ISSUE/NGÁ TAKE 40 SPRING/KÓANGA 2020

communication

Using Tikanga in your Practice Unlocking Prisoner Potential • Ngā Whāriki Kōrero

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Cover: Photo kindly gifted by Whakatōhea iwi and Talking Matters, depicting their partnership in Ōpōtiki. We will be running a feature about Whakatōhea and their journey of revitalising te reo Māori, in our Summer Issue.

Please contact the editor with your ideas at any time and we will endeavour to accommodate them in the next edition. Send to editor@speechtherapy.org.nz

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From the president Nā te tumuaki

Annette Rotherham president@speechtherapy.org.nz

The past 3 months have been full of celebrations. Our 2020 AGM celebrated all the mahitahi within the NZSTA membership over the past year. Again I thank all the area reps, our private practice rep, and our student reps who contribute time and energy and show leadership in their daily work representing NZSTA. Despite challenging times during COVID-19's disruptions to our daily lives and work environments, it was important to acknowledge achievements in research, student supervision, and ambassadorship, through the NZSTA awards and grants. We were very proud to award Brooke Dibley the 2020 Ambassador Award, and Fiona Dominick from Whakatane, the 2020 Clinical Field Supervisor Award.

It has been a huge milestone to launch the 2025 Strategic Plan, which you will have received with your Winter edition of *Communication Matters*. We carry on the mahi of the past NZSTA Board from 2015 and take this plan to the next level with the incorporation of the NZSTA Values of Whanaungatanga, Aroha, Kotahitanga and Rangatiratanga. We want to live



Left:

Annette Rotherham on a Beehive Tour during the school holidays. these values and embed them into our practice. We are focusing on one value per year for raising awareness. Awareness week 2020 has the theme of Whanaungatanga – Get connected, Be connected, Stay connected during a "week of connection" 7–13 September, we look forward to seeing how creative you are with this theme.

Finally, we announced our new Board with three newly elected members to join our hardworking team. Katrina McGarr (Ngāi Tahu) has been elected to Māori and Cultural Development, Emma Quigan (Ngāi Tahu) has been elected to Communications and Akshat Shah has been elected to Member Networks. We farewelled lodi White who served six years in the Member Networks portfolio and has demonstrated huge leadership, commitment and support to members. We also acknowledged Shannon Hennig who came on board for ten months and worked hard in the Communications role through difficult times for the Association. Ngā mihi nui to you both.

The future is looking bright and I am so looking forward to being able to meet in person in September as a board and to plan for the coming 12 months.

Annette



NZSTA Happenings

Some of our recent Association happenings at a glance...



What we have done

Achievements for the profession of speech-language therapy 2015–2020



Increase in membership numbers from 650 to 900 (40% increase)



Establishment of the Kaumātua role and the development of our own NZSTA Kaupapa



Self regulating / self governing profession with Annual Practising Certificates



Establishment of a Consumer reference group and the consumer lead position

Recount / review

Many thanks to all the members who got in touch about our COVID-19 focussed issue. It was good to hear that the many resources shared were useful, and that we were able to continue the enormous generosity which emerged during our difficult months.

"It is really lovely to be part of NZSTA. We moved from South Africa to NZ in November 2019 and it's things, like reading *Communication Matters*, that really just made me feel included and so excited to continue my journey here, especially after the challenging COVID-19 and craziness of 2020 as a whole." Karla Roodt, CCDHB

The Winter 2020 issue is available on the **NZSTA website**.

Enormous apologies to Katrina McGarr, for the misspelling of her name throughout the Winter issue.





Feedback, ideas and contributions for *Communication Matters* are always very welcome. Consider also sending high-resolution photos of interesting aspects of SLT practice, which we can profile with a descriptive caption. Contributions can be lengthy or brief, and all add to lively körero.

Please contact editor@speechtherapy.org.nz

Board news



Introducing Akshat Shah, Member Networks portfolio holder

Akshat is an experienced, multilingual SLT based in Whangarei, Northland. He has held roles at the Ministry of Education, DHBs, and private practice, and has most recently been the NZSTA Area Representative for the Auckland region. He is passionate about supporting and engaging with SLTs across roles and regions.



