

Systematic review of international ethics knowledge in the speech-language pathology literature (1980–2022)

ALIDA NAUDÉ¹ , AMISHA KANJI² , BRENDA LOUW^{1,3}  & JUAN BORNMAN^{1,4} 

¹Centre for Augmentative and Alternative Communication, Faculty of Humanities, University of Pretoria, Pretoria, South Africa, ²Department of Speech Pathology and Audiology, School of Human and Community Development, University of the Witwatersrand, Johannesburg, South Africa, ³Department of Audiology and Speech-Language, Pathology College of Clinical and Rehabilitative Health Sciences East Tennessee State University, Johnson City, TN, USA, and ⁴Speech-Language and Hearing Therapy; Health and Rehabilitation Science, Stellenbosch University, Stellenbosch, South Africa

Abstract

Purpose: A systematic review was conducted to describe various viewpoints expressed in speech-language pathology literature over four decades concerning ethics knowledge in the profession.

Method: The Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines were employed. Our sample search encompassed peer-reviewed journal articles sourced from electronic databases including MEDLINE, CINAHL, ERIC, MasterFILE Premier, E-Journals, Africa-Wide Information, and Academic Search Premier, spanning the period from 1980 to 2022.

Result: The initial search of articles identified 139 papers. After applying rigorous inclusion and exclusion criteria, 60 full-text papers were deemed suitable for inclusion. We conducted a qualitative, deductive analysis of the relevant data and findings. Studies primarily concentrated on the speech-language pathologist's roles in rehabilitation/management and education, research, and administration. A predominant focus of these papers revolved around moral judgement, a fundamental component of moral behaviour.

Conclusion: Findings suggest an evolving landscape within the speech-language pathology discipline, with an increased focus on moral judgement, professional competency, and rehabilitation/management. The findings highlight a consistent need for further development and emphasis on ethics in education, research, administration, and advocacy/consultation roles. This underscores the necessity for ongoing ethical education and support to ensure practitioners are well-equipped to navigate the complex ethical landscape of their professional practice.

Keywords: *ethics; morality; professionalism; speech-language pathology; systematic review; clinical decision-making*


Introduction

Ethics serves as the foundational guide for speech-language pathologists (SLPs) when navigating the complexities of clinical decision-making, research methodologies, and patient/client care (Kenny et al., 2010). The significance of ethical considerations within healthcare professions cannot be overstated, as these guidelines ensure the provision of high-quality services that are consistent across different healthcare providers, while also safeguarding the well-being

of patients/clients, maintaining professional standards, and upholding the integrity of the discipline.

The discipline of speech-language pathology stands at the intersection of science and compassionate care, addressing a diverse array of communication and swallowing disorders, while striving to enhance the quality of life for individuals. A central principle in this discipline is a commitment to ethical considerations, guiding practitioners through the multifaceted landscape of clinical decision-making, research methodologies, and the broader ethical challenges

Correspondence: Alida Naudé, Centre for Augmentative and Alternative Communication, Faculty of Humanities, University of Pretoria, 719 Zimba Street, Garsfontein x10, Pretoria, South Africa. E-mail: alida@amtronix.co.za

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embedded within healthcare (Varkey, 2021). Hence, ethical principles firmly entrenched in the speech-language pathology profession, play an integral role in defining the boundaries, standards, and expectations governing practitioners (Jonsen et al., 2015).

While the terms *moral* and *ethical* are sometimes used interchangeably when attempting to explain the differences between right and wrong conduct, these terms are indeed different. Ethics (also known as moral philosophy) stems from the Greek word *ethos*, which refers to ‘custom or character’, while morality, stems from the Latin word *moris*, which refers to ‘conduct or ‘way of life (Williams, 2009). From this perspective, ethics highlight standards that should be considered among practitioners whose actions require acceptable forms of behaviour within their discipline, such as a code of ethics for SLPs. As such, ethics is concerned with rights, responsibilities, and external rules. It can be taught and can change because of becoming more knowledgeable on the subject. Morality on the other hand, describes the guiding principles and personal beliefs at an individual level, and stems from an internal set of values. While humans are born with an innate sense of morality, it is further shaped by religious beliefs, upbringing, culture, and personal experiences (Domie et al., 2023). However, unlike ethics, morals rarely change.

As both ethics and morality involve decisions about right and wrong conduct, with some overlap, it is unsurprising that scholars from different disciplines use the terms interchangeably (Naudé & Bornman, 2014). However, in this paper we highlight three common differences between these two constructs. The first difference is related to consistency (e.g. while ethical principles remain consistent across different practitioners and contexts in which services are delivered, morals are personal and vary from individual to individual). Secondly, the governing factors differ (e.g. the ethical rules are developed collectively by the custodians of the speech-language pathology discipline, such as the American Speech-Language-Hearing Association (ASHA), while moral codes result from a set of values internalised by a person to create their own concept of what is morally correct). The third difference is related to decision-making (e.g. although both moral values and ethical principles influence decision-making, moral decisions stem from personal values, while ethical decisions are governed by a code of conduct related to the discipline). In this paper, the focus is on *ethics* (i.e. the principles that can be taught and that underpin decision making in the speech-language pathology discipline), but the terms *moral* and *morality* were also considered in the search to prevent the omission of relevant texts.

The period from 1980 to 2022 witnessed an era of significant transformation and growth within the discipline of speech-language pathology. Over these four decades, the profession has experienced dynamic changes in technology, shifts in practice paradigms,

and an increasing emphasis on evidence-based approaches (Staley et al., 2021). The paradigm shift from traditional, experience-driven practices, to data-driven, evidence-based methodologies has been a hallmark of this transformative period; fundamentally altering the foundations of speech-language pathology. This timeline has also been witness to changing societal values, cultural dynamics, morals, and legislative modifications, that have collectively influenced ethical considerations in healthcare; thereby impacting the speech-language pathology discipline globally (Pillay et al., 2020).

Additionally, the period from 1980 onward has been marked by significant developments in disability legislation, which have had profound implications for ethics, person-centred care, and decision-making in speech-language pathology (McLeod, 2018). The establishment of discrimination and equality laws in many countries has shifted the focus towards human rights and inclusion, reinforcing the ethical commitment to treating all individuals with dignity and respect (McLeod et al., 2023). Key legislative changes, such as the Americans with Disabilities Act in the USA, the Equality Act in the UK, and similar laws worldwide, have promoted greater accessibility, non-discrimination, and equitable treatment of individuals with disabilities. These legislative advancements underscore the ethical principles of autonomy, justice, and beneficence; aligning with the evolving societal values towards inclusivity and equal opportunities for all individuals, including those with communication and swallowing disorders (Bornman, 2023; Doell & Clendon, 2018).

To address ethical considerations in speech-language pathology, this review adopted both philosophical and social scientific lenses. Philosophical approaches provide a normative framework, delineating what ought to be done in ethical dilemmas; while social scientific approaches offer an empirical perspective, examining how ethical decisions are made in practice and how ethical behaviour manifests in various contexts. This dual approach not only enriches our understanding of ethical complexities, but also aligns our research questions, analyses, and results with a robust theoretical framing. By integrating these perspectives, we aimed to unravel ethical dilemmas, principles, and the evolving landscape of ethics within speech-language pathology, providing a clear, early foundation for the subsequent sections of this manuscript (Naudé & Bornman, 2014).

A key bioethical framework underpinning this study is the principles-based approach, grounded in Beauchamp and Childress’ four principles of biomedical ethics: Autonomy, beneficence, non-maleficence, and justice (Beauchamp, 2013). These principles provide a structured methodology for analysing ethical issues and making ethical decisions within the healthcare context. In addition to these four core principles, our review also considers other relevant

ethical dimensions such as consent, professional integrity, and cultural competence, which are integral to the ethical practice of speech-language pathology. This comprehensive approach ensures that our review captures the multifaceted nature of ethical reasoning and the diverse considerations that influence ethical decision-making in the field.

Within the dynamic evolution of the discipline of speech-language pathology, ethical considerations continue to evolve in tandem. Technological advancements have redefined therapeutic modalities and the ways in which SLPs interact with their patients/clients. For example, the use of telepractice, innovative software, and assistive technologies have presented both opportunities and challenges, requiring a re-valuation and adaptation of existing ethical guidelines (Wangmo et al., 2019). The proliferation of research studies, varying in methodologies and ethical considerations, further emphasises the need for a comprehensive, systematic review that assesses how these ethical principles have been applied and how they evolved from review of the literature, particularly within the context of the discipline of speech-language pathology.

Speech-language pathology practice encompasses a wide range of activities, including but not limited to collaboration; prevention and wellness; screening; assessment; treatment; modalities, technology and instrumentation; and population and systems. Professional practice domains include advocacy and outreach; supervision; education; administration/leadership; and research (ASHA, 2016; Horner & Minifie, 2011b). Ethical dilemmas often arise in these areas due to the complex nature of clinical decision-making and the diverse contexts in which SLPs operate. For example, dilemmas may involve issues of informed consent, confidentiality, cultural competence, and the balancing of risks and benefits in patient care.

SLPs are tasked with navigating these complexities while adhering to ethical standards and guidelines, such as those set forth by professional organisations like ASHA (ASHA, n.d.; Dantuma, 2021). However, it is essential to recognise that ethical practice in speech-language pathology is not limited to the ASHA Code of Ethics. Internationally, SLPs must consider varying cultural, legal, and professional standards that influence ethical decision-making. Guidelines from organisations such as the International Association of Logopaedics and Phoniatics (IALP), the Royal College of Speech and Language Therapists (RCSLT) in the UK, and Speech Pathology Australia (SPA) provide additional frameworks for ethical practices. These guidelines emphasise the importance of cultural competence, equitable service delivery, and patient-centred care. This requires a nuanced understanding of the global landscape of speech-language pathology and an ability to adapt ethical principles to diverse contexts.

The importance of conducting a systematic review from 1980 to 2022 is underscored by the need to critically evaluate the ethics knowledge within speech-language pathology and to consolidate and synthesise this knowledge within this profession from 1980 to 2022; thereby providing insight into the ongoing discourse on ethical practice, decision-making, and professional conduct within speech-language pathology. Ethics is an area that impacts all practicing SLPs and thus the landscape of the literature should be considered. There is a need to integrate ethics education into the training of SLPs at universities. Teaching to future practitioners is crucial in preparing them to navigate the complex ethical landscape they will encounter in their professional careers. A strong foundation in ethics education helps ensure that SLPs uphold the highest standards of professional conduct and are well-equipped to make informed, ethical decisions in their practice. We also need to contemplate what we are addressing and researching and where there are important gaps that need to be discussed and assessed.

