Parents’ Knowledge, Perception, and Attitudes Towards Speech and Language Therapy Services of Individuals with Cerebral Palsy: A Quantitative Analysis

Ahmed Olaitan Lawal¹, Foluke Abiodun Oyenuga¹, Udeme Samuel Jacob²* and Jace Pillay²

¹Department of Special Education, Faculty of Education, University of Ibadan, Nigeria
²South African Research Chair in Education and Care in Childhood, Faculty of Education, University of Johannesburg, Johannesburg, South Africa

Abstract: This study examines the relationship between parental knowledge, perception, and attitudes toward speech and language therapy for children with cerebral palsy. The study adopted a descriptive research design of correlational type. Purposive sampling was used to identify fifty parents of individuals with cerebral palsy as respondents in the Ibadan metropolis, Nigeria. Self-structured questionnaires on parental knowledge, perception, and attitudes toward speech and language therapy were used for data collection from the respondents. The findings revealed that parents had moderate knowledge about speech and language therapy, with varying levels of perception and attitudes toward speech and language therapy. The study's limitations include the small sample size, sampling bias, self-reported data, and limited geographic scope. These limitations should be considered when interpreting the study's findings. Despite these constraints, this research provides valuable insights into the complexities of parental perspectives on speech and language therapy for children with cerebral palsy. It highlights the need for further exploration in this area. Future research should address these limitations to understand parental experiences and perspectives in diverse contexts comprehensively.

Keywords: Knowledge, perception, attitudes, individuals with cerebral palsy, speech and language therapy.

INTRODUCTION

Cerebral palsy and intellectual disability are complex conditions that can be interconnected. Research has shown that individuals with cerebral palsy may also experience intellectual disabilities, with some studies reporting a high prevalence of severe intellectual impairment among individuals with cerebral palsy [1]. Furthermore, it has been noted that the risk of intellectual disability is increased in children with cerebral palsy [2]. This association between cerebral palsy and intellectual disability is significant, as it can impact the overall well-being and quality of life of individuals affected by these conditions.

Moreover, the relationship between cerebral palsy and intellectual disability has been highlighted in studies that discuss cerebral palsy comorbidities. For instance, speech and language impairments, severe cognitive impairment, epilepsy, and visual impairment are reported as common comorbidities in individuals with cerebral palsy [1]. Literature supports the association between cerebral palsy and intellectual disability, emphasising the need for comprehensive care and support for individuals affected by these conditions. Understanding the interplay between these two conditions is crucial for providing effective interventions and improving the overall outcomes and quality of life for individuals with cerebral palsy and intellectual disability.

Cerebral palsy (CP) is a non-progressive neurological condition that affects approximately 3 out of every 1000 individuals [3, 4]. It is characterised by long-term disabilities that impact patients and their caregivers' quality of life. CP can significantly limit an individual's motor function, leading to challenges in movement, muscle tone, and coordination [5]. Pain has been identified as a significant impediment to participation in community life, school, and recreation for children with CP, affecting their overall quality of life and that of their families. Furthermore, individuals with CP may experience a higher incidence of epilepsy, which can further impact their overall well-being [6]. It has been suggested that physical activity is a crucial predictor of quality of life and happiness in young people with CP [7]. Adaptive sports can help individuals with CP maintain physical activity despite challenges.

Speech and language therapy is crucial in improving communication with individuals with cerebral palsy. Given the multifaceted nature of their language abilities, it is essential to create a classification system for language and speech profiles of children with
cerebral palsy [8]. Moreover, Pennington et al. (2013) [9] examined speech categorisation in children with cerebral palsy, highlighting the role of healthcare practitioners, parents, and speech and language therapists in evaluating their speech. Additionally, a research investigation conducted by Masood et al. (2021) [10] examined the impact of spider cage therapy in conjunction with traditional speech therapy on the language and speech abilities of children diagnosed with cerebral palsy. The study underscores the value of a multifaceted strategy in tackling speech and language interventions [11] also emphasised the variations in speech impairment among children with distinct forms of cerebral palsy.

