhaps speech therapists of the time were more eager to receive than give or lacked confidence that others would find their contributions of interest. It is difficult to detect clinical themes running through articles printed in Bulletin although throughout the period more advice on recording becomes available and there is expansion in the client-groups discussed, eg the speech disorder associated with Parkinson's Disease is described (Cooper, 1962).

A bibliography feature was printed regularly from 1952 and continued throughout the period so that speech therapists would very easily have been able to discover relevant literature from a range of journals, initially in German and French as well as English. While this was, no doubt, well-intentioned, it perhaps reflects a distance between the senior members of the profession, many of whom were women of independent means with opportunities to travel, and the majority of speech therapists. Access to some of the journals would have been difficult in print-only days.

Both *Bulletin* and the professional journal gave some members the opportunity to become editors, assistant editors or guest editors, which would have been valuable professional development at a time when the professional literature was expanding rapidly.

Groups

Bulletin also shows the development of local networks, study and discussion groups (eg 'Speech therapy and the mentally retarded' and 'NW London speech therapists' discussion group') many of which held weekend or evening meetings and in a variety of locations, including therapists' own homes. There appears to have existed a plethora of informal fora for speech therapists (probably more than today), some short-term and focused (eg working party on cerebral palsy), some long-term and general (eg the Area structure within CST).

Lectures and refresher courses

Many public lectures were advertised in *Bulletin* although the majority would only have been easily accessible to speech therapists living in the south-east of England. On the death of Gladys Jansson in 1960 she bequeathed a sum of money to CST and a biennial public lecture was instituted in her

name: https://stratharchives.tumblr.com/post/627692213721350144/guest-blog-post-gladys-jansson-and-the-jansson (accessed 20 January 2021).

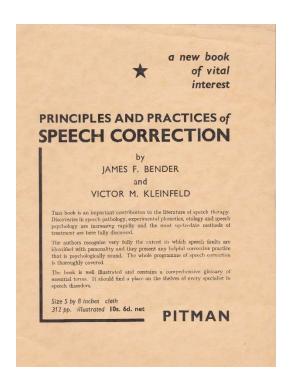
In the 1950s a series of refresher courses was instituted, which were organised by the Areas on a rotational basis. They are discussed more fully in a separate paper. The refresher courses spawned some of the journal papers of the time, so that members unable to attend were able to benefit from the lectures in an alternative way. From items in *Bulletin* Table 2 has been constructed which shows the range of geographical areas and topics covered by the refresher courses. Also from *Bulletin* it seems that places on the refresher courses were very keenly filled and often waiting lists were required.

Table 2. CST Area refresher courses

Area	Dates	Theme
Northern	29-30 August 1952	Hearing loss and audiometry
Midland	26-28 March 1953	Speech problems of neurological origin
Southern	17-18 July 1953	The normal child
Scottish	8-10 April 1954	Speech problems related to conditions of the larynx
Midland	19-21 July 1956	Practical aspects of speech therapy - demonstrations
Northern	11-14 October 1956	Developmental speech disorders and their treatment
Southern	26-28 September	Cerebral palsy
	1957	
Scottish	10-13 April 1958	The problem of stammering
Midland	8-10 September	Language: integration-disintegration-reintegration
	1960	
Midland	2 December 1961	Reading
Northern	3-6 October 1962	
Southern	4-7 September 1963	The development and practice of clinical techniques in the
		treatment of aphasia
Scottish	1-4 April 1964	
Midland	7-10 April 1965	Some psychological and educational aspects of the speech
		therapist's work

Books

In the pre-war years, book advertisements on the inside back cover of the journal mostly included subjects such as public speaking, elocution, psychiatry and neurology until one appeared in *Speech* 2/4 (1937) on stammering. A book on 'speech correction' was advertised from Speech 5/1 in 1939: https://www.worldcat.org/title/principles-and-practices-of-speech-correction-with-glossary-of-500-technical-terms/oclc/1002569/editions?referer=di&editionsView=true (accessed 20 January 2021).



Book reviews were published in *Speech* from its first issue. The first book to be reviewed (*Speech* 1/1, pp. 33-34) was a wide-ranging text on normal development and speech disorders of children: 'a valuable addition to the small amount of British literature on the subject of Speech and Speech Disorder in Childhood, viewed from a scientific standpoint. Especially will it be helpful as a sound textbook for those training to enter the profession of Speech Therapy' (p. 33). It included a chapter on organisation of speech clinics. Another early review was on Anne McAllister's book *Clinical Studies in Speech Therapy* (*Speech* 3/1, p. 33).