By analysing four decades of literature, the main objectives of this review were to: a) Explore and examine the body of work on ethics in speech-language pathology spanning from 1980 to 2022, and b) describe the progression of ethics within the field of speech-language pathology using an analytic framework (Figure 1).

Method

This systematic review adhered to the updated Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines as outlined by Page et al. (2021). However, it is important to note that the review protocol was not publicly disclosed and was not registered on a systematic review registry, such as the Prospective Register of Systematic Reviews.

Search strategy and selection criteria

In June 2023, we conducted a comprehensive systematic literature search to identify peer-reviewed publications addressing ethics within the speech-language pathology discipline for the period spanning 1980 to 2022. The decision to commence the search from 1980 was driven by the transition to electronic record-keeping in library databases. Before 1980, articles were exclusively available in hard copy. Our search focused on the electronic database era to ensure a thorough and efficient retrieval of relevant literature. We performed searches across seven electronic databases relevant to speech-language pathology. These databases comprised MEDLINE, CINAHL, ERIC, MasterFILE Premier, E-Journals, Africa-Wide Information, and Academic Search Premier.

Our search strategy incorporated various terms related to speech-language pathology OR speech-language therapy AND ethics, utilising truncation (*) to

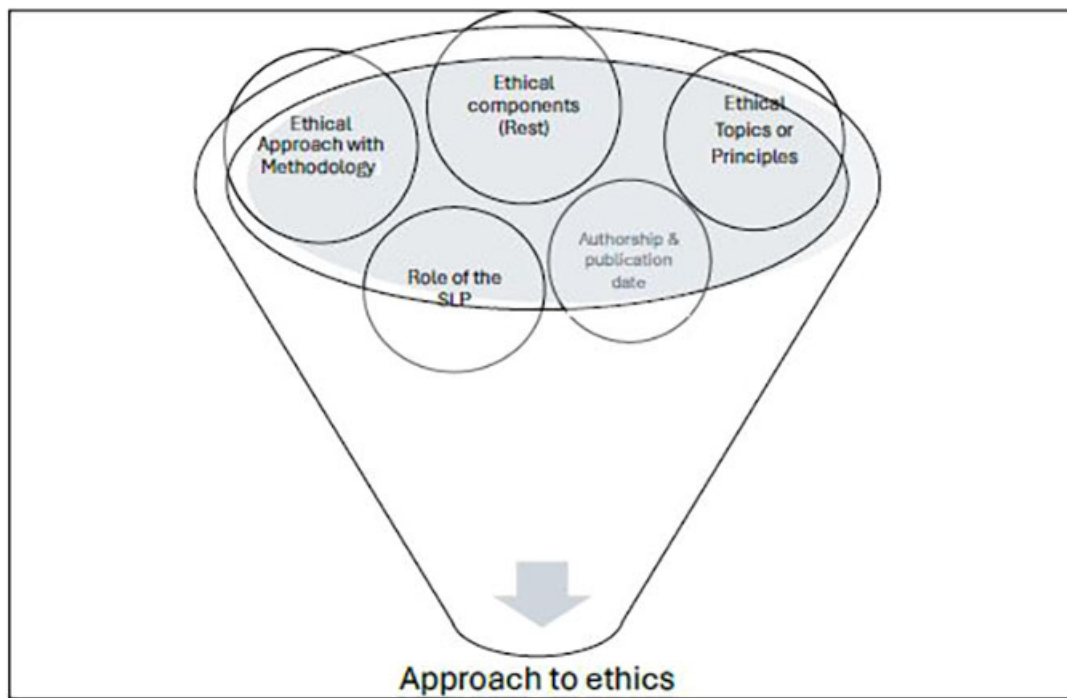


Figure 1. Framework for analysis.

Table 1. Inclusion and exclusion criteria.

Inclusion criteria	Exclusion criteria
a) Publication between 1980 and 2022.	a) Published outside of these dates: After December 2022, or before January 1980.
b) Published in English.	b) Full-text not published in English despite abstract being available in English.
c) Ethics as an explicit major subject, topic, or keyword specifically related to speech-language pathology/therapy.	c) Major topic not related to SLP ethics, e.g. in other health-care disciplines such as audiology, nursing, occupational therapy.
d) Primary target audience: SLPs.	d) Non-SLP target audience, e.g. linguists.
e) Peer-reviewed scientific papers containing original research.	e) Grey literature (e.g. letters to editors, editorials; professional codes of ethics, standards, position statements), unpublished theses and dissertations, websites.

encompass a broad range of relevant terms such as ethic*, moral*, autonom*, confidentiality, informed consent, moral reason*, moral judgement, justice, paternalism, care, duty, responsibility, discrimination, attitud*, value*, best practice, problem solving, and decision making. The use of multiple search terms was necessitated by the absence of consensus on terminology for ‘ethics’ and ‘morality’ and the interchangeable use of these two terms, and the limited use of the keyword ethics’ in the literature (Supplementary Appendix A). Our aim was to encompass pertinent publications reflecting a diversity of ethical approaches.

The search yielded a total of 139 papers. Upon further scrutiny, we identified 26 papers as duplicate entries. Four papers were only accessible in hard copy rather than online, bringing the total to 109 papers screened at the title level, of which 17 were excluded as they were book reviews, letters to editors or position papers, and therefore did not meet the requirement of being empirical research papers. Following the screening of the abstract of the remaining 92

papers, a further 31 papers were excluded because these did not primarily focus on ethical considerations related to speech-language pathology or because these papers focussed more generally on bioethics.

The specific inclusion and exclusion criteria are detailed in Table 1.

Firstly, papers that did not meet the inclusion criteria were eliminated at title and abstract level. The first two authors independently screened all the papers, and the third and fourth authors were available to resolve the conflict in ratings. The inter-rater agreement at title, abstract and full-text levels were all 100%, thus showing that none of the papers were in conflict. Thereafter, data extraction commenced using a custom-developed data extraction tool.

Data extraction and analysis

We employed a two-phase research methodology that combined quantitative and qualitative techniques to analyse the remaining 60 papers. Consistency and reliability were maintained throughout the process by

using the same reviewers for both phases, who are the first and second authors of this paper. Both reviewers share a professional background in audiology and are registered with the Health Professions Council of South Africa as both Audiologists and SLPs. The first reviewer possesses 23 years of clinical experience in speech-language pathology and audiology, often conducting seminars and workshops on ethics within the discipline. The second reviewer has 14 years of experience, initially in clinical practice and currently in academia.

In the quantitative phase, descriptive methods were employed to analyse the publications by author, country of publication, and journal. The publications were categorised by decade (1980s, 1990s, 2000s, 2010s, and 2020s), ethical approach (primarily philosophical, i.e. principle approach, or social, i.e. case study approach), ethical component, ethical principle or topic according to Berkovic (2023) and Beauchamp (2013) (e.g. autonomy, beneficence, confidentiality, conflict of interest, informed consent, justice, nonmaleficence, research integrity, record keeping, risk management, and veracity), and the primary role of SLPs as outlined by Stach (2010) (e.g. prevention, identification, assessment, diagnosis, rehabilitation, counselling, advocacy or consultation, and education, research, and administration).

Furthermore, each paper was categorised according to the primary component of ethical decision-making, addressed by following Rest's (1994) four-component framework of ethical behaviour. Rest, a cognitive developmental psychologist, proposed that ethical action result from four psychological processes: *Moral sensitivity* (recognising and interpreting a situation), *moral judgement* (deciding about right or wrong and determining a course of action), *moral motivation* (putting ethical values before other values), and *moral courage* (persevering against adversity). In the literature, 'moral' is often referred to as 'ethical' (Clarkeburn, 2002), which is the term used in this study focusing on professional conduct.

The term 'ethical component in our analysis refers to the specific elements of Rest's model that each paper addressed. This categorisation falls within the framework of Rest's four-component model and did not constitute an additional analysis. The categorisation of ethical principles or topics (e.g. autonomy and beneficence) follows the classification by Berkovic (2023) and Beauchamp (2013) and is distinct from the categorisation of ethical components, which pertains specifically to Rest's model. Thus, our analysis involved categorising papers according to both their focus and specific ethical principles or topics and the primary ethical components they addressed within the context of Rest's framework.

This framework was used to capture the complexity of ethical decision-making, considering that all four processes must be successfully completed for ethical behaviour to occur. Breaking down ethical

decision-making into distinct components, facilitates a deeper understanding of ethical decision-making and behaviour (Clarkeburn, 2002). We acknowledge that Rest proposed four integrated processes, and that overlap between these processes was present in our data. To address this, each paper was categorised based on the predominant ethical component it focused on, determined by the primary purpose of the paper. When overlap existed, the categorisation was determined by the primary focus of the discussion or findings of the paper.

To ensure the rigour of our categorisation system during the qualitative phase, a systematic approach was employed to assess the purpose of each paper. The two reviewers with expertise in speech-language pathology and ethics, independently evaluated each paper to determine the primary ethical component addressed, considering factors such as the stated objectives, main arguments, and key findings of each paper. Discrepancies were resolved through discussion and a third reviewer was consulted when necessary. Inter-rater agreement was calculated at 90% with any disagreements resolved through consensus discussions, ensuring a robust and reliable categorisation process.

Qualitative analysis followed the format advocated by Miles and Huberman (1994), involving the four steps of assigning of codes, note-taking, sorting, and sifting to identify themes. During this phase, we clarified descriptive findings, identified recurring themes, patterns, and similarities among publications. The analytical framework employed a deductive approach using various a priori categories to sort papers by issue or topic. These categories included philosophical principles such as autonomy, justice, beneficence, veracity, confidentiality, and informed consent. We also considered contextual factors such as the setting and focus of relationships.

The coding process comprised four steps, starting with the assigning of codes. Both reviewers independently assigned initial codes to the data, derived from the pre-defined categories and were applied to segments of text that reflected specific ethical principles or issues. Detailed notes were taken to document thoughts, insights, and the rationale behind code assignments, maintaining a transparent and systematic approach to data analysis. The codes were then sorted into broader categories to identify patterns and relationships within the data, grouping similar codes together and examining how they related to the a priori categories. The final step involved sifting through the sorted codes to refine and clarify themes, re-evaluating initial codes and categories, to ensure they accurately captured the essence of the data.

Themes were identified by examining the frequency and co-occurrence of codes, as well as the depth and richness of the coded data. Recurring patterns and key insights across multiple studies were sought. Thematic analysis focused on understanding

how ethical principles were discussed and applied in different contexts within the speech-language pathology literature.

Following the initial analysis, a second reviewer independently analysed the articles to ensure the reliability of the findings. Inter-rater agreement was calculated as the percentage of observations where both assessors concurred, initially reaching an agreement of 93%. The two reviewers then deliberated until a 100% consensus agreement was reached. This iterative process ensured the validity and reliability of the qualitative analysis.