Furthermore, Clarke et al. (2016) [12] emphasised augmentative and alternative communication for children with cerebral palsy, indicating the diverse range of interventions available to address communication difficulties in this population. Additionally, Mei et al. (2020) [13] underscored the frequent association of speech disorders with cerebral palsy, further emphasising the importance of speech and language therapy in this context. The relationship between the knowledge, perception, and attitudes of parents of individuals with cerebral palsy and their utilisation of speech and language therapy services is a complex and multifaceted issue. Several studies have highlighted the importance of parental knowledge and perception in influencing the utilisation of speech and language therapy services for children with cerebral palsy [14-16]. It has been found that parental knowledge of cerebral palsy is often inadequate, which can impact their decision-making regarding therapy services for their children [14].

Additionally, positive perceptions of children with cerebral palsy and a desire to work with them have been associated with better utilisation of therapy services [15]. Furthermore, early identification of language impairment in children with cerebral palsy has been emphasised as crucial for early intervention [17]. Stress and coping mechanisms in parents of children with cerebral palsy have also been identified as factors that can influence their perceptions and attitudes towards therapy services [18]. High levels of stress in parents have been associated with negative perceptions of their child’s behaviour and may impact their decision-making regarding therapy utilisation [18]. Additionally, the ease of caregiving for children with cerebral palsy has been highlighted as a factor influencing parental perceptions of their children’s needs and the therapy services they require [19].

Moreover, the delivery of healthcare services to children with cerebral palsy and their families has been recognised as an essential aspect affecting the utilisation of therapy services. There are differences between the goals set for children by parents and those of healthcare professionals, with parents frequently prioritising social participation for their children [20]. This misalignment in goals may impact the utilisation of therapy services and highlights the importance of understanding parental perspectives in providing care. Speech and language therapists and other healthcare professionals rely on parents' observations and knowledge of their children to classify their speech and language abilities, highlighting the importance of parental involvement in therapy [9]. Parents play a significant role in their children's early intervention plans and language development based on their perception of the communication skills of such children [21]. Early referrals for speech therapy are essential to minimise communication breakdowns and integrate alternative communication methods, reducing frustration for children and parents [22]. Parents must comprehensively understand CP and its management to improve outcomes for their children.

This research examines the correlation between parental awareness, perception, and attitudes towards speech and language therapy services for children with cerebral palsy and their actual utilisation of such services. The study seeks to evaluate the parental understanding of CP and therapy, investigate their perspectives on therapy services, scrutinise their attitudes towards therapy utilisation, and determine whether these factors affect actual therapy use. By conducting a quantitative analysis, the study aims to offer suggestions to improve therapy access and outcomes for individuals with CP and their families.

Research Questions

The following questions were raised to guide the study:

1. What is the level of knowledge among parents of individuals with cerebral palsy regarding the benefits, objectives, and available resources related to speech and language therapy for their children?
2. How do parents' perceptions of the effectiveness of speech and language therapy influence their
willingness to actively engage their children in therapy sessions and integrate therapeutic practices into their daily routines?

3. What are parents’ prevailing attitudes towards speech and language therapy in enhancing their children’s overall quality of life and communication skills with cerebral palsy?

MATERIALS AND METHODS

Design and Respondents

The study employed descriptive research with a correlational approach to provide a foundational understanding of a particular phenomenon [23]. This form of analysis serves as a precursor to subsequent quantitative investigations, helping to delineate the landscape of the phenomenon under study. It is worth noting that effective data interpretation during descriptive research can also give rise to hypotheses. Unlike normative research, which strives to ascertain the ideal situation [24], descriptive research maintains a neutral and objective stance. It is often regarded as the initial step in the exploratory analysis process [25].

Purposive sampling was employed to select fifty parents of individuals with cerebral palsy, a method chosen on account of the inherent characteristics of this condition. The sampling method ensured that the sample represented parents of individuals with cerebral palsy from a diverse range of specialised institutions in the Ibadan metropolis, enhancing the study’s comprehensiveness and applicability. The samples exhibited the following demographic characteristics: (22% males and 78% females) and a variety of ages from 18 to 60 years (M = 30; SD = 2.03). The parents were selected as respondents on the basis that their children were attending special schools and were diagnosed with cerebral palsy.

