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The History of Logopaedics in Bulgaria: Challenges from a Global European Union Perspective

ABSTRACT: The present article summarises the specialised literature related to foundation of logopaedics and the key stages of its development in Bulgaria. Five main stages in development have been identified: the first “pseudo-medical” period, the second period marked by first individual steps, the third period of formative years (<1900–1945), the processing period (1945–1989), and the contemporary transition period (1989–present). Challenges from a Global European Union Perspective are also described and analysed. Students training in the field of logopaedics as well as research and international collaboration are an essential part of the article. It could be said that the history of the discipline and education in logopaedics in Bulgaria is a relatively young yet dynamic and growing field.

KEY WORDS: logopaedics, speech language therapy, history, development, Bulgaria

Introduction

Human communication and its disorders have been studied around the world for millennia. Scientists, philosophers, and others have explored the origins of human language since ancient times. It has only been in the last century that the field has become formalised into a scientific discipline. The present article is summarising key developments in the field in Bulgaria. The intent is to pay attention to important advances in other parts of the world and try to understand how communication disorders have been interpreted.

Speech language therapy (SLT), known as logopaedics in certain European countries including Bulgaria, is an internationally respected profession much to the credit of clinicians and researchers who continuously aim to improve quality of life for individuals with communication and swallowing disorders.

Historical background

The iconographic data showed that the period of the Middle Ages in Bulgaria is characterised by high morbidity, frequent and severe outbreaks of diseases and psychophysical disabilities. The church paid special attention to persons with: (i) mental disorders (*rabid and insane*), (ii) sensory disorders (*blind and deaf*), (iii) speech pathology (*dumb and “logopathic”*), and (iv) motor disorders (*crippled, limping, disabled, and paralytic*). In descriptions of the lives of the saints of this period, it has been noted that some clergymen were medically treating patients (later some physicians were canonised).

As defined by Prof. S. Mutafov (1992, pp. 97–98), “medical iconography” refers to main information sources represented by miniatures, paintings, carvings, prints, and fittings. Icons provide information from birth to death and include details about the anthropological and ethnographic characteristics of the era. Iconographic sources provide information about normal morphology and psychophysical development, but also describe the existing medical doctrine, sanitation, scenes and images of the treatment of sick people, and the type of care for persons with disabilities. Based on hagiographic material the Orthodox Church, icons and paintings, one can define concepts of a doctor and a healer (Mutafov, 1992; Todorova, 2015).



FIGURE 1. St. Panteleimon, one of the saint healers in the Eastern Orthodox religion, as depicted at the Rila Monastery in Bulgaria

SOURCE: Courtesy of Prof. R. Orlikoff.

Mutafov (1992) reported that 4 gospels describe 50 cases of healings made personally by Christ and so-called saints-healers such as St. Nicholas, St. Mina, St. Ekaterina, St. Kozma and Damian, St. Spyridon, St. Panteleimon, and others.

The authors classified different groups of conditions treated by the saint healers, including psycho-neurological diseases, sensorimotor disorders, speech disorders (stuttering), persons with cerebral palsy, etc.

Purpose of the study

This article summarises literature sources related to the foundation and the key stages of logopaedics development in Bulgaria. The study is a theoretical overview of the existing historic sources and published literature during last 100 years.

Methods

The historical approach was used. It includes biographical, ethnographic, iconographic, and archives analyses.

Discussion

Five main periods related with foundation and historical development of logopaedics in Bulgaria were identified.

The **first period** is associated with the “treatment” of quacks, medicine women, fortune-tellers, conjurers, imams, priests, monks, and healers. These all tried to use various pseudo-medical ways to eliminate the communication problems. One example was sending the kids to pee over a special white stone. The next case was described by the famous Bulgarian writer Yordan Radichkov (1988): “When some little child from my birth village had speech difficulties (e.g. Language delay) they gave him to drink water from a bell. After dinking it the child started to speak with ringing voice.”

The above description of “medical” techniques was observed during and after the long years of Turkish domination (500 years from 14th to 19th century).