Trustworthiness

To enhance the trustworthiness and credibility of our findings, we incorporated qualitative trustworthiness indicators as outlined by Brantlinger et al. (2005) and further explicated the thematic analysis process in line with guidelines by Braun and Clarke (2022). This involved a transparent exposition of our analytical process, from the initial coding to the final theme development, ensuring the replicability and reliability of our analysis. Credibility was achieved through frequent, reflective discussions during the data analysis phase. Confirmability was achieved through checking and refining the themes. An audit trail of the decision-making between authors was also ensured. Dependability was ensured by keeping researcher notes and process logs of the research and analysis process.

Result

Findings from the systematic review included the study characteristics, the approach and methodology used within studies to address ethical aspects, ethical topics and principles, components of morality, and the role of the SLP in which the ethical aspects were related.

Study selection

The initial search of databases identified 139 papers, with 109 remaining after removing duplicate papers not available online. After screening at title and abstracts level, 61 papers remained. After reading the full texts to determine eligibility for data extraction, one paper was excluded as it did not meet the inclusion criteria. This resulted in a systematic review that synthesised and analysed the data from 60 remaining papers that addressed ethical aspects in the speech-language pathology discipline. The PRISMA flowchart summarises the search results and criteria for exclusion (see Figure 2).

Study characteristics

The included studies, published between 1990 and 2022 encompassed four continents: North America, Australia, Asia, and Europe. Originating from diverse

locations, the studies emanated from Australia, Canada, Greece, Ireland, Kuwait, UK, and USA. The publications from the 1980s were excluded as they comprised standard code of ethics documents.

For the decade spanning 1990–1999, 7/60 papers were recorded (reflecting 12% of the data), between 2000 and 2009, 13/60 papers (i.e. 22%), between 2010 and 2019, 28/60 (i.e. 47%). Hence, this distribution pattern confirms a consistent and notable increase in the volume of papers per decade, reflecting the growing scholarly attention and research output dedicated to the topic of ethical considerations within speech-language pathology as a discipline in this time period. However, between 2020 and 2022, a total of 12/60 papers (i.e. 20%) were recorded, which is not comparable to other time periods as it only encompassed three years of data. Table 2 presents a summary of the papers included. In total, there were 60 papers written by 104 authors. Papers are presented chronologically, from oldest to most recent, and include the ethical approach followed, the topics and principles addressed, the specific components of morality according to Rest's (1994) four-component framework of ethical action involved in ethical decision-making, and the primary role of the SLP.

Papers were published in seventeen different peer-reviewed journals from the countries mentioned earlier. Table 3 presents a summary of the number of papers in each of the peer-reviewed journals.

Ethical approach with methodology

The papers were categorised based on two pre-determined main scientific approaches namely: *Philosophical approach* that emphasises normative principles and rational foundations for ethical decisions and *social approach* utilising empirical tools to study actual moral behaviour and beliefs.

A balanced distribution of these two approaches was observed. The first approach, as described by Beauchamp and Childress (1994), centres on what individuals ethically ought to do and the rationale guiding such conduct. The second approach, in accordance with Thiroux (1995), focuses on studying current conduct or beliefs within the profession, then providing factual descriptions of ethical behaviour. The observed distribution of papers between the 'philosophical approach and the social scientific approach provides valuable insights into the methodological landscape of ethical inquiry within the speech-language pathology discipline.

Of the total papers analysed, 47% ($n=28$) were aligned with a philosophical approach, underscoring the professions' engagement with normative principles and rational foundations for ethical decision-making. Within this philosophical realm, the authors employed a diverse array of methodological paradigms to advance their research objectives. More than half of the papers (16/28) comprised investigation through the lens of a principle-based method, as

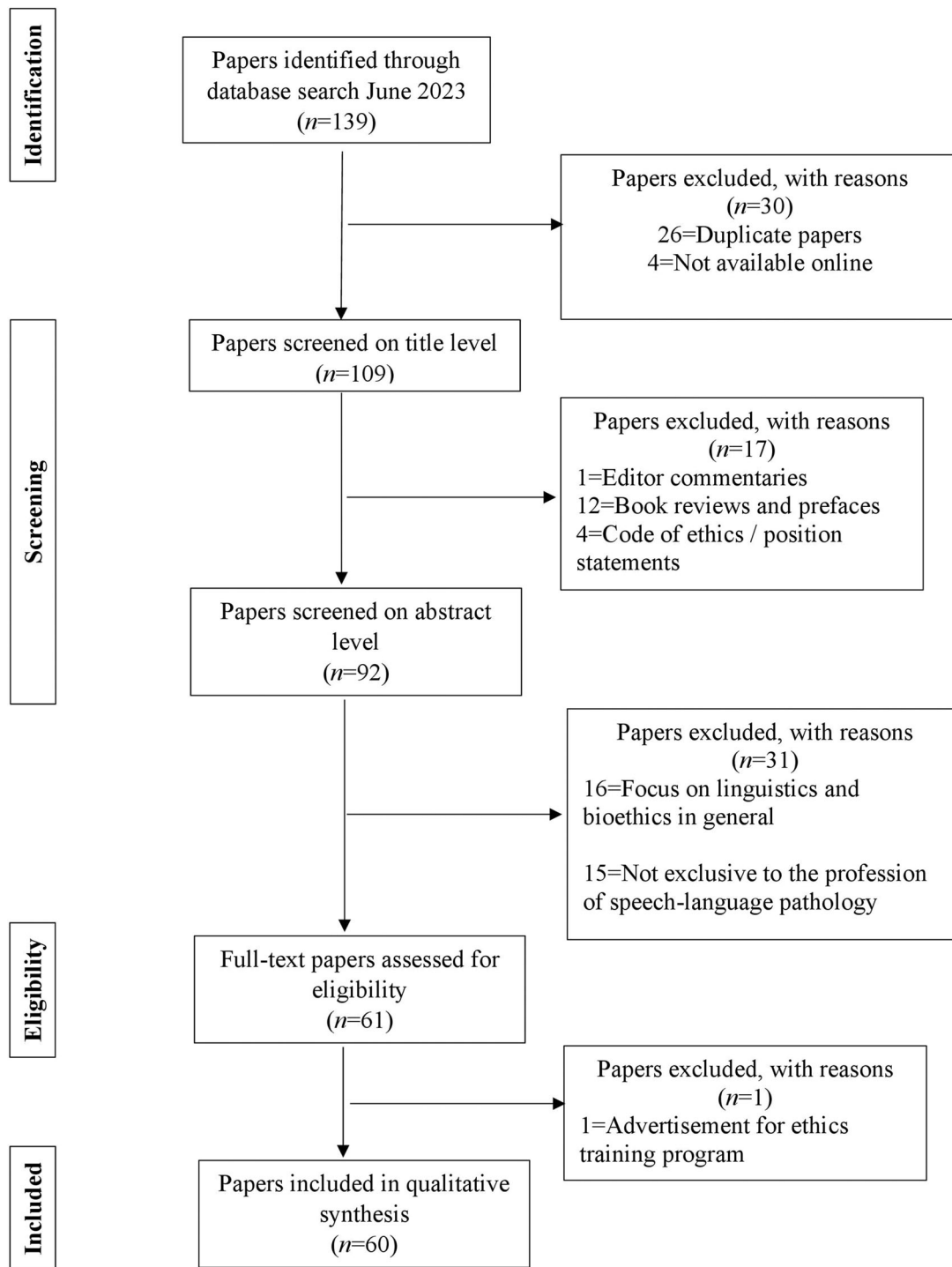


Figure 2. The PRISMA and meta-analyses flowchart with search results and reasons for exclusion.

seen in topics such as promoting ethical research practices and ethics in education, where principle-based approaches and document reviews were predominantly used. Six papers adopted hypothetical cases, evident in discussions on patient-centred dysphagia care and ethical issues in practice management, while four papers engaged in document reviews, including analyses on comparing various codes of ethics. Additionally, one paper utilised a discourse analysis approach in exploring cultural responsiveness, and another employed a self-report method within ethical dilemmas and decision making in

practice. This inclination towards a principle-based approach suggests a commitment to exploring ethical considerations through the lens of established ethical principles, as demonstrated by the varied topics and methodologies listed in Table 4.

The remaining 53% of the publications ($n = 32$) were aligned with a social scientific approach, highlighting the professions' engagement with empirical tools to study actual ethical behaviour and beliefs within the field. These methodologies included the utilisation of case studies ($n = 12$), as observed in patient-centred dysphagia care and ethical

Table 2. Description of the approach followed, principles addressed, ethical component highlighted, and the role of the SLP addressed.

Author(s)	Year	Journal	Country/region	Approach/methodology	Topic/principles	Ethical component	Role of SLP
1990-1999							
Watterson, McFarlane, & Brophy	1990	Seminars in Speech and Language	USA	Social ethical implications of social phenomena (self-report)	<ul style="list-style-type: none"> • Non-maleficence • Risk management 	Ethical sensitivity	<ul style="list-style-type: none"> • Assessment • Education, research & administration • Identification • Rehabilitation & management • Education, research & administration
Pannbacker, Lass, & Middleton	1993	AJSLP	USA	Social empirical research (survey)	<ul style="list-style-type: none"> • Confidentiality • Professional competency (clinical practice) 	Ethical judgement	<ul style="list-style-type: none"> • Education, research & administration
Pannbacker, Middleton, & Lass	1994	AJSLP	USA	Philosophical normative analysis (principle-based)	<ul style="list-style-type: none"> • Professional competency (ethical decision making) 	Ethical judgement	<ul style="list-style-type: none"> • Education, research & administration
Sharp & Genesen	1996	AJSLP	USA	Social ethical theory/framework (case study)	<ul style="list-style-type: none"> • Beneficence • Non-maleficence 	Ethical judgement	<ul style="list-style-type: none"> • Rehabilitation & management
Lefton-Greif & Arvedson	1997	Seminars in Speech and Language	USA	Social ethical theory/framework (case study)	<ul style="list-style-type: none"> • Autonomy • Beneficence • Justice 	Ethical judgement	<ul style="list-style-type: none"> • Assessment • Rehabilitation & management
Goldsmith	1999	Perspectives on Neuro-physiology & Neurogenic Speech and Language Disorders	USA	Social ethical theory/framework (case study)	<ul style="list-style-type: none"> • Non-maleficence • Autonomy • Non-maleficence • Beneficence 	Ethical judgement	<ul style="list-style-type: none"> • Advocacy & consultation • Assessment • Rehabilitation & management
Landes	1999	AJSLP	USA	Social ethical theory/framework (case study)	<ul style="list-style-type: none"> • Autonomy • Beneficence • Justice • Non-maleficence 	Ethical judgement	<ul style="list-style-type: none"> • Rehabilitation & management
2000-2009							
O'Toole	2000	LSHSS	USA	Philosophical conceptual clarity (hypothetical scenario)	<ul style="list-style-type: none"> • Confidentiality • Justice • Risk management • Professional competency 	Ethical sensitivity	<ul style="list-style-type: none"> • Rehabilitation & management
Ambrose & Yairi	2002	AJSLP	USA	Social critical analysis (review of published data)	<ul style="list-style-type: none"> • Record keeping • Confidentiality • Non-maleficence • Research integrity • Veracity 	Ethical judgement	<ul style="list-style-type: none"> • Education, research & administration
Strand	2003	Seminars in Speech and Language	USA	Social ethical theory/framework (case study)	<ul style="list-style-type: none"> • Autonomy • Beneficence • Non-maleficence • Justice • Confidentiality 	Ethical judgement	<ul style="list-style-type: none"> • Diagnosis • Rehabilitation & management
Wagner	2003	Seminars in Speech and Language	USA	Social ethical implications of social phenomena (case study)	<ul style="list-style-type: none"> • Autonomy • Informed consent 	Ethical judgement	<ul style="list-style-type: none"> • Advocacy & consultation • Education, research & administration
Davis & Ross	2003	The Journal of Clinical Ethics	USA	Philosophical ethical theory (hypothetical scenario)	<ul style="list-style-type: none"> • Autonomy • Informed consent 	Ethical judgement	<ul style="list-style-type: none"> • Assessment • Identification
Horner	2003	Seminars in Speech and Language	USA	Philosophical conceptual clarity (principle-based)	<ul style="list-style-type: none"> • Autonomy • Beneficence • Justice • Non-maleficence 	Ethical judgement	<ul style="list-style-type: none"> • Assessment • Rehabilitation & management

