

# Job Conditions and Practice of Private Office-Based Speech-Language Pathologists in Korea: A Cross-Sectional Survey

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**Purpose:** Private speech therapy centers remain an ongoing concern, especially as the primary working environment for speech-language pathologists (SLPs) in Korea. The purpose of this study is to investigate the current working conditions and contents of the speech therapy services of private practice-based SLPs from the perspectives of employed SLPs to find factors that can positively affect future job retention, recruitment, and satisfaction.

**Methods:** This study conducted a web-based survey across Korea targeting private practice-based SLPs. A total of 265 SLPs were invited to participate, and 219 completed the response. The study was divided into three parts, covering demographic information, work type, environment information, service contents, and client-related information, to ensure a comprehensive understanding of the current landscape.

**Results:** Regular full-time jobs with social insurance were the most employed types of Korean SLPs in private practice. Fisher's exact tests showed no significant effects on the type of employment and salary according to the kind of certificate. The location of the private speech therapy center affected the unit price per session. In addition, there was no significant difference in salary level depending on the employment conditions and certificate type.

**Conclusions:** The findings of this study are significant for the field of speech therapy. Despite being the main service of private speech therapy centers, the costs related to evaluation and treatment were found to have lower unit fees than other psychological and developmental rehabilitation service areas. This disparity could potentially impact the recruitment and job retention of private practice-based SLPs. Therefore, it is crucial to consider supporting incentives based on the type of certificate and career, along with fee adjustments suitable for the current reality, to address these issues.

**Keywords:** Survey, Speech-language pathologist, Private practice, Job condition, Retention, Satisfaction



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## INTRODUCTION

Speech-language pathologists (SLPs), also called SLPs, are specialists in communication who work with people of all ages, from babies to adults, and treat many types of communication and swallowing problems [1]. SLPs work in various areas, including private practice, physician's offices, hospitals, schools, colleges or universities, rehabilitation centers, and long-term and residential health care facilities.

Over the past decade, the number of Korean SLPs was about 3,000 when the national

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qualification was legislated in 2012. However, as of 2024, the number of SLPs registered with the Korean Association of Speech-Language Pathologists (KSLP) has grown exponentially to about 15,000 [2] since the national qualification for SLPs was implemented in 2012 and has become a professional job. According to previous studies of the working environment of Korean SLPs, although various places such as private practice, hospitals, welfare centers and rehabilitation facilities, day-care centers, schools, and multicultural centers have been found, private practice have become the primary workplace for their career development in Korea [3-6].

SLPs in the United States are building up their careers in the school system and health care system, 42% of ASHA members are reported to work in health care facilities (e.g., hospitals, private physician's offices, SLP offices), and 58% work in public schools [7]. In addition, they have differences in working requirements, salaries, and clinical decision-making processes according to different work environments [8]. According to recent trends in the workforce of ASHA, linguistic pathology students in the United States tend to move from school-based to health care settings [9], and 10% of ASHA members have worked full-time in private offices since the COVID-19 pandemic, whereas 12% have worked part-time [10]. Unlike the working environment of SLPs in the United States, most SLPs have their career in private practice in Korea.

As such, it is extremely timely to investigate the work environment of private practice, which accounts for the majority of the job market for SLPs in Korea. This will be an important basis for improving employment conditions, job satisfaction, and service quality. Therefore, this study explored the employment types, social security insurance, working hours, salary, developmental rehabilitation voucher service, and type of communication disorders in private practice to predict the economic structure and employment environment considering changes in working conditions for use in policy proposals.

## METHODS

### Development of a survey questionnaire

The questionnaire is primarily composed of three parts: 8 general information questions, 13 questions about work conditions and environments for SLPs in private practice related to the type of work, salary, number of working days, number of treatment sessions, and speech therapy unit price, and 8 questions of information related to treatment and evaluation services including voucher service type, evaluation and treatment

cost per session, and service type (the proportion and speech or language disorder type). The content validity of the questionnaire was verified by five SLPs who have operated private offices for more than 10 years. Each item in the questionnaire was selected to have a score of 3 or more out of 5, and the final questionnaire was completed by revising and supplementing after the first preliminary questionnaire test (Table 1).