During the war, shortage of paper and the absence of many individuals on war duties further reduced the availability of material for publication so at the beginning of the period studied here there was still a limited amount of new literature for speech therapists to use to gain more knowledge or to learn about new theories and new clinical methods and techniques.

Book reviews appeared occasionally in the journal in the early post-war years and became a regular feature from 1957, shortly after a change of editorship. The reviews included academic books, therapy materials (exercises, plays and poems) and occasionally journal articles. These latter eventually appeared separately as abstracts. The majority of books as well as journals were written in English, but books written in German, Dutch and French (including one on Danish phonology) were also reviewed. From 1954 an increasing number of American publications was noted.

Books were increasingly appropriate to the readership of the journal, being either general speech therapy texts, those on specific disorders or client-groups (written by members of the profession) or those written by other professions contributing to the knowledge-base of the profession. Indeed several of the books published at this time remain 'classics' (eg Greene and Mathieson, 1991).

Prices of books reviewed and advertised varied greatly. The majority of British books in the 1940s and 1950s ranged from 2/6 (12.5p) to 36/- (£1.80) while German and American books cost from 25/- (£1.25) to £8-6/- (£8.30). In addition, some books were priced in US dollars, Swiss francs and other currencies which would have been problematic for the majority of CST members to acquire (especially in the immediate post-war period) because of currency restrictions. Thus the range of books was certainly widening during this time and speech therapists who were among the early to qualify would have experienced an enormous change in the amount of literature available on a range of topics.

National conferences

Throughout the period CST held regular national conferences (see Table 3) and members (who could afford to) were also able to attend conferences, mostly overseas, of the International Association of Logopaedics and Phoniatrics (IALP). The first conference in 1945 is discussed in this blog-post: https://stratharchives.tumblr.com/post/614474772963885056/guest-blog-post-keep-calm-and-carry-on-the-first (accessed 20 January 2021). Joan van Thal was the speech therapist who promoted the IALP and she became its General Secretary in 1953.

Table 3. CST conferences 1946-65

Year	Venue
1945	London (Royal Society of Medicine, 4th - 7th April)
1948	London (Royal Society of Medicine, 20th - 24th September)
1952	Oxford (Keble College, 15th - 19 th April)
1955	London (Bedford College, 26th – 29th August)
1961	Birmingham

From Table 3 it is clear that all the conferences were held in the south of the country, although this was partly rectified in 1966 when the national conference was held in Glasgow. Proceedings from all the conferences were produced so that CST members unable to attend at least would have been able to read the content of the papers. Some conference papers were reprinted in the professional journal. A personal report of the first conference informs us that '..representatives of many

countries were present at the Royal Society of Medicine to hear the papers which were presented and to take part in the discussions. An extraordinarily vital and stimulating atmosphere pervaded the conference' (Eldridge, 1968, p. 127). Already at this first conference the topics were wide-ranging, eg the physiology of speech and voice, speech therapy for the child with cerebral palsy and home background in relation to speech disturbance. The second conference maintained an international atmosphere, with speakers from Canada, Holland, Prague, USA, Uruguay, Denmark and France as well as from England but the 1952 conference's speakers were mostly British. In 1955 two subjects merited several papers: residential speech therapy and speech therapy in geriatrics.

Research

Research was on the professional agenda even before CST was formally established. The organisation of a Research Unit had been discussed as early as 1944. Its function would have been to 'deal with enquiries for assistance in connection with research from the membership and from other sources and to report to the Executive on the foregoing matters' (CST, 1944). A CST research committee was functioning by 1946 but was in abeyance by 1949. It is only in 1997 that a Research Development Officer was employed by the professional body to carry out this function.

Eldridge (1968, p. 165) mentions discussion of research at the 1948 conference. In response to questions asked by overseas delegates which included requests for details of availability of research facilities, she reports that 'lack of personnel and lack of funds were serious handicaps'. There is much evidence that indeed speech therapists were undertaking research (not only those awarded fellowships by thesis). Studies, such as those of the speech of 3800 children in London, Manchester and Cornwall and of 1000 children in Newcastle gave epidemiological data probably unrepeatable in today's financial climate. An increasing number of speech therapists were themselves producing research publications. One of the first, a highly academic piece of work (Renfrew, 1950), was followed up with an examination of the process of data collection and reporting (Renfrew et al, 1957).