Introducing Emma Quigan, Communications portfolio holder

Emma (Ngāi Tahu, Pākehā) leads a team of community activators for Talking Matters, partnering with whānau, iwi, communities and professionals to put an intentional focus on creating and enhancing rich language environments for babies. Previously, Emma held a position within Ministry of Education, focusing on professional development and sector capability. Emma is also studying for her Masters in Education at The University of Auckland.



Introducing Ashleigh Neumann, Private Practice Representative

Ashleigh is a paediatric speech and language therapist who runs Canterbury Speech and Language Therapy in the South Island. She has been in private practice for almost 5 years now, and also runs a private practice special interest group in Canterbury. She is an active NZSTA member, and an advocate for having that guidance, networking and professional safety they offer private practitioners. She is looking forward to meeting more of our wonderful members, and taking on the exciting projects that our last representative, Bridget, got underway during her term.

Podcast

Getting better: A year in the life of a Māori medical student

A great podcast I'm listening to at the moment that explores the themes of my article in this issue of CM, Emma Espiner's RNZ podcast 'Getting better: A year in the life of a Māori medical student'.

Hana Tuwhare



Te Reo o Te Kaumatua Nā Rukingi Haupapa

Rukingi Haupara, Kaumatua

Ngā mihi o te wā.

This issue of *Communication Matters* is our Spring or Kōanga issue. We put it together in the middle of winter, when it is cold and when most things are resting or sleeping. However, here in Aotearoa our indigenous culture and beliefs tell us something different.



The seasons are synchronised with the sun, moon, stars (e.g. Matariki) and planet earth. Māori, as do other indigenous groups of the world, base their tikanga (i.e. practises of living) on the knowledge and beliefs directly related and connected to the environment.

Winter (Hōtoke or Takurua) is the arrival of Matariki and a time to reflect on those we've lost and the things we've done. This is also the best time, while it is cold outside, to have wānanga inside to plan and scheme for the new year – do better and improve. Kōanga/Spring is the launching season for your 'Master Plan'. Things will warm up, plants and animals come alive, and everything busily flourishes.

What does all the above have to do with SLTs and NZSTA?

To me, having a tikanga or practise of reflecting on your work at least two times a year, one with Māori New Year with arrival of the Matariki star cluster in winter, and again at Christmas/New Year in Dec/Jan in summer, gives us excellent opportunities to improve and do things better. NZSTA's kaumātua Cultural Advisor, are available to help you and your work. He Kete Whanaungatanga is a resource group of Māori and non-Māori SLTs who want to include tikanga in their mahi to benefit clients. Many of the organisations that you are employed by also have Māori staff and resources to implement tikanga. There lies the challenge to you as SLTs, to use these.

NZSTA Week of Action, and Stroke Awareness weeks fall in Spring this year. Please share any activities you have been involved with this year.

One of my research findings was that 'whānau did not have a chance to meet other whānau who had been through the same horrible journey'. If you are thinking of doing something with Māori clients and whānau, please email me **kaumatua@speechtherapy.org.nz**. We are planning a number of Māori activities with whānau around the Bay of Plenty and love to connect with you and the people you work with.

Ka nui te pahupahu o te koroua nei, nareira me oti.

Kia ora pai koutou ki o koutou kāinga maha huri noa i te motu.

Nākū noa **Rukingi**

What is cultural safety?

Q and A with Katrina McGarr, Māori and Cultural Development Portfolio, Tūranga Kaupapa Māori

Cultural safety involves being aware of our own culture and beliefs, and how these can influence our interactions with patients and clients. By recognising our own personal attitudes and biases, we can begin to recognise differences in ourselves and the people we work with and alongside during a client's journey through our care. This awareness then allows us as clinicians to purposefully create environments in which our clients feel recognised, valued, and safe.



Can I use checklists to make sure I'm being Culturally Safe in my workplace?

Unfortunately, you can't. A checklist doesn't (and shouldn't!) exist as it would undermine the essence and true understanding of what makes a behaviour or practice tikanga.

How do I know then if I am incorporating tikanga into my practice as a SLT? How could I introduce more?