### Participants

This survey was sent to all members of KSLP using Google Forms for about a month, from March 1 to March 30, 2024 and 217 SLPs completely responded. The demographic information of the re-

**Table 1.** Questionnaire contents

Contents	Items
Basic questions (9 questions)	
	Local branch
	Sex
	Age
	Certificate type
	Education
	Career
	# of SLPs in the institution
	# of other clinicians in the office
	Administrative personnel
Key questions (21 questions)	
Working conditions & environments (13 questions)	
	Type of employment
	Type of salary
	# of offices employed
	Monthly salary (regular workers, freelancers)
	Unit cost per session
	Career years in the current SLP's office
	# of career year per institution
	Charge fee for speech therapy in the current SLP's office
	Charge fee except speech therapy in the current SLP's office
Service contents (8 questions)	
	Voucher type
	Evaluation & Treatment services for speech therapy
	Areas of speech therapy
	Area of other services except speech therapy
	Client's age for speech therapy
	Cost for evaluation & Assessment related to speech therapy
	Cost for evaluation & Assessment related to other services

**Table 2.** Demographic information of participants (N=128)

Variables	N (%)
<b>Branch</b>	
Kangwon	5 (2.3)
Gwangju-Honam	29 (13.4)
Daegu-Kyeongbuk	25 (11.5)
Daejeon-Chungcheong	20 (9.2)
Busan-Wolsan-Kyeongnam	36 (16.6)
Seoul	38 (17.5)
Incheon-Gyeonggi	64 (29.5)
<b>Sex</b>	
Male	11 (8.6)
Female	117 (91.4)
<b>Age (yr)</b>	
Less than 30	62 (28.6)
30-39	108 (49.8)
40-49	37 (17.1)
50-59	9 (4.1)
More than 60	1 (0.5)
<b>SLP Certificate</b>	
First-level	85 (39.2)
Second-level	132 (60.8)
<b>Education</b>	
College	8 (3.7)
University	144 (66.4)
Master degree	60 (27.6)
Doctoral candidate	3 (1.4)
Doctoral degree	2 (0.9)
<b>Career (yr)</b>	
1-4	89 (4.1)
5-9	67 (30.9)
10-14	41 (18.9)
15-19	16 (7.4)
More than 20	4 (1.8)
<b># of SLP in the institution</b>	
1	20 (9.2)
2-5	146 (67.3)
6-10	30 (13.8)
11-15	13 (6.0)
More than 16	8 (3.7)
<b># of other therapists excluding SLP in the institution</b>	
1	19 (8.8)
2-5	119 (54.8)
6-10	47 (21.7)
11-15	15 (6.9)
More than 16	17 (7.8)
<b>Administrative personnel in the institution</b>	
Yes	125 (57.6)
No	92 (42.4)

spondents is shown in Table 2.

### Statistics

SPSS (24.0 version) was used for statistics. Fisher's exact test and the chi-square test were used to investigate the work conditions and salary level based on certificate type. Moreover, a chi-square analysis was conducted to find out where the cost of treatment was affected by where the private center was located. All independent and dependent variables consisted of nominal scales, and the significance level was verified as 0.05.

## RESULTS

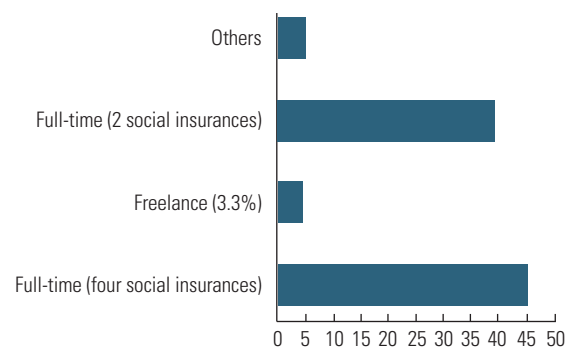
### Type of employment

As shown in Figure 1, 45.6% of the respondents were full-time workers with four social insurances, 44.2% were full-time workers with two social insurances, and 4.6% were freelancers. In addition, although there were a few, the types of work contracts were shown for incentives along with basic salaries (four social insurances), freelancers (subscribed four social insurances), four social insurances with 3.3 deductions, four social insurances with 3.3% deductions). As a result of Fisher's exact test, there was no significant difference in the type of employment according to the type of certificate ( $p=0.579$ ).

