

## FOREWORD

Nothing in nature is static; but some things do seem to change faster than others. Take, for example, the U.S. healthcare system, where changes appear to be occurring at near warp speed. Among the changes affecting clinical work in speech-language pathology is the demand of healthcare payers for documentation of the practical benefits of therapy. In short, they want to know the extent to which treatment will reduce the disabilities and handicaps that result from a communication disorder, the amount of treatment needed to achieve these benefits, and its cost, *prior to approving such treatment*. Such demands appear to be shaping the future of clinical practice in speech-language pathology, at least in healthcare settings, and is the topic selected for detailed coverage in this issue of *Seminars in Speech and Language*.

Traditionally, the tests and assessment procedures used in speech-language pathology have been evaluated in terms of the specificity with which they measure the signs and symptoms of a clinical diagnosis; their sensitivity to differences and changes in the severity of those signs and symptoms; the reliability of these measures from one examiner and one assessment occasion to another; and the validity of such measures. Indeed, much time and effort have been devoted to developing and refining measures of the disorders that fall within the scope of practice of the profession and have resulted in substantially improving the specificity, sensitivity, reliability, and validity of the tests and assessment procedures that speech-language pathologists now use. That is the good news. The bad news is, all but a few assess a disorder's im-

pairment, which is of minimal value for functional assessments of a patient's disability or handicap.

In many ways, this focus on functional assessment seems highly consistent with one of the long-standing goals of treatment, to improve a patient's communication abilities, which will not only generalize, but must be maintained over time. If so, it is only a shift in the profession's focus, from assessing treatment outcome using traditional measures of patients' impaired functions to assessing their abilities to perform important communication tasks in home, school, work, and social environments. To help us better understand the issues involved, I turned to Dr. Carol Frattali at the W.G. Magnuson Clinical Center of the National Institutes of Health. Dr. Frattali has played a leading role in the profession's initial efforts to develop assessments of patients' functional outcomes following intervention, and the contributors she has assembled for this issue of *Seminars* are colleagues who have also played prominent roles in this task. Their articles on assessing functional outcomes in neurogenic populations illustrate the challenges and their implications for these and other clinical populations seen by speech-language pathologists. In effect, this issue constitutes a status report of work in progress, work that each of us may have an opportunity to influence—and should—if we are interested in the future of this profession.

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