Educational recognition

More formal recognition of CPD by the professional body was available through thesis or examination which gave Fellow of CST (FCST) and Member of CST (MCST) respectively. FCST was the first of the qualifications obtainable and was awarded by thesis and only after five years of clinical experience from 1949. (FCST was also given occasionally for distinguished service to the profession.) The MCST system was instituted in 1960. Applicants had to have three years of clinical experience

and 'satisfy examiners that they have achieved a high degree of professional knowledge and have undertaken some specialised study' (Eldridge, 1968, p. 167). Regulations and calls for applicants appeared from time to time in *Bulletin*. The examination itself in 1961 consisted of three parts: a three hour general paper with choice in sections; an essay on a special subject and an oral (*Bulletin* 119, p. 5).

A full-time one year diploma course was established in Reading University for speech therapists who wanted to become educators. This Diploma in the Teaching of Speech Therapy awarded by Reading's Institute of Education was first offered in 1965 and its aim was to 'train selected speech therapists as teachers in their own field' (1964 advert in *Speech Pathology and Therapy* 7/2,121-122) so as to create a nucleus of educators and to help clinicians who tutored students. The main areas of study were education and child development. Two of the first four students reported in *Bulletin* on their experience - 'interesting, challenging, promising and exhausting!' (R.M. Beggs and Sister M. de Montfort Supple in *Bulletins* 172, p. 5 and 177, p. 8). This course no longer exists, probably because of its limited market.

Some speech therapists studied for undergraduate degrees to augment the diploma gained during their pre-qualifying speech therapy course (LCST), for example one undertook a BA in Psychology, English and History of Philosophy. For her, the advantages were 'greater confidence in dealing with the psychological aspects of the speech defective, the knowledge of how to give and evaluate tests, and the experience gained in experimental work' (Morrish, 1965). Additionally she reports that people were more 'impressed' by BA than LCST.

Other CPD opportunities

The possibility of a CST library was suggested as early as 1945. However, a final decision was not made until 1957, when in the background of some antagonism to the plan, a CST reference library was to be established and funded from the commemoration fund for Dr Boome (an early strong supporter of the profession who ran speech clinics in London). This resource became a lending library for a trial period in 1962 and it was hoped that eventually the library service would be able to 'provide a general advisory service about literature on selected subjects' (Burton, 1962). By 1967 this fledgling library had been transferred to the Royal National Institute for the Deaf library on permanent loan. A tape-recording library was also established late in this period so that members could hear recordings of lectures (public and from refresher courses) and discussion groups.

A final area of CPD was membership of one or more of the professional body's committees which influenced how the profession developed and how speech therapy was represented to the government and other organisations. Many familiar names appeared and reappeared in committee lists given in *Bulletin* and the professional journal over the years but there was also a gradual influx of new blood. Anne McAllister, Winifred Kingdon Ward, Joan van Thal and others were joined by Muriel Morley, then succeeded by Edna Butfield, Dorothy Fitch (Betty Byers Brown), Margaret Greene, Jackie Stengelhofen and many more. By far the majority of CST committees' members were female and unmarried, probably reflecting the membership in general at the time.

The variety of committees and the introduction of new ones indicates the changing and developing profession. The War Casualties committee apparently only existed in the year immediately after the Second World War. From the beginning some CST members were representatives of the professional body in other committees, such as the Council of the Board of Registration of Medical Auxiliaries, the Whitley Council (where salaries were set) and later the International Affairs Committee of the Central Council for the Care of the Disabled.

The top CST committee post was Chairman of CST Council. Eight speech therapists (all women) held this appointment during the period 1944-1965. Two, Joan van Thal and Joyce Wilkins, held office twice and all followed Eileen MacLeod (who had been Chair of the BSST and continued as chair of the CST until 1949). The period of office varied between one and three years.

Conclusion

Overall, this early period in the development of the profession and the professional body was rich in opportunities for continuing professional development. Whilst text-books were still relatively rare, there was a host of other methods of gaining knowledge and skills from within and outwith the profession, which were apparently keenly consumed by speech therapists. The rapid evolution of the profession necessitated flexibility in its members so that new technology, new client-groups, social and political changes could be absorbed and accommodated into clinical practice through CPD activities.

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