### Salary type and monthly payment status

Out of 217 respondents, the ratio system was the most common, with 156 respondents (71.9%) garnering the highest percentage, followed by 32 respondents (14.7%) for both the basic salary and the ratio system, and 21 respondents (9.7%) for the monthly wage. As shown in Figure 2, Fisher's exact test showed no significant difference in the level of salary depending on the type of certificate ( $\chi^2(7) = 13.838, p = 0.054$ ).

The average monthly gross salary of full-time SLPs was 2 to 2.5



**Figure 1.** Type of work conditions in private practice in Korea.

million won (about USD 1,450-1,800), accounting for most of the respondents at 27.8% (37 out of 131 respondents). In addition, 19.5% (26 respondents) earned 3 to 4 million won, 17.3% (23 respondents) earned 2.5 to less than 3 million won, 9.8% (13 respondents) earned 1.5 to less than 2 million won, and 8.3% (11 respondents) earned 1 to less than 1.5 million won. On the other hand, 6.8% (9 respondents) were found to earn less than 1 million won, while 9% (12 respondents) earned 5 million won or more.

Among the respondents, 73.3% (159 respondents) of SLPs only worked in one SLP office. In some cases, 21.7% (47 respondents) worked in two offices and 5.1% (11 respondents) worked in three offices.

The average monthly gross salary of freelancers working for two or more institutions was the largest at 23.5% (36 respondents). Meanwhile, 14.4% (22 respondents) earned 2 to less than 2.5 million won, 13.7% (21 respondents) 2.5 to less than 3 million won, 13.7% (21 respondents) 1 to less than 2 million won, 13.7% (21 respondents) 1 to less than 1.5 million won, 9.2% (14 respondents) less than 1 million won, and 5.2% (8 respondents) from 5 million won or more.

Regarding the unit price per session of SLPs who have signed regular employment contracts, 9.7% get less than 20,000 won, 23.4% get 20,000 won to less than 25,000 won, 31% get 25,000 to less than 30,000 won, 24.1% get 30,000 to less than 35,000 won, and 11.7% get more than 35,000 won. Meanwhile, the unit price per session of the freelancers (average of all institutions when one is working at two or more institutions) is less than 20,000 won for 3.3% of the respondents, 20,000 won to

less than 25,000 won for 11.3%, 25,000 to less than 30,000 won for 32.7%, 30,000 to less than 35,000 for 25.3%, 35,000 to 40,000 won for 17.3%, and 40,000 won or more for 10%.

**Career period in private practice**

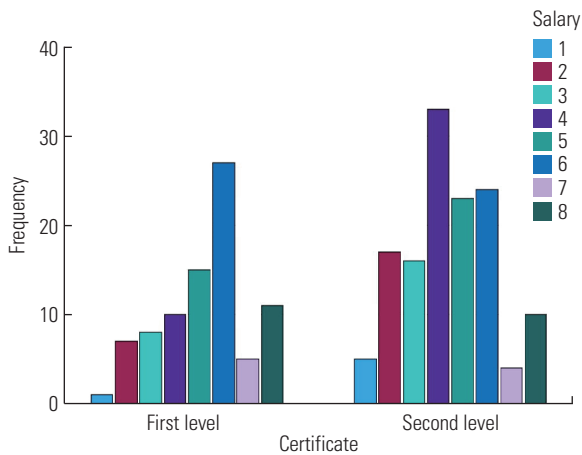
Forty-four SLPs (20.3%) worked for an SLP office for less than one year, 79 SLPs (36.4%) for 1 to 3 years, 53 SLPs (24.4%) for 3 to 5 years, 19 SLPs (8.8%) for 5 to 7 years, 11 SLPs (5.1%) for 7 to 10 years, 10 SLPs (4.6%) for 10 to 15 years, and 11 SLPs (5.1%) for more than 15 years as shown in Figure 3.