Due to big changes in everyday life in Bulgaria towards the end of the 19th century, especially after the Russian–Turkish war in 1878–1879, ordinary people could afford more professional treatment of speech disorders.

The **second period (first individual steps)** includes individual attempts from the end of the 19th century and the beginning of the 20th century when people became more interested in the ideas of the Enlightenment and started attending to the education of children. Some pedagogues and medical workers tried individually to find ways to correct stuttering (Andreev, Dr. Tonchev, Tomov, and Vodenicharov). They had no special theoretical and practical training in the field of communication disorders, but were very well trained specialists in the field of education and/or medicine.

D. Andreev (1864–1967) was a giant in the profession of logopaedics in Bulgaria (Stamov, 1989, p. 91).



FIGURE 2. Dimitar Andreev (1864–1967) and his wife Stefana

SOURCE: Courtesy of Prof. R. Orilkoff.

He served as a crucial bridge between Western European and Russian schools at the end of 19th century to the 1930s. Andreev received his educational degree in 1884 in Edirne high school (Turkey), at which time he began his distinguished 40-year career in teaching, retiring in 1927. He entered the field at a time when in Europe there was considerable interest in new theories and approaches to the management of speech, language, and hearing disorders. Andreev translated the article “Заикание и его лечение” written by the Russian Андрес (1894) and

published it with revisions and comments in the Bulgarian journal *Училищен преглед* (Andreev, 1897). Andreev was also strongly influenced by representatives of German and Vienna schools, such as Liebmann, Gutzmann, and Froeschels.

In 1893, Andreev specialised as a teacher in Chur, Switzerland and started to promote stuttering treatment, drawing from various international sources. Between 1895 and 1900 he offered the first logopaedics treatment courses for children with stuttering in Kazanluk, Bulgaria (Georgieva, 2009).

Andreev's professional career was developed under the strong influence of the leading European school. It is important to note that, following five centuries of Turkish influence and economic dominance, Bulgaria's development was slow and chaotic before suffering the cruel consequences of the First World War. The years of the Andreev's active professional career coincided with this severe historical and economic period of the Bulgarian development.

The **third period (formative years <1900–1945)** is a period of systematic care for children with communication disorders related to the activities of Ferdinand Urbih in Bulgaria (1861–1945) and some Bulgarian specialists working in the logopaedics field. Urbih was a qualified German pedagogue on hearing impairments, and he came to Bulgaria as a theoretically trained surdo-pedagogue. He founded the first school for deaf-mute children in 1898. In 1906, the private school was transformed into the State Institute for the Deaf, with Urbih serving as its first director. It is interesting to note that in 1906 Urbih published a special report concerning this school's activities in the country for the period from 1898 to 1905. It was a report to the Minister of Education in Bulgaria. In the report he mentions his experience with individual cases of the rehabilitation of deaf children, as well as children with stuttering and with language disorders. It is as late as in 1904 that there was the first mention of logopaedics in Bulgaria and, from that period on, interest in communication disorders increased markedly. This period is also associated with works of the next Bulgarian logopaedists: Mednikarov, Kazakov, Schminkov, Ivanchev, Drumev, Georgiev, Traikov, Traikova, Slavova, and Dobrev, who were trained abroad, primarily in Russia, Germany, and Austria.

A teacher of the deaf, Kandov also performed very important work with hearing impaired children. He was a teacher and later became a Director of the Deaf Institute in Varna (1927–1937) and in Sofia (1938–1945). In 1930 he started to explore more communication disorders outside the area of hearing.

Another special educator, Prof. Denev started his activity as a teacher of the deaf in 1930 in Varna, and from 1939 on he pursued a scientific career. He earned a PhD and later became a full professor in Special Education at Sofia University. Later he was head of the Department of Special Education at South-West University in Blagoevgrad.