Instruments

Data for the study was collected using self-structured questionnaires developed by AOL and FAO, while USJ determined the face and content validity. They were of 3 types. These instruments were:

1. Parents’ knowledge of speech and language therapy scale
2. Parents’ Perception of speech and language therapy scale
3. Parents’ attitude towards speech and language therapy scale

Parent’s Knowledge Speech and Language Therapy Scale

The researchers created the "Parents' Knowledge of Speech and Language Therapy Scale" to assess how well parents understand and are aware of speech and language therapy for their children. Participants had to rate their knowledge on a 5-point Likert scale (ranging from disagree to agree) for each of the ten items. Each item presented a statement about speech and language therapy aspects, and parents chose a response reflecting their knowledge level. A test-retest analysis was conducted to determine the scale's reliability, resulting in a Cronbach alpha value of 0.82. A high correlation indicates that the scale has test reliability.

Parent’s Perception Speech and Language Therapy Scale

The scale measured the parents of individuals with cerebral palsy perception towards speech and language therapy. It consists of four (4) items. The instruments were used to gather more information on how parents of individuals with cerebral palsy perceive speech and language therapy. This instrument was made up of a 5-point scale, where 5 is Strongly Agree, 4 is Agree, 3 is Undecided, 2 is Disagree, and 1 is Strongly Disagree. Respondents were asked to respond by a tick (✓) in a box that depicts their choice. This instrument was pilot-tested using Cronbach's alpha value from centres, schools, and hospitals used in the study. It was found to have a reliability value of 0.81.

Parent’s Attitude Speech and Language Therapy Scale

This scale measured the attitude of parents of individuals with cerebral palsy towards speech and language. It contained six (6) items based on the reviewed literature where respondents were asked to rate their beliefs and feelings by speech and language therapy for individuals with cerebral palsy. Like other instruments discussed earlier, this instrument has a 5-point scale, where 5 is Strongly Agree, 4 is Agree, 3 is Undecided, 2 is Disagree, and 1 is Strongly Disagree. Respondents were asked to respond by a tick (✓) in a box that depicts their choice. This instrument was pilot tested using Cronbach’s alpha value from centres,
schools, and hospitals used in the study. It was found to have a reliability value of 0.79.

**Procedure**

The researchers initiated the data collection by personally visiting selected schools equipped with an introduction letter from the Department of Special Education, University of Ibadan. This letter served to apprise the schools’ management of the research objectives. Subsequently, the researchers conducted a sensitisation session for parents, teachers, and school authorities, providing them with comprehensive insights into the research and emphasising the importance of candid responses. The questionnaire was then personally administered to the respondents in the designated locales within the selected local government areas of Ibadan North, strictly targeting parents of individuals with cerebral palsy within the study areas. The study’s scope was limited to the urban confines of the Ibadan metropolis in the southwest region of Nigeria. Respondent s who volunteered were briefed on the study’s objectives and the requisite procedures. As previously mentioned, 50 questionnaires were distributed to parents of individuals with cerebral palsy in the selected schools and special centres in the Ibadan metropolis. Subsequently, participating parents returned their completed questionnaires. Before submission, the researchers elucidated the questionnaire’s contents to the respondents. The data were analysed using descriptive statistics, frequency counts and percentages.

**Ethical Consideration**

We sought permission from the education administration authority in Ibadan to collect data for the research. A letter was sent to parents of children with cerebral palsy requesting that they meet with one of the researchers on May 10, 2023, where information regarding the research objective was explained by the researcher (FAO). After the explanation, they were required to complete the informed parental consent form.

**RESULTS**

This section presents the study's findings in response to the three research questions posed to investigate the knowledge, perceptions, and attitudes of parents of individuals with cerebral palsy toward speech and language therapy. The analysis focuses on the responses gathered from the participants within the study areas of the Ibadan metropolis, emphasising understanding the level of awareness, the impact of perceptions, and the prevailing attitudes towards speech and language therapy in the context of cerebral palsy.

The first research question explores the level of knowledge among parents regarding the benefits, objectives, and available resources related to speech and language therapy for their children with cerebral palsy. Table 1 provides a detailed breakdown of participants’ responses to specific statements addressing various aspects of their knowledge in this domain.

The second research question delved into understanding how parents’ perceptions of the effectiveness of speech and language therapy influence their willingness to actively engage their children in therapy sessions and integrate therapeutic practices into their daily routines. Table 2 illustrates the frequency distribution of participants' responses to statements probing their perceptions in this regard.

The third research question uncovers parents' prevailing attitudes towards speech and language therapy in enhancing their children's overall quality of life and communication skills with cerebral palsy. Table 3 presents the frequency distribution of participants' attitudes towards statements exploring their beliefs and sentiments about the effectiveness and necessity of speech therapy.