In terms of the average number of years worked, 7 respondents (3.2%) worked for under one year, 97 respondents (44.7%) worked for 1 to less than 3 years, 69 respondents (31.8%) worked for 3 to less than 5 years, 27 respondents (12.4%) worked for 5 to less than 7 years, 9 respondents (4.1%) worked for 7 to less than 10 years, 7 respondents (3.2%) worked for 10 to less than 15 years, and 1 respondent (0.5%) worked for more than 15 years. As a result of Fisher’s exact analysis, there was no significant difference in salary level depending on the career level ( $p=0.157$ ) (Figure 4).

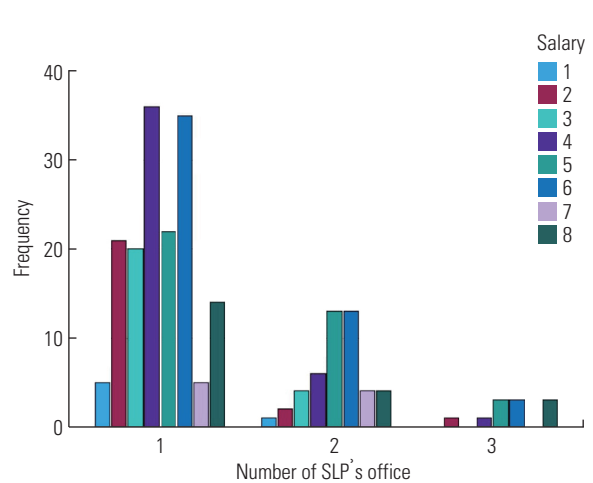
**Cost of speech therapy for children**

The unit price of speech therapy in a private clinic where an SLP works is the largest at 40,000 won to less than 50,000 won for 85 respondents (39.2%), followed by 50,000 to less than 60,000 won for 57 respondents (26.3%), 70,000 won or more for 35 respondents (16.1%), less than 40,000 won for 13 respondents (6%), and 60,000 to less than 70,000 won 12.4% (27 respondents).

Meanwhile, the average medical fee, excluding speech ther-



**Figure 2.** Histogram of salary level according to the type of Korean speech-language pathologist certificate. 1=less than 1,000,000 won, 2=1,000,000-1,500,000 won, 3=1,500,000-2,000,000 won, 4=2,000,000-2,500,000 won, 5=2,500,000-3,000,000 won, 6=3,000,000-4,000,000 won, 7=4,000,000-5,000,000 won, 8=more than 5,000,000 won.



**Figure 3.** Number of SLP’s offices they currently work in. 1=less than 1,000,000 won, 2=1,000,000-1,500,000 won, 3=1,500,000-2,000,000 won, 4=2,000,000-2,500,000 won, 5=2,500,000-3,000,000 won, 6=3,000,000-4,000,000 won, 7=4,000,000-5,000,000 won, 8=more than 5,000,000 won.

apy, at an SLP office is less than 40,000 won for 11 respondents (5.1%), 40,000 to less than 50,000 won for 58 respondents (26.7%), 50,000 to less than 60,000 won for 80 respondents (36.9%), 60,000 to less than 70,000 won for 26 respondents (12%), and 70,000 won and above for 42 respondents (19.4%). Fisher's exact test showed that there was significant difference in unit price of speech therapy for children depending on the location of private speech center ( $p=0.002$ ) (Figure 5).