The **fourth period is the processing period (1945–1989)**. After 1945, the logopaedical care system in the country was totally reorganised. In 1952, in addition

to the Scientific and Research Institute in Neurology and Psychiatrics, Assoc. Prof. Dimitar Daskalov and Lidia Stoyanova (1901–1988) opened the first logopaedics room in a clinical setting (Ivanov, 1973, p. 38). During the 1945–1968 period, Stoyanova became one of the first pedagogues involved in stuttering and aphasia treatment in Bulgaria. Her achievements and merit for organisation and enlargement of the logopaedic service for different age groups of clients with communication disorders are indisputable.

Stoyanova was involved later as a speech-language pathologist and worked for a long period as a part of Daskalov's team. She started her career as a teacher of mentally retarded children (from 1923 until 1953). As a humanist, she had a special interest in the training of children with different communication disorders and disabilities. In 1924, she specialised in Paris and Brussels. In Belgium, she met the philanthropist Decroly and was trained to apply his global reading method. Later, she implemented Decroly's method in her practice in Bulgaria based on children centres of interest and educative games. In Rome in 1930, she was one of the first Bulgarians trained in Maria Montessori's child-centred educational approach method based on the scientific observations of children.

Daskalov and Stoyanova offered the first course on stuttering treatment for adults who stutter in 1953, at which time both specialists began to offer training for logopaedists outside of the university system. In 1954–1955, Daskalov established a special division of logopaedics within the Research Institute of Neurology and Psychiatrics at Pavlovo, Sofia. Maintaining a leading role in stuttering research related to the pharmacological treatment of adults who stutter, in 1961 Daskalov obtained a M.D. degree with a dissertation entitled: "The base principles and methods of stuttering treatment"; in 1974 he defended a second dissertation on pharmacotherapy. His studies on stuttering pharmacotherapy method were very popular in Eastern Europe (Van Riper, 1973, p. 162). From 1974 through 1976, he maintained an appointment as a professor in logopaedics at the Pedagogical Faculty of Humboldt University in Berlin, Germany.

The first speech therapy room in educational setting in Bulgaria was opened in 1952 in the capital, Sofia, where, two years later, the first logopaedical school was established.

In 1960, Prof. Maximov – an internationally recognised voice specialist – obtained a PhD degree with an emphasis on functional aphonias and their treatment. He established the field of phoniatics in Bulgaria in 1952 with his article "Functional paralysis of musc. Transverses larynges." Maximov was also a founder and member of the Union of European Phoniaticians and was awarded the Hermann Gutzmann medal. His research was popular and continued to be very influential in many European countries, such as Russia, France, Italy, Germany, and Bulgaria (Maximov, 1981).

The processing period is marked by the start of university training in special education in 1959 at Sofia University at the Faculty of Philosophy and, in

1986, at South-West University in Blagoevgrad. This period is associated with the teaching and research activities of Mutafov, Angushev, Dobrev, Denev, Stamov, and Miliev, as well as other Bulgarian university lecturers who worked to establish student training in the so-called defectology (special education) specialty at these universities. Prof. Mutafov (1925–2010) was the first head of the section of defectology within the Department of Pedagogy at the Faculty of Philosophy at Sofia University, founding the first Department of Defectology there in 1987. Unfortunately, while student training included two or three basic courses in communication disorders, the emphasis remained on special education. The Bulgarian educational model employed the ex-Soviet Union tradition during this period. Logopaedics was classified as a part of special education, and logopaedists were considered teachers. It caused the isolation of Bulgarian logopaedics from the European tradition for the ensuing 45-year period. Logopaedics understood as a profession did not exist in the national classification of the professions and, as a specialty, was regarded to be a part of special education (defectology) with a main orientation towards the assessment and treatment of children with communication disorders. Logopaedics was thus very well established in the state educational system; as a consequence, adolescents and adults were largely isolated from logopaedics treatment.

The **fifth period** of Bulgarian logopaedics development is the **contemporary transition period (1989–present)**. During the period of transition, Bulgarian logopaedics lost its ideological bases and began to be influenced by the behaviour model of communication disorders. The tendency for logopaedics to be treated as a health profession specialty was reborn in the beginning of the 20th century (Georgieva, 2000a; 2000b; 2010, Georgieva et al., 2014).