**Research Question 1**

What is the level of knowledge among parents of individuals with cerebral palsy regarding the benefits, objectives, and available resources related to speech and language therapy for their children?

Table 1 revealed the responses to the knowledge of speech and language therapy possessed by the parents of individuals with cerebral palsy in the Ibadan metropolis. It revealed a weighted mean of 3.711 out of the 5.00 maximum obtainable score, higher than the standard mean of 3.00. This indicates that parents of individuals with cerebral palsy are knowledgeable about speech and language therapy. It was also observed that 29(58%) of respondents strongly agree that they have a role to play during their children's speech therapy sessions, and 16 (32%) agreed, with a mean of 4.34. The data suggests that parents know
Parents' Knowledge, Perception, and Attitudes Towards Speech  
Journal of Intellectual Disability - Diagnosis and Treatment, 2023, Vol. 11, No. 5  

255

their role during speech and language therapy sessions. Secondly, parents recognised the importance of speech and language therapy as 27 (54%) of participants strongly agreed that they could undertake the necessary measures irrespective of distance, while 18 (36%) agreed. This positive sentiment is reflected in the mean of 4.22. On the other hand, varied opinions were expressed regarding the necessity of speech therapy. While 16 (32%) strongly disagreed, suggesting a lack of perceived necessity, 12 (24%) agreed. The resulting mean of 2.9 indicates variability in knowledge about the essential role of speech therapy in addressing cerebral palsy-related speech difficulties.

The resulting mean of 2.9 indicates variability in knowledge about the essential role of speech therapy in addressing cerebral palsy-related speech difficulties. Moving to the importance of early intervention, 25(50%) of respondents strongly agreed, accompanied by 20(40%) in agreement. This yielded a high mean of 4.30, demonstrating a commendable understanding among parents about the crucial role of early therapeutic intervention. Regarding the role of parents in their child’s speech and language development, 1(2%) strongly agreed that they are aware of their role in their child’s speech and language development, while 21(42%) agreed. The resulting mean of 2.9 suggests that knowledge about the parental role in a child’s speech development is relatively average. On the other hand, 29(58%) strongly agreed that they are knowledgeable about their child’s condition and are aware of the role of a speech and language therapist in assessment and diagnosis, resulting in a mean of 4.52. This indicates a positive understanding among parents regarding how cerebral palsy affects speech and language development and the role of speech and language therapists in the overall management of the condition, although with moderate agreement.

Regarding whether speech and language therapy can help manage the communication and swallowing difficulties arising from cerebral palsy, 12(24%) respondents strongly agreed, while 10(20%) agreed. The mean score is 2.82, suggesting a moderate disagreement on whether speech and language therapy can help facilitate communication and swallowing challenges faced by individuals with cerebral palsy.

Research Question 2

How do parents’ perceptions of the effectiveness of speech and language therapy influence their willingness to actively engage their children in therapy sessions and integrate therapeutic practices into their daily routines?

Table 2 revealed that approximately 12 (24%) of respondents express substantial certainty that individuals with cerebral palsy can benefit from speech therapy, 10(20%) agreed, 14(28%) strongly disagreed, and 14(28%) agreed. The mean score of 2.82 suggests a neutral stance, indicating response variability. This

---

Table 1: Frequency Distribution Showing Total Participants who Possess Knowledge of Speech and Language Therapy for Children with Cerebral Palsy