### Treatment services in the private practice

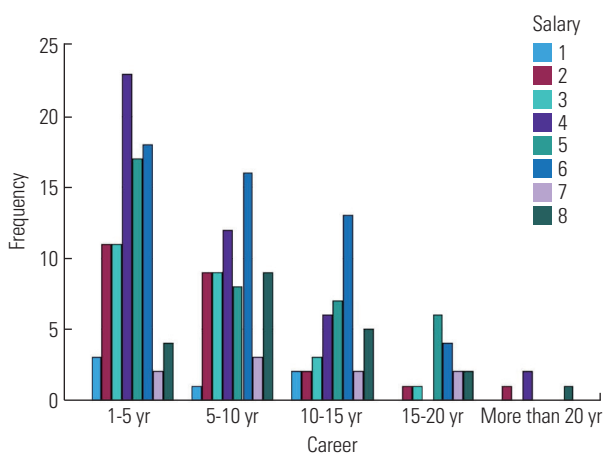
Among the ongoing treatment service areas in the current SLP's office, speech therapy accounted for the largest portion of the treatment services currently provided by the SLP office with 100% (217 respondents). Furthermore, their private speech centers provided various treatment services in addition to speech therapy services, including sensory integration therapy 137 patients (63.1%), play therapy 62.7% (136 patients), cognitive therapy 60.8% (132 patients), art therapy 58.5% (127 patients), music therapy 18.9% (41 patients), group therapy 54.4% (118 patients), and exercise rehabilitation 3 patients (1.4%) as shown in Figure 6.

### Voucher type

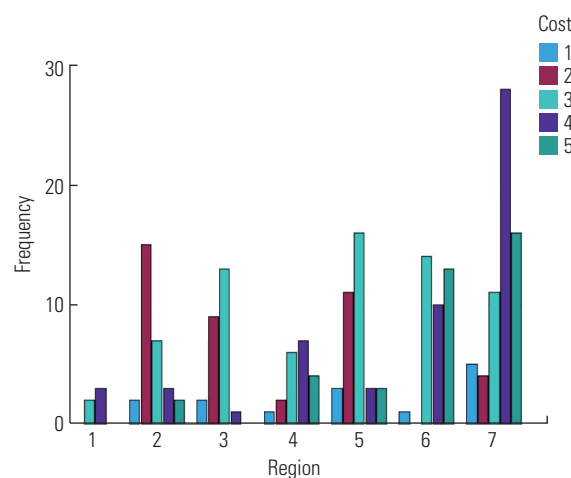
As for the types of vouchers provided by the current institutions, 166 respondents (76.5%) were provided with treatment support services from the Office of Education, 161 respondents (74.2%) developmental rehabilitation services, 131 respondents (60.4%) child and adolescent psychological support ser-

vices, 30 respondents (13.8%) students with dyslexia support services from the Office of Education, 18 respondents (8.3%) youth psychological support services, 6 respondents (2.8%) adult language cognitive integrated intervention services, 22 respondents (10.1%) language development support projects, 5 respondents (2.3%) daytime activity services for people with developmental disabilities, and 18 respondents (8.3%) after-school activity services for students with developmental disabilities. Overall, there were 17 actual expense centers.

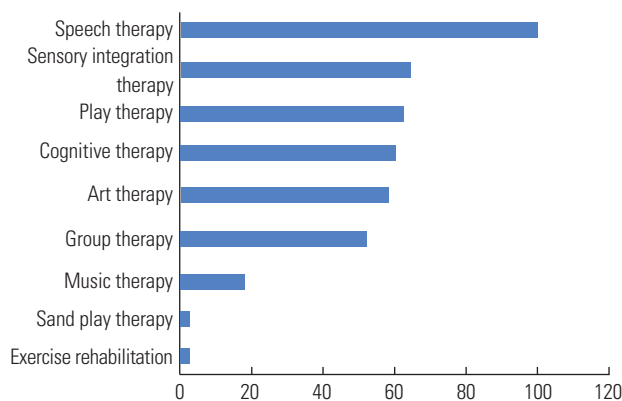
Among them, developmental rehabilitation services were the most common type of voucher provided by the respondents at the current institution, according to 158 respondents (72.8%). In addition, 119 respondents (54.8%) conducted children and adolescents psychological support services, 147 re-



**Figure 4.** Distributions of salary levels depending on career of SLP's in private practice. 1=less than 1,000,000 won, 2=1,000,000-1,500,000 won, 3=1,500,000-2,000,000 won, 4=2,000,000-2,500,000 won, 5=2,500,000-3,000,000 won, 6=3,000,000-4,000,000 won, 7=4,000,000-5,000,000 won, 8=more than 5,000,000 won.