To apply tikanga, it is best to start with understanding "what is tikanga?" Tikanga are correct procedures or protocol underpinned by core values and practices that guide our behaviour in how we interact with others, ngā Atua (the Gods / personifications of the natural world) and the world around us. Tikanga protects what is tapu, as well as our health, our wellbeing and our dignity. Tikanga also creates processes to ensure we engage in ways where people are heard and respected. This is why some tikanga may seem common sense, such as washing our hands before and after preparing kai or not sitting on a table where kai is served.

To understand these restrictions, we need to explore the concepts of tapu and noa. Most people are already familiar with tapu, being sacred and protected; noa, in essence, is the complementary opposite. It is unrestricted or common and can lift the restrictions of tapu by way of a karakia (blessing or prayer), or by action (using water or eating kai). The protocol of tikanga that we follow has evolved from ensuring that tapu and noa remain separate to protect mana.

To further guide our understanding of tikanga, we must also consider the standards in which we aspire to; these are our values or ideals. Within these, guided by tapu and noa, customary expectations and values become more apparent, as does our deepened understanding of what makes them tika/true/correct.

Some of these values you may already be familiar with; such as:

Whanaungatanga

How we build and maintain relationships

Rangatiratanga

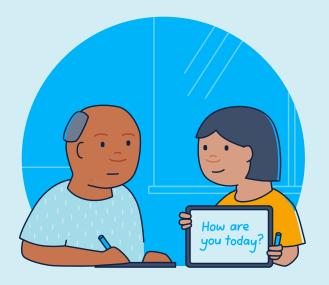
How we nurture and empower

Aroha

How we demonstrate empathy and compassion

Kotahitanga

How we work together to achieve a common goal



There are many more values that underpin tikanga, and what is important is to understand the values that drive you and how you relate to others.

My goal is for all SLT in Aotearoa to feel less threatened by the word "tikanga" or scared of "violating protocol", and to engage with the communities and people around you to start conversations on what tikanga means to each client and their whānau. I look forward to the opportunity for ako/reciprocated learning with all of you; whether it is supporting you on your own learning journey, or learning from your anecdotes, experiences, and wisdom.

If tikanga is something you would like to know more about, there are free courses available through Te Wānanga o Aotearoa; and I am always happy to kōrero and answer any pātai/questions. •

De-colonising and re-centering

Hana Tuwhare (Ngāpuhi), Community Activator for Talking Matters

I began a journey of decolonising and re-centering matauranga Māori (Māori knowledge) around the same time I was studying to be an SLT. During this time, I was introduced to Māori health and education frameworks but I struggled to apply these in a practical sense. It felt important to bring these conceptual frameworks to life in my practice as part of my own journey in re-centering matauranga Māori, but also as an equity issue as our education system has long been underperforming for our Māori tamariki and their whānau.

I took a deeper dive in my honours research and explored whakawhanaungatanga (relationship building) when working with Māori tamariki and their whānau. I knew relationships were fundamental



Photo credit: Talking Matters

to supporting our Māori whānau, but I wasn't sure how this looked in professional practice. So, I asked the people who were doing it: Māori SLTs (published research coming soon).

I felt like I was just scratching the surface with this exploration and knew if I wanted to get it right with our Māori whānau, I had a lot more learning to do. After completing my SLT studies I spent a year in a full-immersion te reo Māori: no English spoken, only te reo Māori from 9am – 3pm, 5 days a week. This was a year of living and breathing Māori ways of thinking, doing and speaking. The year was full of deep learnings and it affirmed to me that I wanted to work in an environment that valued matauranga Māori and supported the revitalisation of te reo Māori.

I now work with Talking Matters, a campaign to get everyone talking with babies and young tamariki under the age of three. As language, culture and identity are inextricably linked, the vision is that when young tamariki are wrapped in an environment rich in the language(s) and practices of their whānau and home they thrive as thinkers, learners and talkers who stand strong in their identity.

I was first introduced to Talking Matters as a student on placement. I spent a day on a marae with whānau who

were on a journey to create richer oral language environments for their young ones: Tamariki were running around, whānau were sharing their knowledge and kai as well as listening intently to kaumatua (elders) who shared pūrākau (ancient stories) that carried wisdom around parenting. They were relaxed, engaged, sharing and laughing - and it was all focused around building rich language environments. This was the kind of kaupapa I wanted to be around. The whanaungatanga was there, the engagement was there, the knowledge around building language was there. Since working with Talking Matters, I've gained a deeper understanding of key ways environments like this can be fostered.