<table>
<thead>
<tr>
<th>S/N</th>
<th>Statements</th>
<th>SA</th>
<th>A</th>
<th>U</th>
<th>D</th>
<th>SD</th>
<th>Mean</th>
<th>Std Dev.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>As a parent, I have an essential role to play during speech therapy sessions of my child with cerebral palsy</td>
<td>29</td>
<td>16</td>
<td>1</td>
<td>1</td>
<td>3</td>
<td>4.36</td>
<td>3.9</td>
</tr>
<tr>
<td>2</td>
<td>I can take my child for speech therapy no matter how far it is from my house</td>
<td>18</td>
<td>27</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>4.22</td>
<td>3.73</td>
</tr>
<tr>
<td>3</td>
<td>Children often outgrow early difficulties with speech; therefore, speech therapy is not necessary</td>
<td>9</td>
<td>12</td>
<td>3</td>
<td>16</td>
<td>10</td>
<td>2.90</td>
<td>2.61</td>
</tr>
<tr>
<td>4</td>
<td>Early intervention can help mitigate the speech problem of a child with cerebral palsy</td>
<td>25</td>
<td>20</td>
<td>0</td>
<td>3</td>
<td>2</td>
<td>4.30</td>
<td>3.84</td>
</tr>
<tr>
<td>5</td>
<td>I am aware that parent play an essential role in their child’s speech and language development</td>
<td>1</td>
<td>21</td>
<td>0</td>
<td>27</td>
<td>1</td>
<td>2.90</td>
<td>2.33</td>
</tr>
<tr>
<td>6</td>
<td>I am knowledgeable about my child’s condition and its effect on speech and language development and the role of a speech and language therapist in assessment and diagnosis</td>
<td>29</td>
<td>20</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>4.52</td>
<td>4.05</td>
</tr>
<tr>
<td>7</td>
<td>Speech and language therapy can help reduce the communication and swallowing difficulties arising from cerebral palsy</td>
<td>12</td>
<td>10</td>
<td>0</td>
<td>13</td>
<td>15</td>
<td>2.82</td>
<td>2.70</td>
</tr>
</tbody>
</table>

Weighted mean=3.711.
shows a notable lack of awareness among some participants regarding the potential benefits of speech therapy for individuals with cerebral palsy. A small percentage, 1 (2%), express optimism about their child’s future due to advancements in speech and language therapy, while 23 (46%) express optimism due to greater social acceptance. The mean score of 3 suggests a somewhat neutral perception. This indicates a mix of sentiments regarding the perceived impact of advancements in speech therapy on the future of individuals with cerebral palsy. While 20 (40%) of respondents have a positive perception towards speech therapy for individuals with cerebral palsy, 27 (54%) have a neutral to negative perception.

The mean score of 2.4 indicates a somewhat neutral stance on average. This shows a diversity of perception SLT for individuals with cerebral palsy. About 17 (34%) of respondents express mixed feelings about how a cerebral palsy diagnosis would affect their child and family. The mean score of 3.34 suggests a moderate level of mixed feelings. This implies a complex range of emotions and considerations related to the impact of a cerebral palsy diagnosis. Overall, with a weighted mean of 2.89, the findings of the study show that parents of children with cerebral palsy have a poor perception of speech-language therapy.

**Research Question 3**

What are parents’ prevailing attitudes towards speech and language therapy in enhancing their children’s overall quality of life and communication skills with cerebral palsy?

Table 3 shows the weighted mean of 2.94 out of the maximum obtainable score of 5.00, which is lower than the standard mean of 3.00. This implies that the attitude of parents of individuals with cerebral palsy towards speech and language therapy is poor. Similarly, 19 (38%) of respondents strongly disagree, and 11 (22%) disagree that speech therapy wastes time and would not significantly improve their child’s condition. The mean score of 2.56 with a standard deviation of 2.45 suggests a more varied range of opinions on this statement. 29 (58%) believe that speech therapy is not a necessity but rather a choice for parents with children with cerebral palsy. The mean score of 3.34 with a standard deviation of 3.05 indicates a somewhat ambivalent stance on the
Parents' Knowledge, Perception, and Attitudes Towards Speech Therapy

The knowledge of speech and language therapy possessed by the parents of individuals with cerebral palsy is crucial for effectively managing and developing communication skills in children with this condition. Research has shown that parents often lack adequate knowledge about cerebral palsy and its associated speech and language interventions [14, 26, 27]. This knowledge gap can delay seeking appropriate interventions and hinder speech and language development in children with cerebral palsy [14]. Studies have emphasised the importance of empowering parents with knowledge about cerebral palsy from the time of diagnosis, as it can lead to early initiation of intervention therapy and better adherence to treatment [27]. Furthermore, involving parents in workshops and educational programs has positively impacted their knowledge and understanding of cerebral palsy, leading to improved outcomes for their children [11, 28].

Speech and language therapy plays a significant role in maximising the communication skills of children with cerebral palsy [29]. However, it has been noted that there is limited understanding among parents about the specific speech and language interventions available for children with cerebral palsy [30]. This lack of awareness may hinder the effective utilisation of speech therapy services and the implementation of home-based strategies to support communication development.