(Continued)

Table 2. (Continued).

Author(s)	Year	Journal	Country/region	Approach/methodology	Topic/principles	Ethical component	Role of SLP
Hemsley & Balandin	2003	Advances in Speech and Language Pathology	Australia	Philosophical ethical theory (principle-based)	<ul style="list-style-type: none"> Autonomy Informed consent 	Ethical judgement	<ul style="list-style-type: none"> Rehabilitation & management
Sharp & Bryant	2003	Seminars in Speech and Language	USA	Philosophical ethical reasoning (principle-based)	<ul style="list-style-type: none"> Autonomy Informed consent 	Ethical judgement	<ul style="list-style-type: none"> Rehabilitation & management
Ingham	2003	Seminars in Speech and Language	USA	Philosophical ethical reasoning (principle-based)	<ul style="list-style-type: none"> Research integrity 	Ethical judgement	<ul style="list-style-type: none"> Education, research & administration
Denton & Gladstone	2005	Seminars in Speech and Language	USA	Philosophical ethical theory (principle-based)	<ul style="list-style-type: none"> Confidentiality Informed consent Professional competency (clinical practice) 	Ethical judgement	<ul style="list-style-type: none"> Assessment Rehabilitation & management
Arvedson & Lefton-Greif	2007	Seminars in Speech and Language	USA	Social ethical theory/framework (review of published data)	<ul style="list-style-type: none"> Risk management Autonomy Beneficence Confidentiality Justice Non-maleficence Professional competency (clinical practice) 	Ethical judgement	<ul style="list-style-type: none"> Assessment Rehabilitation & management
Huffman & Owre	2008	LSHSS	USA	Social critical analysis (review of published data)	<ul style="list-style-type: none"> Veracity Autonomy Informed consent Professional competency (ethical decision making) 	Ethical judgement	<ul style="list-style-type: none"> Assessment Rehabilitation & management
Kenny, Lincoln, Blyth, & Balandin	International journal of language and	communication disorders	Australia	Social empirical research (interviews)	<ul style="list-style-type: none"> Justice Non-maleficence Professional competency (clinical practice) 	<ul style="list-style-type: none"> Ethical sensitivity 	<ul style="list-style-type: none"> Education, research & administration Rehabilitation & management
2010–2019							
McCarthy, Poole, & Solomon	2010	AJSLP	USA	Philosophical applied ethics (principle-based)	<ul style="list-style-type: none"> Professional competency (developing application to practice) 	Ethical judgement	<ul style="list-style-type: none"> Education, research & administration
Kenny, Lincoln, & Balandin	2010	Seminars in Speech and Language	Australia	Social empirical research (interview)	<ul style="list-style-type: none"> Beneficence Justice Non-maleficence Professional competency (ethical reasoning) 	Ethical judgement	<ul style="list-style-type: none"> Assessment Rehabilitation & management
O'Halloran, Hersh, Laplante-Levesque, & Worrall	2010	IJSLP	Australia	Social critical analysis (story telling)	<ul style="list-style-type: none"> Beneficence Professional competency (clinical practice) Risk management 	Ethical sensitivity	<ul style="list-style-type: none"> Assessment Rehabilitation & management
Threats	2011	Perspectives on Gerontology	USA	Philosophical ethical theory (principle-based)	<ul style="list-style-type: none"> Autonomy Confidentiality Justice 	Ethical sensitivity	<ul style="list-style-type: none"> Advocacy & consultation Education, research & administration
Tonkovich	2011	Seminars in Speech and Language	USA	Social societal context (self-report)	<ul style="list-style-type: none"> Beneficence Professional competence (clinical practice) Trust 	Ethical judgement	<ul style="list-style-type: none"> Rehabilitation & management
	2011		USA		<ul style="list-style-type: none"> Autonomy 	Ethical judgement	<ul style="list-style-type: none"> Assessment

(Continued)

Table 2. (Continued).

Author(s)	Year	Journal	Country/region	Approach/methodology	Topic/principles	Ethical component	Role of SLP
Chabon, Morris, & Lemoncello		Seminars in Speech and Language		Philosophical critical analysis (principle-based)	<ul style="list-style-type: none"> • Beneficence • Informed consent • Justice • Non-maleficence • Professional competence (clinical practice) 		<ul style="list-style-type: none"> • Rehabilitation & management
Jakubowitz	2011	Seminars in Speech and Language	USA	Philosophical normative analysis (hypothetical case)	<ul style="list-style-type: none"> • Beneficence • Confidentiality • Risk management • Trust • Veracity • Autonomy • Beneficence • Risk management • Veracity 	Ethical judgement	<ul style="list-style-type: none"> • Assessment • Rehabilitation & management
Watson, Byrd, & Moore	2011	Seminars in Speech and Language	USA	Philosophical ethical dilemma (principle-based)	<ul style="list-style-type: none"> • Autonomy • Beneficence • Risk management • Veracity 	Ethical sensitivity	<ul style="list-style-type: none"> • Rehabilitation & management
Kummer & Turner	2011	Seminars in Speech and Language	USA	Philosophical conceptual clarity (principle-based)	<ul style="list-style-type: none"> • Autonomy • Beneficence • Justice • Non-maleficence • Veracity 	Ethical judgement;	<ul style="list-style-type: none"> • Rehabilitation & management
Payne	2011	Perspectives on Administration and Supervision	USA	Philosophical ethical reasoning (principle-based)	<ul style="list-style-type: none"> • Autonomy • Informed consent • Justice • Professional competence (ethical decision making) 	Ethical judgement	<ul style="list-style-type: none"> • Advocacy & consultation
McCarthy	2011	Seminars in Speech and Language	USA	Philosophical normative analysis (principle-based)	<ul style="list-style-type: none"> • Non-maleficence • Professional competence (clinical practice) 	Ethical sensitivity	<ul style="list-style-type: none"> • Education, research & administration • Identification • Assessment • Rehabilitation & management
Denton	2011	Contemporary Issues in Communication Science and Disorders	USA	Philosophical ethical dilemma (hypothetical case)	<ul style="list-style-type: none"> • Justice • Non-maleficence • Professional competence (clinical practice, ethical decision making) 	Ethical judgement	<ul style="list-style-type: none"> • Rehabilitation & management
Alshatti, Abdalla, & Dikrallah	2011	Seminars in Speech and Language	Kuwait	Social empirical research (survey)	<ul style="list-style-type: none"> • Veracity • Beneficence • Professional competence (clinical practice) 	Ethical judgement	<ul style="list-style-type: none"> • Advocacy & consultation • Education, research & administration
Moss	2011	JSLHR	USA	Philosophical ethical theory (principle-based)	<ul style="list-style-type: none"> • Beneficence • Justice • Research integrity 	Ethical judgement	<ul style="list-style-type: none"> • Education, research & administration
Horner & Minife	2011a	JSLHR	USA	Social critical analysis (review of published data)	<ul style="list-style-type: none"> • Research integrity 	Ethical judgement	<ul style="list-style-type: none"> • Education, research & administration
Horner & Minife	2011b	JSLHR	USA	Social critical analysis (review of published data)	<ul style="list-style-type: none"> • Research integrity 	Ethical judgement	<ul style="list-style-type: none"> • Education, research & administration
Horner & Minife	2011c	JSLHR	USA	Social critical analysis (review of published data)	<ul style="list-style-type: none"> • Conflict of Interest • Research integrity • Veracity 	Ethical judgement	<ul style="list-style-type: none"> • Education, research & administration
Ingham, Minife, Horner, Robey, Lansing, McCartney, Slater, & Moss	2011	JSLHR	USA	Social empirical research (survey)	<ul style="list-style-type: none"> • Research integrity 	Ethical judgement	<ul style="list-style-type: none"> • Education, research & administration

(Continued)

Table 2. (Continued).