In 2002, after achieving positive evaluation and accreditation, two state institutions – South-West University and Sofia University – created a new major, “pure” logopaedics, outside of special education. In 2009 SWU received the first positive accreditation of logopaedics specialty in public health professional area for the 3 training levels: BA, MA, and PhD. In 2014 New Bulgarian University (a private institution) also obtained a positive accreditation of logopaedics specialty in public health area. In 2017 Medical University at Varna also provided student training in logopaedics in public health area (for BA students) after very successful evaluation and accreditation. Georgieva (2010) identified that all SLT programmes in Bulgaria must improve the quality of programmes to guarantee the excellence of professional education by:

- creating continuing education programmes, workshops, and seminars;
- extending the traditional role of SLT and developing new communication sub-specialisations grounded upon evidence-based practice concept;
- putting a special accent and emphasis on Medical SLT and also increasing attention to cultural and linguistic diversity; and
- conducting research.

There has been more recent growth in the field of communicative disorders in Bulgaria. As in the USA, these areas of practice include augmentative and alternative communication and various methods of communication that implement technology (e.g., picture boards, computer screens, speech generation devices), attention deficit / hyperactivity disorder, learning disability, cluttering, and autism spectrum disorder. In the present century, speech language therapy is a dynamic and dramatically growing field in the world. That is why in Bulgaria the challenges in a Global European Union Perspective are related with:

- increases in the scope of practice (logopaedists must develop a broader scientific understanding and maintain competency in a huge range of disorder areas, and university programmes must provide broad-based academic and clinical education);
- a lack of logopaedics care in a clinical setting for people over 15 years of age (medical speech language therapy needs to be developed as well as involvement of numerous new areas like swallowing / dysphagia, infant feeding / nutrition, respiratory dysfunction, etc.);
- a lack of health organisations / institutions / clinical units / hospitals that offer specialised logopaedics diagnostics and therapy (in Bulgaria, logopaedics care continues to be well developed only in the educational setting, such as schools, kindergartens, and partially in the recently opened daily care social and resource centres);
- limited development of private practice (there are no still regulations of that process); and
- a shortage of professional specialists in logopedics (one Bulgarian logopaedist has to take care of 16.000 people; to compare, in Belgium, for example, which is similar to Bulgaria in territory and population, the proportion is 1:900).

Students training in the field of logopaedics

In Bulgaria, logopaedists were trained within the framework of special education training programmes. However, in 2009, South-West University (SWU) established the first logopaedics programmes (at the BA, MA, and PhD levels) within the area of public health in Bulgaria. In 2013/2014 the New Bulgarian University in Sofia and in 2017/2018 the Medical University in Varna also developed logopaedics in public health field.

The Bulgarian Society of Logopaedics has not established standards for the education (and continuing education) of speech therapists yet. In the European Union countries, CPOOL standards and the IALP revised guidelines for the initial training of students in speech language therapy (Cheng, 2006; 2010) have been

accepted. There is no Council for Clinical Certification, and there are no implemented standards for clinical supervision (as there are in the USA). Guidelines for student training in logopaedics have been developed individually by each university (according to IALP standards first published in 1995). According to the IALP guidelines (Cheng, 2010), the BA degree programmes at the three Bulgarian universities include linguistic, behavioural, biomedical, and ethical issues courses. In addition, all types of communication disorders courses are covered in the curriculum. The total number of hours related with obligatory, elective, and facultative courses is between 2200 and 3000 hours spread over 240 credits (Georgieva, 2010; Georgieva et al., 2014). The practical work includes observations, clinical practicum, and clinical state practice ranging between 400 and 600 hours.

Research and international collaboration in logopaedics field

Limited long-term sustained research in several areas of logopaedics has been carried out in Bulgaria. The focus of the research topics concerns primarily hearing, fluency, child language disorders, and articulation disorders (Georgieva, 1998; 2001). There are still no PhD studies on adult neurologic language disorders, voice disorders, cleft palate, cluttering, dysphagia (swallowing disorders), and communication problems in emotional-behavioural disorders or specific learning difficulties.