The result suggests a mixture of parents' sentiments regarding the impact of advancements in speech therapy on speech development among individuals with cerebral palsy. Parents' perception towards speech and language therapy for children with cerebral palsy is crucial for understanding the efficacy and acceptability of therapies. The importance of speech and language therapy in enhancing communication skills among children with cerebral palsy cannot be underestimated [30]. Moreover, Vargus-Adams (2011) [31] proposed that treatment may influence the overall welfare of parents of children with cerebral palsy by providing insight into the stress experienced by caregivers.

Nevertheless, there is a scarcity of studies examining therapy's efficacy in enhancing speech comprehensibility in these children [29]. According to Smith and Hustad (2015) [21], children diagnosed with cerebral palsy who possess superior receptive

**Table 3: Frequency Distribution Showing Total Participants who Possess an Attitude of Speech and Language Therapy Towards Children with Cerebral Palsy**

<table>
<thead>
<tr>
<th>S/N</th>
<th>Statement</th>
<th>SA</th>
<th>A</th>
<th>U</th>
<th>D</th>
<th>SD</th>
<th>Mean</th>
<th>Std Dev.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>I believe that speech therapy is just a waste of time as it will not in any way improve the child's condition</td>
<td>9</td>
<td>9</td>
<td>2</td>
<td>11</td>
<td>19</td>
<td>2.56</td>
<td>2.45</td>
</tr>
<tr>
<td></td>
<td></td>
<td>18%</td>
<td>18%</td>
<td>4%</td>
<td>22%</td>
<td>38%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>I believe that speech therapy is never a necessity but a matter of choice for parents with children with cerebral palsy</td>
<td>13</td>
<td>16</td>
<td>2</td>
<td>13</td>
<td>6</td>
<td>3.34</td>
<td>3.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td>26%</td>
<td>32%</td>
<td>4%</td>
<td>26%</td>
<td>16%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Speech therapy is stressful for me as it takes time, consistency, and perseverance</td>
<td>13</td>
<td>22</td>
<td>3</td>
<td>9</td>
<td>3</td>
<td>3.66</td>
<td>3.30</td>
</tr>
<tr>
<td></td>
<td></td>
<td>26%</td>
<td>44%</td>
<td>6%</td>
<td>18%</td>
<td>6%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>I believe that speech therapy is very effective for the speech development of children with cerebral palsy</td>
<td>12</td>
<td>14</td>
<td>2</td>
<td>12</td>
<td>10</td>
<td>3.12</td>
<td>2.8</td>
</tr>
<tr>
<td></td>
<td></td>
<td>24%</td>
<td>28%</td>
<td>4%</td>
<td>24%</td>
<td>20%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Integrating speech and language therapy into the daily routine of my child with cerebral palsy presents challenges.</td>
<td>20</td>
<td>21</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>4.04</td>
<td>3.70</td>
</tr>
<tr>
<td></td>
<td></td>
<td>40%</td>
<td>42%</td>
<td>6%</td>
<td>6%</td>
<td>6%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Weighted mean= 3.34.

necessity of speech therapy. 22 (44%) find speech therapy stressful due to its time, consistency, and perseverance requirements. The mean score of 3.66 with a standard deviation 3.30 suggests a moderately high level of perceived stress. Some respondents, comprising 12(24%), strongly believe, while 14(28%) agree that speech therapy effectively addresses speech development challenges in these children. The mean score is 3.12, indicating the average level of agreement with the statement among respondents.

20(40%) find integrating speech and language therapy into the daily routine for their child with cerebral palsy challenging. The mean score of 4.04 with a standard deviation of 3.70 indicates moderate perceived challenges in integrating the therapy.
language abilities are more likely to develop effective means of communication that parents can comprehend. This finding may have implications for the perception of speech-language therapy among parents. Masood et al. (2021) [10] found that speech therapy combined with traditional speech treatment was useful for children with cerebral palsy. This highlights the interconnectedness of these children's communication skills and overall behavioural and emotional well-being, which may influence parental perceptions of speech-language therapy.