Author(s)	Year	Journal	Country/region	Approach/methodology	Topic/principles	Ethical component	Role of SLP
Hickey, McKenna, Woods, & Archibald	2012	Perspectives on Global Issues in Communication Sciences and Related Disorders	Canada	Philosophical normative analysis (self-report)	<ul style="list-style-type: none"> • Beneficence • Professional competence (clinical practice) • Risk management 	Ethical sensitivity	<ul style="list-style-type: none"> • Advocacy & consultation • Education, research & administration
Flatley, Kenny, & Lincoln	2014	IJSLP	Australia	Social empirical research (interviews)	<ul style="list-style-type: none"> • Beneficence • Non-maleficence • Professional competence (clinical practice, ethical decision making) • Veracity • Professional competence (clinical practice) 	Ethical judgement	<ul style="list-style-type: none"> • Education, research & administration • Rehabilitation & management
Stacey-Knight & Mayo	2015	IJSLP	USA	Philosophical conceptual clarity (document review)	<ul style="list-style-type: none"> • Autonomy • Informed consent • Non-maleficence • Professional competence (clinical practice) • Autonomy • Beneficence • Justice • Non-maleficence • Professional competence (clinical practice) 	Ethical judgement	<ul style="list-style-type: none"> • Education, research & administration • Rehabilitation & management • Rehabilitation & management
Horner, Modayil, Chapman, & Dinh	2016	AJSLP	Greece	Philosophical conceptual clarity (hypothetical case)	<ul style="list-style-type: none"> • Autonomy • Informed consent • Non-maleficence • Professional competence (clinical practice) 	Ethical judgement	<ul style="list-style-type: none"> • Education, research & administration
Kellaghan	2016	Journal of Interactional Research in Communication Disorders	Ireland	Social empirical research (focus groups)	<ul style="list-style-type: none"> • Autonomy • Beneficence • Justice • Non-maleficence • Professional competence (clinical practice) • Professional competence (ethical decision making, developing application to practice) 	Ethical judgement	<ul style="list-style-type: none"> • Education, research & administration
Power & Leonard	2017	Journal of Clinical Speech and Language Studies	Ireland	Social empirical research (survey)	<ul style="list-style-type: none"> • Professional competence (ethics education) 	Ethical judgement	<ul style="list-style-type: none"> • Education, research & administration
Sirmon-Taylor & Edge	2017	Journal of Continuing Education and Professional Development	Greece	Social critical analysis (review of published data)	<ul style="list-style-type: none"> • Professional competence (ethics education) 	Ethical judgement	<ul style="list-style-type: none"> • Education, research & administration
Kelly, Cumming, Kenny, Smith-Merry, & Bogaardt	2018	IJSLP	Australia	Philosophical normative analysis (document review)	<ul style="list-style-type: none"> • Professional competence (clinical practice, ethical decision making) 	Ethical sensitivity	<ul style="list-style-type: none"> • Rehabilitation & management
Askren & Leslie	2019	Seminars in Speech and Language	UK	Social critical analysis (case review)	<ul style="list-style-type: none"> • Autonomy • Informed consent 	Ethical judgement	<ul style="list-style-type: none"> • Rehabilitation & management
Nikjeh	2019	Perspectives of the ASHA Special Interest Groups	USA	Philosophical ethical reasoning (document review)	<ul style="list-style-type: none"> • Professional competence (clinical practice, ethical decision making) • Veracity 	Ethical judgement	<ul style="list-style-type: none"> • Education, research & administration
2020-2022							
Rao	2020	Seminars in Speech and Language	USA	Philosophical ethical reasoning (hypothetical case)	<ul style="list-style-type: none"> • Conflict of interest • Professional competence (clinical practice) 	Ethical judgement	<ul style="list-style-type: none"> • Assessment • Rehabilitation & management
Cherney, Kinsey, & Conlon	2020	Seminars in Speech and Language	USA	Social ethical theory/framework (case study)	<ul style="list-style-type: none"> • Autonomy • Informed consent 	Ethical judgement	<ul style="list-style-type: none"> • Rehabilitation & management
Tippett & Hillis	2020	Seminars in Speech and Language	USA	Social ethical theory/framework (case study)	<ul style="list-style-type: none"> • Autonomy 	Ethical judgement	<ul style="list-style-type: none"> • Rehabilitation & management

(Continued)

Table 2. (Continued).

Author(s)	Year	Journal	Country/region	Approach/methodology	Topic/principles	Ethical component	Role of SLP
Leslie & Lisiecka	2020	Seminars in Speech and Language	USA	Social ethical theory/framework (case study)	<ul style="list-style-type: none"> Autonomy Informed consent 	Ethical judgement	<ul style="list-style-type: none"> Rehabilitation & management
McConville	2020	Perspectives of the ASHA Special Interest Groups	USA	Philosophical conceptual clarity (document review)	<ul style="list-style-type: none"> Beneficence Trust Professional competence (ethical decision making) 	Ethical judgement	<ul style="list-style-type: none"> Rehabilitation & management
Elman	2020	Seminars in Speech and Language	USA	Social ethical theory/framework (case study)	<ul style="list-style-type: none"> Confidentiality Professional competence (clinical practice) Trust 	Ethical judgement	<ul style="list-style-type: none"> Rehabilitation & management
Kagan, Shumway, & MacDonald	2020	Seminars in Speech and Language	Canada	Social ethical implications of social phenomena (story telling)	<ul style="list-style-type: none"> Autonomy Professional competence (clinical practice) 	Ethical judgement	<ul style="list-style-type: none"> Assessment Rehabilitation & management Education, research & administration
Staley, Hickey, Rule, Barrett, Salter, Gibson, & Rochus	2021	IJSLP	Australia	Social ethical implications of social phenomena (case study)	<ul style="list-style-type: none"> Autonomy Beneficence Justice Non-maleficence Professional competence (clinical practice) Trust 	Ethical sensitivity	<ul style="list-style-type: none"> Assessment Education, research & administration Rehabilitation & management
McCullough & Gaugler	2021	Perspectives of the ASHA Special Interest Groups	USA	Social empirical research (survey)	<ul style="list-style-type: none"> Professional competence (clinical practice, work ethic) Justice Research integrity 	Ethical judgement	<ul style="list-style-type: none"> Advocacy & consultation
Azul & Zimman	2022	IJSLP	Australia	Philosophical conceptual clarity (discourse analysis)	<ul style="list-style-type: none"> Justice Research integrity 	Ethical judgement	<ul style="list-style-type: none"> Education, research & administration
Fine & Griffin	2022	Seminars in Speech and Language	USA	Philosophical normative analysis (principle-based)	<ul style="list-style-type: none"> Beneficence Non-maleficence Professional competence (clinical practice, ethical decision making) 	Ethical judgement	<ul style="list-style-type: none"> Advocacy & consultation Education, research & administration Rehabilitation & management
Bickford, Hersh, & Israel	2022	IJSLP	Australia	Philosophical Conceptual clarity (Principle-based)	<ul style="list-style-type: none"> Beneficence Justice Research integrity 	Ethical judgement	<ul style="list-style-type: none"> Education, research & administration

Note. AJSLP = American Journal of Speech, Language Pathology; JSLHR = Journal of Speech, Language, and Hearing Research; LSHSS = Language, Speech, and Hearing Services in Schools; IJSLP = International Journal of Speech-Language Pathology

Table 3. Summary of the number of papers per peer-reviewed journal.

Peer-reviewed Journal/Source	Number of papers
Seminars in Speech and Language	25
International Journal of Speech-Language Pathology	7
Journal of Speech, Language, and Hearing Research	4
American Journal of Speech Language Pathology	5
Perspectives of the ASHA Special Interest Groups	3
American Speech-Language Hearing Association	2
Language, speech, and hearing services in schools	2
Perspectives on Administration and Supervision	2
Advances in Speech and Language Pathology	1
Contemporary Issues in Communication Science and Disorders	1
International Journal of Language and Communication Disorders	1
Journal of Clinical Speech and Language Studies	1
Journal of Continuing Education and Professional Development	1
Journal of Interactional Research in Communication Disorders	1
Perspectives on Gerontology	1
Perspectives on Global Issues in Communication Sciences and Related Disorders	1
Perspectives on Neurophysiology and Neurogenic Speech and Language Disorders	1
The Journal of Clinical Ethics	1

Table 4. Topics related to article approach with methodology.

Topic	Approach with methodology	Number of papers per methodology	Total number and % of papers per topic
Patient-centred dysphagia care	P = Hypothetical case	2	14 (23%)
	S = Case study	6	
	P = Principle	2	
	S = Published data	2	
	P = Document review	1	
	S = Story telling	1	
Ethical responsibilities in rehabilitation (right hemisphere cognitive-communication deficits, neurodegenerative clinical syndrome, cognitive impairments, stuttering in schools, group therapy)	S = Case study	4	9 (15%)
	P = Principle	3	
	S = Published data	1	
	S = Story telling	1	
Promoting ethical research practices	P = Principle	3	7 (11%)
	S = Published data	3	
	S = Survey	1	
Ethics in education	P = Principle	2	6 (10%)
	S = Survey	2	
	S = Published data	1	
	S = Focus groups	1	
	S = Interviews	3	
Ethical dilemmas and decision making in practice (long term care setting, oral and nasal video-endoscopy)	S = Interviews	3	5 (8%)
	S = Self-report	2	
Common ethical mistakes	P = Principle	2	5 (8%)
	S = Case study	1	
	S = Survey	1	
	S = Self-report	1	
Ethics in the workplace	P = Hypothetical case	2	4 (7%)
	S = Survey	1	
	P = Document review	1	
Scope of practice	P = Principle	1	2 (3%)
	P = Document review	1	
Patient participation in decision-making	P = Hypothetical case	1	2 (3%)
	S = Case study	1	
Ethical issues in practice management	P = Hypothetical case	1	1 (2%)
	P = Principle	1	
Differentiating concepts of morality, ethics, and law	P = Principle	1	1 (2%)
	P = Principle	1	
Animal welfare in animal assisted therapy	P = Principle	1	1 (2%)
Telepractice	P = Principle	1	1 (2%)
Cultural responsiveness	P = Discourse analysis	1	1 (2%)
Comparing various codes of ethics	P = Document review	1	1 (2%)

Note. P = Philosophical; S = Social scientific.

responsibilities in rehabilitation, reviews of published data ($n=7$), seen in the examination of promoting ethical research practices, surveys ($n=5$), used in topics like ethics in education, interviews ($n=3$), featured in ethical dilemmas and decision-making in practice. Self-reports ($n=2$) and storytelling ($n=2$) were both present in the exploration of ethical responsibilities in rehabilitation, and a solitary paper employed a focus group methodology within ethics in

education. Patient centred dysphagia care, which was the most common topic, was explored using most of the mentioned methodologies. Collectively, this reflects a comprehensive exploration of current conducts and beliefs within the field, with each method providing unique insights into the ethical dimensions of various professional topics.

In terms of the approach followed, we also considered the evolution of perspectives and methodological

trends over time. In the initial period from 1990 to 1999, a clear dominance of social scientific approach was evident, marked by a focus on case studies, with sporadic usage of survey and self-report methodologies.

The subsequent decade from 2000 to 2009 witnessed a notable increase in publications under/within the philosophical approach, most of which heavily utilised principle-based methods. During this period, social-science papers showed an increased diversity of methodologies that encompassed reviews of published data, case studies, and interviews. This trend continued from 2010 to 2019, where a considerable rise in papers from both the philosophical and social perspective aligned publications was observed. Papers that reflected the philosophical approach maintained a high reliance on principle-based methods but expanded to also include hypothetical scenarios, self-reports, and document reviews. During this same period, the papers that reflected a social scientific perspective, showed a diversity of methodologies with a particular emphasis on surveys and reviews of published data.