**Figure 5.** Unit cost per speech therapy session across the regions (region: 1=Gangwon, 2=Gwangju · Honam, 3=Deagu · Gyeongbuk, 4=Daejeon · Chungcheong, 5=Busan, Ulsan, Gyeongnam, 6=Seoul, 7=Incheon · Gyeonggi, 8=jeju, cost: 1=less than 20,000 won, 2=20,000-25,000 won, 3=25,000-30,000 won, 4=30,000-35,000 won, 5=more than 35,000 won).



**Figure 6.** The area of treatment currently being carried out by the private practice where they work.

spondents (67.7%) conducted Office of Education treatment support services, 12 respondents (9.2%) conducted support services for students with dyslexia at the Office of Education, 3 respondents (1.3%) integrated adult language cognitive intervention services, 12 respondents (5.5%) conducted language development support projects, and 9 respondents (4.1%) conducted after-school activity services for students with developmental disabilities. Overall, 17 actual expense center services were conducted.

#### **Total number of sessions and working days in private practice**

The total number of sessions per month varied widely from less than 40 hours to more than 160 hours. Of the respondents, 25 (11.5%) worked for less than 40 hours, 70 respondents (32.3%) 40 to less than 80 hours, 64 respondents (29.5%) 80 to less than 120 hours, 42 respondents (19.4%) 120 to less than 160 hours, and 16 respondents (7.4%) 160 or more hours.

Meanwhile, the total number of working days during the week ranged from one to six, but there were no seven days. Only one person (0.5%) worked for one day per week, 10 respondents (4.6%) for two days, 23 respondents (10.6%) for three days, 30 respondents (13.8%) for four days, 115 respondents (53%) for five days, and 38 respondents (17.5%) for six days.

#### **Assessments currently being conducted by the institutions in which they work**

As shown in Figure 4, language evaluation was the most frequently conducted assessment in private clinics, accounting for 100% of the respondents. In addition, 96 respondents (44.2%) reported that an intelligence test was performed at the clinic where they worked, 114 respondents (52.5%) reported an emotional test, and 110 respondents (50.7%) reported a sensory-motor development test. Furthermore, some respondents reported that additional tests (parenting attitude test, infant test, psychological test, problem behavior evaluation, and speech perception test) were conducted in their private clinic.

#### **Cost for language evaluation in private practice**

In terms of the average language evaluation cost per child implemented by the institution where they work, 97 respondents (44.7%) accounted for the most significant portion with 50,000 won to less than 100,000 won, 56 respondents (25.8%) with less than 50,000 won, 44 respondents (20.3%) with 110,000 to less than 150,000 won, 17 respondents (7.8%) with 160,000 to less than 200,000 won, and 3 respondents (1.4%) with 210,000

won or more.

The average cost of a language test per child given by the institution to SLPs is as follows. 50 respondents (23%) answered 20,000 to less than 30,000 won, 29 respondents (13.4%) answered 30,000 to less than 40,000 won, 29 respondents (13.4%) answered 40,000 to less than 50,000 won, 35 respondents (16.1%) answered 50,000 to less than 60,000 won, 14 respondents (6.5%) answered 60,000 to less than 70,000 won, and 33 respondents (15.2%) answered more than 70,000 won.

Apart from the language test, the psychological evaluation cost also differed among the SLP offices: 65 respondents (30%) answered 50,000 to less than 100,000 won (the highest), 35 respondents (16.1%) under 50,000 won, 26 respondents (12.1%) 100,000 to less than 150,000 won, 19 respondents (8.8%) 150,000 to less than 200,000 won, 15 respondents (6.9%) 200,000 to less than 300,000 won, 4 respondents (1.8%) 300,000 to less than 400,000 won, and 9 respondents (4.1%) 400,000 won or more. The answers of 44 respondents (20.3%) were unverifiable.