During the last decade we observed an increased interest in communication disorders involving cochlear implants, autism spectrum disorder, and stuttering-cluttering as fluency disorders. Bulgaria was the host organiser of the First World Conference on Cluttering (Bakker, Raphael, & Myers, 2007). The research team from South-West University started with the IPATS project (1999–2007), an international initiative launched in 1999 by Kenneth St. Louis. The project incorporated long range objectives and initial planning for a collaborative international project to design a public opinion survey instrument on fluency disorders. The purpose of the instrument was to collect data on cross-cultural beliefs about stuttering (and cluttering), attitudes toward those who stutter, and the culture-specific nature of information on stuttering and cluttering (St. Louis et al., 2011).

The Bulgarian researchers are part of European scientific and educational programmes such as: COST actions (TD1309) – *Play for Children with Disabilities 2014–2018* (LUDI), NetQues project – *Network for Tuning Standards & Quality of Educational Program for Speech Language Therapists in Europe* 2010–2013, 177075-LLp-1-2010-1-FR-EARSMUSENWA <http://www.netques.eu/>, developed by Standing Liaison Committee of Speech and Language Therapists / Logopedists in the European Union (CPLOL).

The specific modern infrastructure of research in communicative disorders is still not well founded, but the first steps have been taken. In 2003–2004, South-West University, the Ministry of Education, and the World Bank initiated a 2-year project, *New educational technologies in the students training in Logopedics* (project number 12069). Later, in 2005–2006, the South-West University Stuttering Research Centre obtained a grant by the National Scientific Research Fund for unique scientific equipment – a computerised speech lab (CSP) – *contract project Д01-421/22.12.2005*.

International collaboration within Erasmus and Erasmus+ European Union programme began in 2003 in the area of logopaedics, resulting in the current effective cooperation with more than 15 EU universities, including Poland (Instytut Języka Polskiego im. Ireny Bajerowej, Uniwersytet Śląski w Katowicach).

Bulgarian universities and especially South-West University established partner projects with universities in the USA to create unique, international collaborations within Fulbright and Erasmus+ programmes to disseminate research and evidence-based practice in Bulgaria. The goal of such international collaboration was to improve overall competence of Bulgarian logopaedists by increasing knowledge and skills within the areas of fluency disorders and voice disorders. Seven institutions across the USA have collaborated with South-West University in Blagoevgrad, Bulgaria within Fulbright and Erasmus+ programmes: Michigan State University, East Carolina University, the University of Pittsburgh, West Virginia University, Vanderbilt University, the University of Cincinnati, and Minnesota State University-Mankato. A total of 39 members of academic staff, administrative staff, and students completed successful collaborations for the 4-year period between 2017 and 2020. The main purpose of the cooperation was to provide continuing education for students and university lecturers to increase their knowledge and skills in the areas of communication disorders.

Students had the opportunity to gain culturally and linguistically diverse perspectives as they relate to European / American culture and the field of SLT abroad. These students were exposed to different billing models, an international perspective, and a smaller scope of practice that focuses on school-aged children.

Administrative exchange has provided department chairs and programme directors, along with staff members who oversee international affairs, who learn about functioning of American and European institutions (Georgieva, Spray, Yaruss, Orlikoff, & Deliyski, 2018).

Conclusion

To summarise, it could be said that the history of the discipline and education in logopaedics in Bulgaria is relatively young, but it is a dynamic and growing field. Consequently, the clinical aspect of logopaedics has not yet made a sufficient impact on the general public. No speech clinics have been established in Bulgaria. There is no law recognising the specialty of logopedics. There is a pressing need to remodel the existing educational and research infrastructure at the Bulgarian universities to guarantee special facilities for IT format provision (Georgieva, Stoilova, 2018).

As Cheng (2006) wrote, “The development of Speech Therapy education differs from area and from region to region”. Bulgarian logopaedics is facing a major challenge of modernisation, related to recognising its status as a scientific applied major on one hand, and as a health profession on the other. At present, all efforts remain concentrated on the future development of Bulgarian medical SLT and on putting it on the European map of countries in the area of health professions.

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