As expected, there was a decline in the number of papers representing both philosophical and social scientific approaches during the three-year period of 2020–2022. It is crucial to acknowledge this decrease in relation to the shorter timeframe which did not include a full decade. One might also consider whether the impact of COVID-19 could possibly have contributed to this result, as this pandemic has had a widespread impact on research activities globally, resulting in a shift in research priorities towards pandemic-related topics, as well as resource

constraints faced by researchers and institutions. Furthermore, scholars may have experienced challenges in conducting research, leading to a temporary decline in productivity, and this impact could extend to the speech-language pathology discipline, potentially influencing the observed decrease in papers representing philosophical and social scientific approaches between 2020 and 2022 (Barroga & Matanguihan, 2020).

In the evolution of the philosophical approach, a gradual diversification in methodologies was noted with a shift from a reliance on the principle-based method to a more varied methodological spectrum over time. On the other hand, the social scientific approach has maintained a consistent dominance on case study methodology, within the range of methodologies that also encompassed surveys, storytelling, and focus groups.

Ethical topics or principles

The main topics or principles were identified for each paper and the results are depicted in Figure 3. The researchers acknowledge that some topics may seem overlapping, such as informed consent and autonomy or record keeping and professional competency. To clarify, distinct definitions and rationale for separating these topics are provided.

The principle of *autonomy* refers to respecting an individual’s right to make their own decisions. It encompasses broader ethical considerations beyond specific consent processes, including the overall respect for patient/client independence and choice in various contexts (Robinson et al., 2020). While

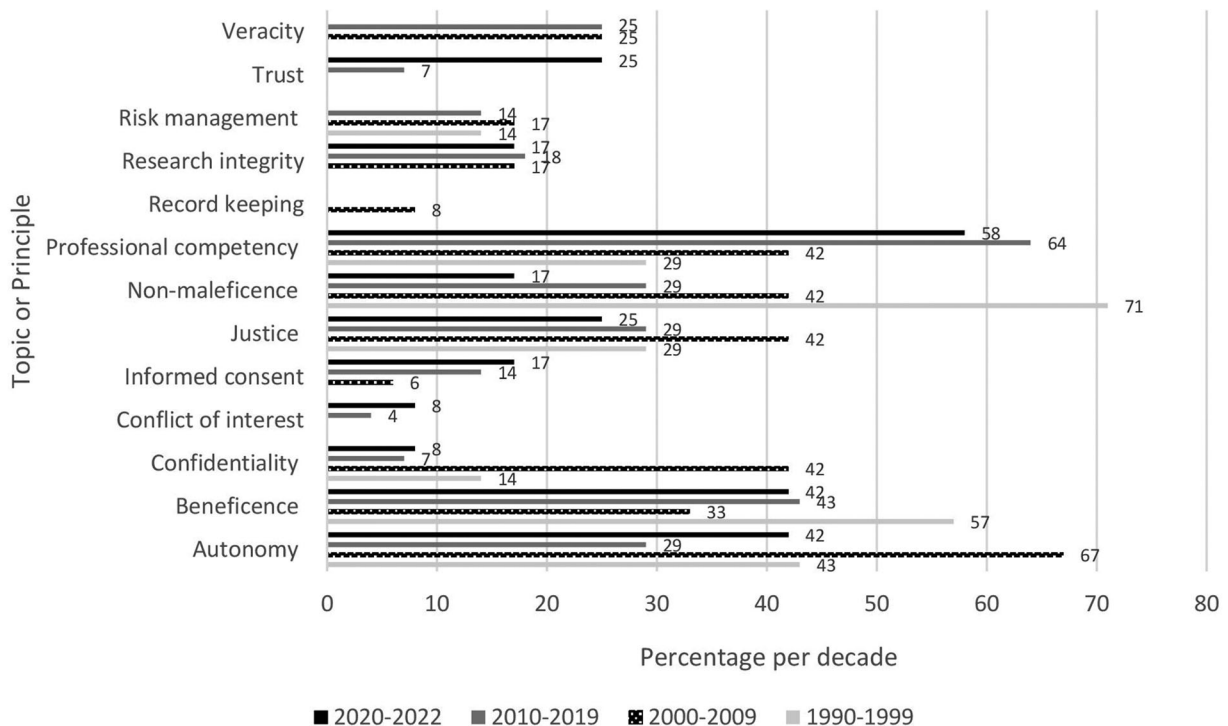


Figure 3. Topics identified in the systematic review (alphabetically arranged from the bottom).

informed consent is an aspect of autonomy, we have treated it as a separate topic to highlight its specific importance in ensuring that patients/clients are fully informed about the procedures, risks, and benefits before agreeing to treatment. This distinction allows for a focused examination of the ethical issues and practices related to consent. *Professional competency* addresses the overall capability and expertise of SLPs to provide high-quality care, including continuous professional development, adherence to best practices, and maintaining the standards of the profession (Institute of Medicine, 2010). *Record keeping* is treated separately to emphasise the ethical and legal responsibilities involved in maintaining accurate and confidential patient/client records. This topic covers specific practices and issues related to documentation, data management, and privacy (Pandurov & Jovanović, 2020).

Across all the papers included in the review, the most prevalent ethical topics or principles were professional competency as noted in 53% ($n = 32$) of the papers, followed closely by beneficence at 42% ($n = 25$), reflecting the promotion of well-being as a significant topic. Autonomy (i.e. the principle of respecting individual choices), emerged in 40% ($n = 24$) of the papers. Non-maleficence (i.e. the obligation to do no harm), was identified in 37% ($n = 22$) of the publications, while justice (i.e. ensuring fairness and equity), was addressed in 30% ($n = 18$) of the papers. The least discussed topics or principles were conflict of interest and record keeping each occurring in 2% and 7% of the articles, respectively. Studies in each country included a variety of these topics or principles, without focusing on particular topics or principles per country.

Over the different decades, specific trends were noted regarding ethical topics or principles that were addressed. In the 1990–1999 period, the principles of non-maleficence, beneficence, autonomy, and, to a lesser extent, risk management, confidentiality, professional competency, and justice were the primary focus areas.

The 2000–2009 period emphasised confidentiality, professional competency, autonomy, and informed consent, while also discussing non-maleficence, beneficence, justice, research integrity, veracity, and trust.

The following decade, 2010–2019, showcased a strong emphasis on professional competency and beneficence. Additionally, it addressed non-maleficence, autonomy, justice, research integrity, veracity, and informed consent.

In the most recent period, covering the three years between 2020 and 2022, the focus was on professional competency, autonomy, beneficence, and justice, with inclusion of some discussions on trust, confidentiality, non-maleficence, informed consent, and research integrity. Throughout these years, key ethical topics or principles have persisted but their

emphasis has varied, thereby, highlighting the evolving ethical landscape within the field.

Ethical decision-making

Rest's (1994) theoretical framework for understanding ethical decision-making with its four components were used as a classification system for the articles reviewed. The framework provided a thematic lens through which the ethical dimensions of the reviewed articles were systematically assessed. Although neither of the four components are more important than the next, ethical sensitivity represents the first building block in the ethical decision-making process.

In the 60 papers included in the current review, we discerned the presence of two distinct facets within the realm of ethical inquiry. A predominant focus on ethical judgement (the second component) was noted in most of the reviewed papers ($n = 50$, 83%), while a comparatively limited subset of papers ($n = 10$, 17%) directed their attention towards the concept of ethical sensitivity (the first component). Notably, neither the constructs of ethical motivation nor ethical courage (the third and fourth component respectively) garnered any attention or discussion in the current data. Ethical judgement was the only focus in the UK, Ireland, Greece, and Kuwait. Whilst this was also the focus in studies emanating from Canada, one of the two studies also included ethical motivation. Similar trends were noted in Australia and USA, where ethical judgement was mentioned the most, followed by ethical sensitivity. Only three studies in these regions made mention of ethical motivation.

The analysis of ethical inquiry across distinct time periods covered by the data, revealed intriguing trends. From 1990 to 1999, ethical judgement was observed in six of the seven papers included (86%), with ethical sensitivity referenced to only once. Similar trends were noted between 2000 to 2009, wherein ethical judgement was mentioned more (11/13 papers, 85%) than ethical sensitivity which was only noted twice. While a substantial emphasis on ethical judgement remained from 2010 to 2019 (22/28 times, 79%), there was a noted increase in focus on ethical sensitivity, mentioned in six instances. However, from 2020 to 2022, while ethical judgement was still prevalent with 11/12 occurrences (92%), ethical sensitivity was mentioned only once. This suggests a consistent focus on ethical judgement across the years, but a fluctuating trend in the consideration of ethical sensitivity.

Role of the speech-language pathologist

The majority (82%, $n = 49$) of the included papers described more than one of the SLP's roles. Of the six specified roles, diagnosis was only discussed in the early 21st century (2000–2009), while identification was only described in three of the four decades (1990–2010). The four additional roles, which

include advocacy and consultation; assessment; education, research, administration; and rehabilitation and management, were all addressed throughout the four decades, albeit with varying frequency. It is interesting to note that rehabilitation and management were consistently addressed with the highest frequency throughout the four decades. The results are depicted in Figure 4.

In analysing the roles of SLPs across the four decades included in the review, distinct trends emerged from the variations in the data. In the period from 1990 to 1999, of the seven articles reviewed, a considerable emphasis was placed on the rehabilitation/management role, mentioned five times, while assessment and education/research/administration roles were noted three times each. The identification role and advocacy/consultation role received less attention and was only mentioned once in this period. Similarly, from 2000 to 2009, the focus remained on the rehabilitation/management role (9/13 papers), while the assessment role was emphasised five times, and the education/research/administration (4/13 papers) and the identification role was mentioned once. The roles focused on the period spanning from 2010 to 2019 differed, whereas the education/research/administration role was discussed in 16/28 papers, thus signifying that this is a growing focus area in comparison to the previous period. The rehabilitation/management role has continued to be of high importance (13/28), while the assessment role was mentioned five times. The advocacy/consultation role was mentioned four times and the identification role once, thus indicating focus on the different roles during this decade.

In the most recent decade (2020–2022), the rehabilitation/management role remained prominent with nine mentions. Meanwhile, the assessment role was highlighted in three papers of this period. The education/research/administration role was mentioned five times, and the advocacy/consultation role garnered attention twice. These findings suggest a consistent emphasis on the rehabilitation/management role across these years, with fluctuations noticed in assessment, education/research/administration, and advocacy/consultation roles. This evolution/emergent trend in specific roles of SLPs might indicate a change of priorities in the speech-language pathology discipline and the need to adapt to new research directions, or responding to evolving healthcare needs over time, with rehabilitation and management remaining an essential and constant core function.

Discussion

In this systematic review spanning the past four decades (1980–2022), we analysed the literature on ethics in speech-language pathology. The included publications from 1990 to 2022 (none were available for the 1980–1989 period) spanned four continents, namely North America, Australia, Asia, and Europe, offering a diverse range of global perspectives on ethics in the speech-language pathology discipline. This broad geographical representation provides an understanding of how ethical considerations have been approached and addressed across different cultural and regional contexts.