#### **The percentage of clients receiving speech therapy**

More than 70% of children receiving speech therapy accounted for half of the total children coming to the speech therapy center, with 44.2% (96 respondents), and less than 10% with 1.8% (4 respondents). 5.5% (12 respondents) were reported under 10-30%, 18.9% (41 respondents) were reported under 30-50%, and 29.5% (64 respondents) were reported under 50-70%.

It was found that language development disorder services were the most prominent type of speech therapy service, and articulation disorder services accounted for the second-largest proportion of speech therapy service. Few services are being offered for neurogenic language disorders and fluency disorders. The proportion of children receiving speech therapy was mainly targeted at early school-age (3 to 7 years old) and school-age children, while infants (0 to under 3 years old) and adolescents were relatively low.

## **DISCUSSION**

This survey investigated the working conditions, roles, and service types of SLPs in private practice by exploring the employment types, salary levels, costs related to speech therapy evaluation and treatment, and service areas of SLPs working at an SLP office in Korea. According to previous studies, slp's job satisfaction, stress, and burnout were found to be related to various occupational characteristics, especially after COVID-19, including factors of demand, support, and reward

[11-13]. This fact suggests that more needs to be done to help identify and improve SLPs' welfare

This survey found that regular workers with social insurance were the most employed types of Korean SLPs in private practice. Depending on the method of employment, SLPs were classified into dependent contracts (four social security insurances that employers must subscribe to: employment insurance, industrial accident insurance, health insurance, and national pension) and independent contracts (for freelancers), with taxes varying accordingly. Dependent contracts require workers to receive severance pay upon retirement, while freelancers are taxed 3.3% regardless of employment.

In this study, regular SLPs were the most common at 89.8%, of which 45.6% were regular workers with four social insurances, 44.2% were regular workers with two social insurances, and 4.6% were freelancers. Unlike the study of Lee and Lee [6], the types of Korean language pathologists are professional freelancers (608, 44.9%), regular workers (551, 40.7%), fixed-pay contract workers (95, 7.0%), and fixed-pay and rate-based combined contract workers (65, 4.8%), indicating that the conversion to regular workers is relatively increased.

After COVID-19, freelancers who want to get a job on weekends or after work or who want to maintain a more accessible form of employment are receiving much attention. According to this trend, SLPs showed an increase in independent employment in addition to regular work, but in this study, 73.3% of them worked in one place and 26.8% had two or more jobs. Increasing the number of regular workers in private speech therapy rooms is desirable, so incorporating a major social insurance and severance pay is essential as it offers job security. On the other hand, the average monthly salary of regular SLP was 2 million won to less than 2.5 million won (27.8%), which was not higher than that of other occupations, even considering that the most significant number of respondents was in their 20s and 30s in private practice. In addition, the average monthly gross salary of SLPs, which shows the employment type of freelancers, tended to be somewhat higher than that of regular workers, with 3 million to less than 4 million won (23.5%), accounting for the most significant proportion of the total number of institutions when there were two or more working institutions. Most SLPs working in private clinics were found to work in only one SLP office, and there was no significant difference in salary level depending on the number of private clinics they currently work in. In terms of salary, there was no significant difference in salary between full-time workers and freelancers. This means that the SLPs' salary level does not change significantly even if they

work in multiple private clinics. This fact suggests that SLPs working in private practice need more stable employment in an SLP office.

Regarding the salary level according to the type of certificate, it was found that the salary level was not affected by the type of certificate. This fact suggests that a differentiated compensation system needs to be established in private practice concerning the type of certificate, and more specialized service areas need to be subdivided. Previous studies on job stress and the coping mechanisms of SLPs working in private practice were surveyed using the shortened Korean Job Stress Measurement Tool (KOSS-SF) with 150 SLPs working in SLP offices. As a result, although the job stress level of speech rehabilitation workers working in private speech therapy rooms was relatively low, "job demand" stress was the highest among the sub-areas, and "relationship conflict," "organizational system," and "inadequate compensation" were found to cause stress [14].