The involvement of parents in assessing their children's speech is crucial in understanding the effectiveness of interventions and the challenges faced by both the children and their caregivers. The Viking Speech Scale was developed to classify the speech of children with cerebral palsy, involving speech and language therapists, healthcare professionals, and parents [9]. This demonstrates the active participation of parents in speech therapy assessments. A comprehensive analysis of early intervention speech and language services received by children with cerebral palsy was conducted by incorporating data collected from parents about how children with cerebral palsy perceive their children's communication [21]. This highlights the importance of considering parental perspectives in evaluating the effectiveness of speech and language therapy.

Pennington et al. (2019) [11] found that parents reported improvement in communicative participation following an intensive program of dysarthria therapy for their children with cerebral palsy. Additionally, parents of children with speech difficulties associated with cerebral palsy were involved in advising on the overall design of a study and selecting the primary outcome measure of speech intelligibility, indicating their active participation and interest in the therapy process [11]. Nevertheless, it is crucial to acknowledge that unfavourable views towards individuals with cerebral palsy and other disabilities held by healthcare professionals may influence the quality of care provided to them [21]. Healthcare personnel must recognise and confront any biases or negative attitudes that could affect the quality of care given to individuals with cerebral palsy.

CONCLUSION

Most stakeholders required for the successful implementation of speech therapy, particularly parents, are yet to fully appreciate the relevance of adequate perception and attitude to speech therapy practices. This, among all other things, has made speech therapeutic goals seem problematic and unachievable. The findings of this study highlight the connection between parental knowledge, perception, and attitudes towards speech and language therapy for children with cerebral palsy. The findings revealed that parents generally understand speech therapy, recognising their role in therapy sessions and the significance of early intervention. However, there are differences in awareness regarding aspects of treatment.

Parental perceptions towards speech therapy vary; some acknowledge its benefits, while others express doubts or lack awareness. Attitudes towards the impact of advancements in treatment and social acceptance also differ. Parental attitudes towards speech therapy display diversity; some view it as valuable and effective, while others find it stressful or unnecessary. Integrating therapy into routines poses challenges for certain parents.

On these premises, this study conclusively maintains that to address these challenges individuals with cerebral palsy face. There is a need for these stakeholders to be thoroughly grounded in the imperativeness of good perception, knowledge, and attitude towards making the goal and dream of speech therapy achievable and realisable. This research emphasises the necessity for improved education and support for parents to enhance their comprehension of the benefits of therapy and address concerns. Collaboration among healthcare professionals, therapists, and parents is crucial to providing tailored therapies and improving access to care for children with palsy. Ultimately, this study aims to enhance the quality of life for individuals with cerebral palsy and their families by addressing knowledge gaps and improving accessibility to effective therapies.

LIMITATIONS

This study, while informative, has its limitations. First, the sample size of fifty parents from a specific region may only partially represent the diverse range of experiences and perspectives of parents of children with cerebral palsy across different demographics and locations. Additionally, purposive sampling may introduce bias, as participants were selected from specialised institutions in one urban area, potentially skewing the results.

Furthermore, the reliance on self-reported data through questionnaires could be subject to response
bias, with participants possibly providing socially desirable answers or misinterpreting questions. The study's focus on a specific geographic area, the Ibadan metropolis in Nigeria, may limit the generalizability of its findings to a broader context, as cerebral palsy and its management can vary across regions and healthcare systems.

The cross-sectional design used in the study provides a snapshot of data at a specific point in time, and a longitudinal approach might offer a more comprehensive understanding of how parental knowledge, perception, and attitudes toward speech and language therapy evolve. Moreover, the study primarily used subjective measures and self-assessment scales to assess parental knowledge, perception, and attitudes, which may only capture some relevant aspects of their perspectives. Another limitation is the absence of qualitative data, such as in-depth interviews or focus groups with parents. Qualitative insights could have provided a richer understanding of parents' experiences and perspectives. The study did not extensively explore cultural and contextual factors influencing parental views on therapy services, which could significantly shape their perspectives.

Lastly, social desirability bias could affect the accuracy of the results if participants provide responses they believe are aligned with perceived expectations or socially acceptable. Addressing these shortcomings in the future will lead to a deeper understanding of this research topic.

**FUNDING**

This work was supported by the South African Research Chairs Initiative of the Department of Science and Innovation and National Research Foundation of South Africa, South African Research Chair in Education and Care in Childhood, Faculty of Education, University of Johannesburg, South Africa (Grant number: 87300, 2017).

**REFERENCES**