Additionally, the mention of the papers’ origins from multiple countries such as Australia, Canada,

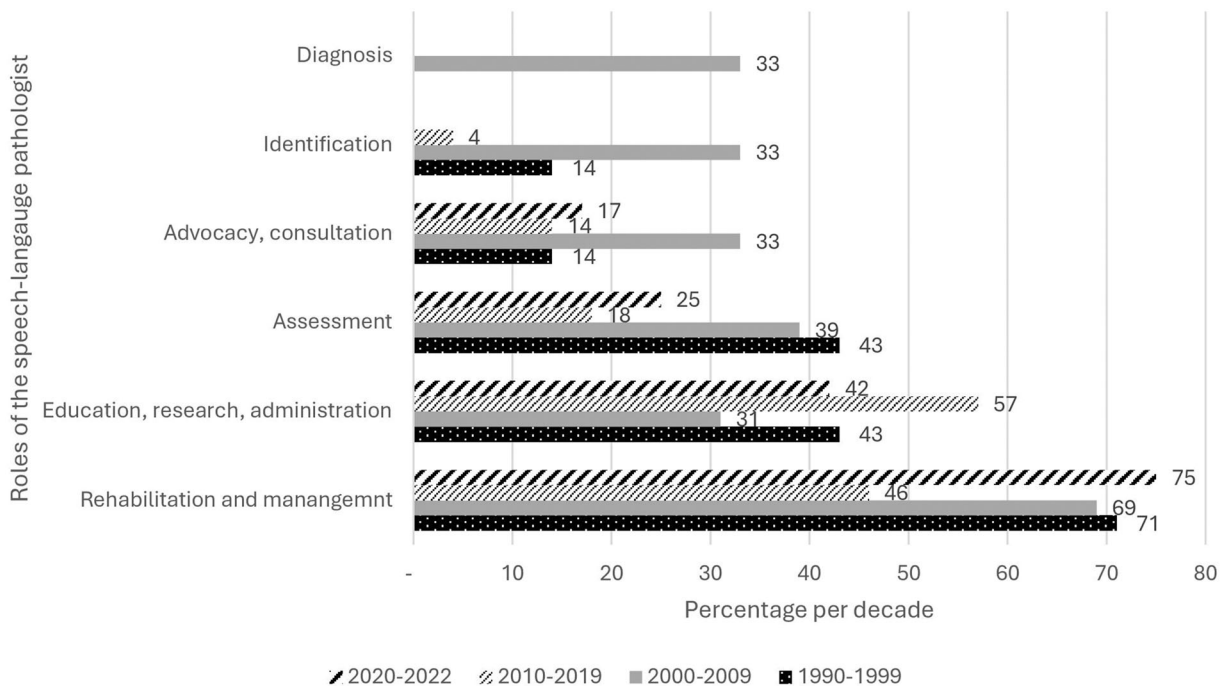


Figure 4. Roles of the SLP identified in the systematic review.

Greece, Ireland, Kuwait, UK, and USA underscores the global scope and multifaceted nature of the ethical discourse within the speech-language pathology discipline. It reflects the varied socio-cultural, legal, and professional landscapes in which ethical practices and dilemmas are encountered and navigated. These papers also point towards the range of global economic regions, as classified into four main categories by the World Bank, based on the gross national income per capita of a country as well as other factors that impact the countries economics such as income growth, inflation, exchange rates, and population size. The four categories are high, upper-middle, lower-middle, and low income countries, based on income levels (Sarda et al., 2019).

Most papers originated from high income countries, despite the long history of service delivery by SLPs in lower-middle income countries (e.g. in South Africa, speech-language pathology training began in 1937; Pillay et al., 2020). SLPs in upper-middle, lower-middle, and low income countries may encounter unique ethical challenges that differ from those faced by their counterparts in high income countries. Several factors contribute to potential differences in the nature and intensity of ethical dilemmas experienced, including resource constraints, cultural and linguistic diversity, access to standardised and comprehensive education and training, variances in healthcare regulations and policies, and access to services (Kenny, 2015). However, it is essential to note that ethical dilemmas faced by SLPs in upper-middle, lower-middle, and low income countries are not necessarily inherently greater, but they may be different due to the specific contextual challenges mentioned above (Cloete et al., 2022).

Ethical dilemmas are shaped by various factors (including personal values and beliefs, legal standards, socioeconomic, and healthcare contexts) and the nature of the challenges may vary significantly between different regions and healthcare systems (Flatley et al., 2014). Addressing and mitigating these challenges may include developing ethical guidelines that are context responsive; providing targeted training, increasing resources, and integrating culturally and linguistically sensitive and equitable approaches to service delivery within the discipline of speech-language pathology. This could help enhance ethical decision-making and the delivery of quality care despite the constraints posed by the local context.

The examination of publication trends from 1990 to 2022 also highlighted changes in the use of methodologies within both the philosophical and social scientific approaches. Across time periods, the philosophical approach gradually diversified its methodologies, progressing from reliance on principle-based methods to incorporating a more varied spectrum of methods, such as hypothetical scenarios, self-reports, and document reviews. It is particularly noteworthy from the information in Table 4 that the emphasis on patient-

centred care and ethical responsibilities in rehabilitation suggests a prioritisation of personalised and respectful care. The focus on ethical research practices and education, indicates a foundational commitment to ethical integrity in both the generation and dissemination of knowledge. The variety in topics also reflects the expanding boundaries of healthcare practice and the need for adaptable ethical guidelines that can address the complexities of modern healthcare environments. The use of various methodological lenses as outlined in Table 4, exemplifies the comprehensive and multidimensional approach needed to address ethical issues in healthcare. It highlights the critical importance of combining theoretical and empirical perspectives to develop a more holistic understanding of ethical considerations in patient care, ultimately enhancing the quality of care and ethical decision-making in clinical practice.

In contrast, the social-scientific approach maintained a consistent reliance on case studies over this period while gradually expanding and diversifying methodologies, including surveys, storytelling, and focus groups. These changes in methodology may be reflective of the need for applied research in the discipline of speech-language pathology. They may also be reflective of the need for evidence-based practice which not only involves clinical expertise, but also considers the needs, preferences, abilities, and values of patients/clients and their significant others when making clinical decisions (Wium & Louw, 2018).

The systematic analysis revealed a distinct contrast in methodological diversity between the two approaches. While case studies have remained the dominant methodology used in the social scientific approach, the philosophical perspective showed a wider variety of methodologies. This disparity illustrates different paths for each approach, highlighting not only the diversity of methodologies used within each domain but also the varying rates of their evolution across different time periods.

Results further suggested differing or changing approaches to ethical inquiry within the speech-language pathology discipline. Similarly, differences were noted in terms of key ethical topics or principles across different time periods. Professional competency emerged as the most prevalent ethical topic, occupying a significant portion of discussions highlighting its sustained importance, along with an expanded discussion on principles of autonomy, beneficence, justice, trust, confidentiality, non-maleficence, and informed consent. This emphasis on professional competency reflects the importance of ensuring high standards of proficiency and competence within the profession (Hemberg & Hemberg, 2020). The emphasis on beneficence, with its focus on the active promotion of well-being for clients, aligns with the ethical commitment to prioritise the welfare of individuals receiving speech-language pathology services. Furthermore, the recurrent mention of autonomy, centred around

respecting individual choices, emphasises the significance of personal agency in the ethical decision-making processes discussed across these papers.

These findings collectively contribute to a comprehensive understanding of the evolving ethical landscape within the field, highlighting nuanced perspectives on ethical principles and their applications in speech-language pathology practice. Topics such as record-keeping and conflict of interest were less frequently discussed, indicating their comparatively lower prominence/significance as ethical considerations. It would be important to identify whether more research in these areas is needed or if SLPs feel confident with these considerations resulting in less investigation being needed.

Analysis of the components of ethical decision-making using Rest's (1994) framework, revealed a dominance of one component, namely ethical judgement (choosing the course of action to follow, after having identified the presence of an ethical dilemma). Ethical sensitivity (recognising that an ethical dilemma exists) was also discussed, albeit to a lesser degree. Notably, the constructs of ethical motivation (being motivated to follow through on the course of action that was decided upon) and ethical courage (executing the action plan) were conspicuously absent from discussion within the reviewed literature. This result warrants critical consideration due to the disproportionate attention given to ethical judgement over the other three components of ethical decision-making. These findings might be influenced by evolving research interests, changing ethical paradigms, or emerging contextual factors, thus confirming the dynamic nature of ethical discourse/research within the discipline over time.

The consistent emphasis on ethical judgement across different time periods might suggest a tendency to focus on assessing actions and outcomes based on established ethical principles or standards of practice within the speech-language pathology discipline, possibly overlooking the importance of ethical sensitivity in understanding context-specific ethical challenges (Jagger, 2011). Therefore, the dominance of ethical judgement might also reflect a bias in ethical discussions by specifically focusing on right or wrong and determining a course of action, potentially limiting a comprehensive understanding of ethical decision-making in speech-language pathology by considering all the interrelated components.

The fluctuating trend in the consideration of ethical sensitivity over time, particularly the decline in recent years, raises questions about whether research interests are evolving, changing ethical paradigms, or emerging contextual factors within the discipline (Naudé & Bornman, 2017). This downward trend could potentially indicate a need for renewed emphasis on the importance of ethical sensitivity in ethical decision-making processes, considering the dynamic and context-specific nature of ethical

dilemmas encountered by SLPs. The findings further prompt critical examination of the ethical discourse within the discipline for a more balanced and comprehensive approach that encompasses both ethical judgement and ethical sensitivity.

The analysis of the roles of SLPs in the reviewed papers across different time periods revealed a consistent emphasis on ethics within the rehabilitation/management role, with varying attention given to ethics in other roles such as assessment, education/research/administration, and advocacy/consultation. This attention to ethics in other roles across time highlights shifts in priorities and ethical considerations in response to evolving healthcare needs within speech-language pathology, such as health care disparities, the impact of the COVID-19 pandemic on clinical practice, and the need for interdisciplinary collaboration within clinical settings (Chadd et al., 2021; Rameau et al., 2023).

The prominence of ethics in the rehabilitation/management role across all time periods underscores its enduring significance within the profession and possibly the ethical complexities involved in clinical decision-making. However, the varying levels of attention to other roles over different time frames indicates dynamic changes in the profession's priorities and focus. In particular, a considerable emphasis was placed on the education/research/administration role in the profession between 2010 and 2019 with a growing focus (16 mentions out of 28 articles) in this area. This recognition could reflect the discipline's evolution towards an increased focus on research, educational roles, and administrative responsibilities, and the ethical complexities and considerations related to these roles. This shift potentially reflects a broader evolution within the discipline, driven by factors such as rapid technological advancements, expanded roles of SLPs and the need for developing skills. Critical thinking and technological proficiency play a crucial role in reshaping the profession (Joynes et al., 2019). SLPs are increasingly integrating technology to enhance assessment, intervention, and communication strategies (Hewat, 2022).