The unit price per session showed the highest frequency of 25,000 to less than 30,000 won for regular and freelancer workers. As a result of this survey, there was a significant difference in the unit price of speech therapy per session depending on the region ( $\chi^2(24) = 89.069, p < 0.001$ ), as shown in Figure 5. It appears that the cost of speech therapy per session in the Incheon-Gyeonggi area was higher than in other regions in Korea. The average number of years worked by SLPs working in a private clinic reached 76.5% for less than 5 years, indicating that most of them had a high turnover rate.

It is noted that the unit price of speech therapy at the current SLP office accounted for 39.2% of the cost of speech therapy, which was 40,000 to less than 50,000 won. In comparison, the average unit price of treatment excluding speech therapy was 36.9%, implying that other treatment costs are higher than those of speech therapy at private clinics. It is very interesting that the unit price of the national qualification speech therapy service is set lower than that of other treatment costs. On the other hand, in the language test, the average test cost per child varied from 20,000 to 70,000 won or even higher, of which 20,000 to 30,000 won was the highest at 23%, according to a recent qualitative study on speech pathologists' perception of the status of use of developmental rehabilitation services and the appropriateness of subsidies in speech therapy [15,16]. It was recognized that the unit price of speech therapy sessions was evaluated as lower than the qualifications for speech rehabilitation workers. In addition, the initial 10,000 won subsidy for developmental rehabilitation services remained at 220,000 won for the past 11 years. Since the amount of work required for the workforce in-

creases and the wage system determined by the demand and frequency of services does not guarantee stability, this problem has led to a decrease in the quality of treatment services of private speech therapists [17]. Therefore, improving the unit price of professional speech therapy is urgent, and a compensation system should be established accordingly.

As for the treatment area currently being conducted by the institution, speech therapy was most often performed at 100%, and most of the SLP offices where the respondents worked offered developmental rehabilitation services (74.2%), child and adolescent psychological support services, and education of office treatment support services (76.5%), in addition to speech therapy and developmental rehabilitation services, such as play therapy, art therapy, music therapy, cognitive therapy, sensory integration, exercise rehabilitation, physical therapy, sand play therapy, and sand psychology. SLPs in private practice had the most monthly sessions, with an average of 40 to less than 80 hours (32.3%) and 80 to less than 120 hours (29.5%). Additionally, the total number of working days during the week was at its highest at 5 days (53%), followed by 6 days (17.5%) and 4 days (13.8%). It was found that SLPs worked fewer days compared with other full-time jobs.

Currently, most of the clients in private treatment rooms are children, and among them, the preschool-age (under 3-7 years old) and school-age accounted for the highest percentage of speech disorders. In this regard, the most common types of communication issues were in the area of speech therapy services, which handles the most number of language development disorders, with articulation disorders accounting for the second highest percentage. In light of this fact, it can be seen that speech therapy centered on preschool-age and school-age children was mainly performed, and that on adolescents, adults, and the elderly were relatively limited.

Lee and Lee [6] investigated the working conditions of Korean SLPs, and they found that the types of workplaces for SLPs were in the order of private speech therapy centers (48.1%), social welfare facilities (15.8%), and hospital-affiliated development centers (10.8%). Thus, considering the future changes in the demographic structure, the structure of such a child-reliant private practice is expected to expand speech therapy services for a wider age group [6].

In recent years, the working conditions and environment of private speech therapy clinics in Korea have improved significantly in connection with the KSLPs' project to create a "good private speech center." However, the unit price has not yet escaped the low unit price of treatment due to the limitation of

voucher policies and the burden of treatment costs per session due to inflation. It is necessary to set or adjust the unit price in consideration of market prices, and it is imperative to give the provider autonomy to form realistic and appropriate service costs to meet the price of other developmental rehabilitation services, which can contribute to the improvement of job satisfaction and service quality of SLPs for private speech clinic centers. Therefore, to improve the working conditions and working environment of private speech therapy rooms, it is urgent to apply and support fees according to the qualifications or careers of therapists. Accordingly, service quality improvement and job satisfaction can be improved.

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