Additionally, changes in healthcare landscapes have expanded the roles of SLPs beyond traditional clinical settings by emphasising interdisciplinary collaboration within the broader healthcare system (Graffunder & Sakurada, 2016). The evolving needs of patients/clients, especially in the context of a diverse spectrum of communication and swallowing disorders and an ageing population, contribute to the profession's continuous adaptation and skill enhancement (Spinnie, 2023). Notably, the fluctuating attention to the assessment role across different periods may suggest varying concerns, ethical considerations or changing practices in the evaluation and diagnostic aspects of speech-language pathology. Although assessment outcomes inform rehabilitation and management, with an inherent link between the two roles,

the attention given to assessment in terms of ethics appeared to fluctuate, while the rehabilitation/management role consistently retained its significance. These results potentially indicate changes in evaluation practices or diagnostic priorities over time.

The relatively limited attention to ethics associated with advocacy/consultation roles throughout the years could indicate an area of potential growth or underrepresentation within speech-language pathology. The sporadic focus on the ethics of roles might suggest an area that demands more attention, especially in terms of representing patient/client rights, advocating for healthcare policies, and providing consultation services to stakeholders within the profession (Bornman & Louw, 2023).

To support the discussion, the researchers endeavoured to compare the research findings with updates to the country-specific professional codes of ethics represented in this review. One key rationale for linking research findings to professional codes of ethics is to illustrate how these codes evolve in response to emerging ethical challenges, societal changes, and advancements in the field. By examining the timing and focus of updates to these ethical codes, we can gain insights into how professional standards are adapted to address new ethical issues and ensure they remain relevant and comprehensive. This analysis also helps contextualise the trends identified in the literature, showing how professional organisations guide ethical practice and shape discourse within the profession.

The analysis indicates that changes in professional codes of ethics often reflect broader trends and shifts in ethical considerations within the field of speech-language pathology. These changes are typically influenced by emerging ethical challenges, societal values, and advancements in research and practice. For example, the revisions of the SPA code of ethics in 2000, 2010, and 2020 illustrate how professional standards evolve over time (SPA, 2000, 2010, 2020). Each revision has responded to new ethical challenges and incorporated updated values and principles, which align with patterns identified in the research literature. The 2000 revision emphasised evidence-based practice, which aligns with the trend towards more research-focused publications and the integration of scientific evidence into clinical practice that became prominent in the early 2000s. The 2010 revision focused on patient autonomy and informed consent, correlating with an increase in literature discussing patient rights and ethical decision-making processes that emphasise autonomy. The 2020 revision highlighted cultural competence and social justice, reflecting the recent trend in ethical literature addressing diversity, equity, and inclusion within the profession.

Similarly, the Speech-Language and Audiology Canada (SAC), formerly known as the Canadian Association of Speech-Language Pathologists and Audiologists (CASLPA), has updated its code of

ethics several times: 1988, 1995, and 2008 (CASLPA, 1988, 1995, 2008) with progressive updates reflecting broader healthcare trends towards professional accountability, client-centred care, and evolving standards of practice. The 2016 CASLPA update was in response to contemporary ethical challenges, potentially explaining increased discussion in literature about modern ethical dilemmas. The 2020 (CASLPA) update emphasised inclusivity and updated ethical standards, aligning with recent research focusing on ethical practices in diverse cultural contexts.

The Hellenic Association of Logopedists (HAL) has also updated its ethical guidelines, although specific update years are not well-documented. These updates likely follow broader European trends in healthcare ethics, focusing on autonomy, patient rights, and professional competence. The Kuwait Association for Speech-Language Pathologists and Audiologists (KASLPA) provides ethical guidelines for practitioners in Kuwait, though specific update years are not readily available. These guidelines likely reflect international trends, focusing on issues such as cultural competence and ethical practice in diverse settings.

The Irish Association of Speech and Language Therapists (IASLT) updated its code of ethics in 2007 (IASLT, 2007), introducing comprehensive ethical guidelines coinciding with increased professionalisation and standardisation in the literature, and in 2018 (IASLT, 2018), focusing on updating professional standards, aligning with recent trends in ethical discussions about maintaining high standards of practice and competence.

The RCSLT in the UK has updated its code of ethics multiple times, with the 2005 (revision introducing updated ethical guidelines emphasising patient-centred care and professional accountability, aligning with trends in ethical literature. The 2014 (RCSLT, 2014) and 2018 (RCSLT, 2018) updates reflected contemporary ethical challenges, corresponding with increased discussion on ethical dilemmas in clinical practice and research integrity.

ASHA has also revised its code of ethics several times: 1994, 2003, 2010, and 2016 (ASHA, 1994, 2003, 2010, 2016), with updates reflecting evolving standards in patient care, professional conduct, and inclusivity. These changes align with trends in literature discussing autonomy, informed consent, and cultural competence.

Implications for practice

The revisions to the codes of ethics across these organisations reflect broader trends and shifts in the ethical considerations within the field of speech-language pathology. For example, the emphasis on patient autonomy and informed consent in updates by SPA (2010), SAC (2016), and ASHA (2003, 2010) aligns with the increased focus in the literature on these ethical principles during the corresponding

periods. Similarly, the recent updates emphasising cultural competence and social justice by SPA (2020), SAC (2020), and RCSLT (2014, 2018) align with a growing body of research addressing diversity, equity, and inclusion. These updates suggest that professional organisations are responsive to emerging ethical challenges and societal changes, which in turn are reflected in the research literature. This dynamic interaction between ethical codes and research highlights the importance of continuous review and adaptation of ethical standards to ensure they remain relevant and comprehensive.

Understanding the timing and focus of these ethical code updates helps contextualise the trends identified in literature. It underscores the role of professional organisations in guiding ethical practice and shaping the discourse within the profession. As such, researchers and practitioners should remain attuned to these updates and consider their implications for both clinical practice and future research. By addressing these areas, we can advance the field of speech-language pathology and ensure that ethical considerations remain at the forefront of research, practice, and education. Understanding the interplay between research findings and professional codes of ethics will help to maintain high ethical standards and support the ongoing development of the profession.

Limitations of the study

Papers written as part of multidisciplinary teams and not exclusively on the profession of speech-language pathology were not included in this study. Including these studies could potentially add insight into the current subject focus. Also, the inclusion of recent papers (2020–2022) is a short period and not necessarily an accurate reflection of the full decade. Another important limitation of this study is the potential cultural bias introduced by excluding non-English publications. This exclusion may result in an incomplete understanding of the global ethical landscape in speech-language pathology, as significant contributions published in other languages were not considered. This limitation highlights the need for future research to include non-English literature, providing a more comprehensive and culturally diverse perspective on ethics in speech-language pathology.

Recommendations for future research

- (1) **Diverse and inclusive studies:** Future research should aim to include a broader range of cultural perspectives by incorporating non-English publications. This will help to provide a more comprehensive understanding of ethical issues in speech-language pathology across different cultural contexts.
- (2) **Longitudinal studies:** Conducting longitudinal studies to track changes in ethical decision-making practices among SLPs over time would provide valuable insights into how ethics evolve within the profession.

- (3) **Interdisciplinary collaboration:** Research that includes multidisciplinary teams can offer a more holistic view of ethical issues in speech-language pathology, considering the interactions and overlapping responsibilities between different healthcare professionals.
- (4) **Ethical decision-making processes:** More empirical studies focused on the actual ethical decision-making processes of SLPs in various contexts are needed to understand how theoretical principles are applied in practice.

Recommendations for professional associations

- (1) **Updating ethical guidelines:** Professional associations should regularly update their ethical guidelines to reflect new research findings and evolving societal values, ensuring that they remain relevant and comprehensive.
- (2) **Global collaboration:** Encourage collaboration between international professional associations to harmonise ethical standards and practices, fostering a more unified approach to ethics in speech-language pathology.
- (3) **Support for ethical research:** Provide grants and funding opportunities specifically aimed at supporting research into ethical issues within the profession, promoting a deeper understanding and more rigorous investigation of these topics.

Recommendations for teaching and professional education

- (1) **Integrated ethics education:** Ethics should be integrated throughout the speech-language pathology curriculum, rather than being confined to stand-alone courses. This approach ensures that ethical considerations are woven into all aspects of professional training.
- (2) **Case-based learning:** Use case studies and real-world scenarios to teach ethics, helping students to develop practical decision-making skills and apply theoretical principles to concrete situations.
- (3) **Cultural competence training:** Emphasise the importance of cultural competence in ethical decision-making, preparing future SLPs to navigate ethical dilemmas in diverse cultural contexts.
- (4) **Continuous professional development:** Offer continuous professional development opportunities focused on ethics, allowing practicing SLPs to stay current with the latest ethical guidelines and best practices.

Conclusion

The global scope of the reviewed literature reflects the profession's commitment to addressing ethical considerations across varied sociocultural and professional contexts. The dual categorisation of articles into either philosophical or social scientific approaches revealed a balanced distribution of methodological paradigms. Notably, there is an evolution in methodologies over time within both approaches which reflects a dynamic

response to the changing needs and priorities within the discipline. Ethical topics and principles, including professional competency, beneficence, autonomy, and justice emerged as recurrent themes throughout the decades. The dominance of ethical judgement over ethical sensitivity in ethical decision-making processes, as revealed by Rest's (1994) framework, calls for a critical reflection on the comprehensive integration of both components within the profession. A consistent, ethical focus within the rehabilitation/management role of SLPs highlights the ethical complexities inherent in clinical decision-making.

Our findings suggest a need for continued exploration and development of ethical considerations in roles beyond traditional clinical settings, such as education, research, administration, and advocacy/consultation. This expansion of roles is crucial for ensuring a holistic and adaptive approach to meet the diverse needs of patients/clients and align with the evolving demands and priorities within the discipline of speech-language pathology. As the speech-language pathology profession continues to evolve, a comprehensive ethical framework will serve as a guide in fostering ethical decision-making and maintaining the integrity and effectiveness of speech-language pathology practice.


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ORCID

Alida Naudé  <http://orcid.org/0000-0002-3618-6551>
 Amisha Kanji  <http://orcid.org/0000-0002-9577-4935>
 Brenda Louw  <http://orcid.org/0000-0002-7235-0814>
 Juan Bornman  <http://orcid.org/0000-0001-9685-3750>

Data availability statement

The authors confirm that the data supporting the findings of this study are available within the article.

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