Whanaungatanga

Whanaungatanga is about connecting. It's about creating ongoing reciprocal relationships developed through shared experiences and working together. Whanaungatanga puts whānau at the centre and creates space for people to speak from their heart, rather than what we might want to hear. Through this process of connecting, we gain a deeper understanding of whanau aspirations, barriers, and strengths. If there is one thing I've learned, whanaungatanga is the work. It's the work that allows us as SLTs to be responsive to whanau in the support we provide because there is a shared understanding, trust and respect. Taking the time to build relationships will always be worth it.



Photo credit: Talking Matters

Whānau to whānau coaching

Some whānau on the Talking Matters kaupapa become coaches or champions who support other whanau in their community. When whanau experience the impact on wellbeing when focusing on interacting, responding and talking with tamariki, they are empowered and excited to share that knowledge in culturally affirming ways with other whānau. Parents often look to people they trust for advice and information about parenting, particularly whānau and friends. A network of coaches is whanaungatanga in action and can provide a sustainable way to support many whānau in a connected community. This reminds me that as the SLT, my role can be to step aside, make space for the people we work with who know their communities.

Whānau-led

Māori are descendants of discoverers, explorers and innovators and our knowledge was used, and is still used, to traverse the unknown. Through a process of whanaungatanga we can gain a better idea of what that whānau are traversing and how to support them with our unique SLT skills. When we view whānau as explorers and innovators of their own journeys, we make space for them to take the lead. I'm inspired by the many whānau who take the knowledge around building language for tamariki and determine their own way forward in how it fits in to their lives. I am humbled by the knowledge and strengths that whanau inherently possess and it can be a powerful as an SLT to simply affirm what whānau know.

I am truly humbled by what whānau have to offer when we make the space for it and look forward to continuing the journey.

Ngā Whāriki Kōrero

Selena Donaldson, Editor

Dr Karen Brewer (Whakatōhea, Ngaiterangi) launched Ngā Whāriki Kōrero on 2 July 2020 at The University of Auckland and via Zoom. This is a beautiful kaupapa Māori speech language therapy package for whānau with communication difficulties caused by stroke. Karen talks extensively about how to use Ngā Whāriki Kōrero in the launch, the link to which is on the NZSTA website. The outcome of Karen's Health Research Council funded post-doctoral research, these resources began with the many, many hours Karen spent hearing the stories of Māori and their whānau after stroke. She went on to listen to the experiences of SLTs, Māori health specialists and Stroke Foundation community advisors.

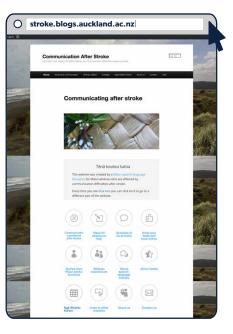
SLT online professional development modules. Available

from NZSTA, these courses provide foundational knowledge around the health context for Māori, and give specific information for therapy and working with our Māori Health colleagues.

Available on the **Online CPD website**.

2

The website provides a rich collection of video and written resources to help Māori post stroke understand what has happened and what to expect. Aphasia and speech-language therapy is explained, as well as ideas for beginning to rehabilitate in the early days. The three components of Ngā Whāriki Kōrero is available to download in pdf-form from the website.



3

The booklet, written especially for Māori and their whānau, explains stroke, aphasia and the roles of speech language therapy and communicationbased groups to help survivors with their communication. There is a strong focus on moving forward with aphasia, and it provides extensive ideas for enhancing recovery and suggestions for how whānau can help.

4

These two exquisite resources work in tandem. **Talking Mats** are an interactive resource with communication symbols depicting topics, options and a scale, placed in a manner explores feelings and opinions. **Ngā Whāriki Kōrero** helps the SLT or communication partner to build a successful relationship and hear about what is important to the person with aphasia and their whānau. Karen has distributed her resources across Aotearoa to each of our DHBs, sending numbers correlating with the proportion of Māori in each area. Please do feel free to contact Karen for further copies or download the pdfs from **the website**.

Communication After Stroke:

Information and support for Māori whānau with communication difficulties caused by stroke

By Karen Brewer, Clare McCann and Matire Harwood



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Ko Taku Reo: Deaf Education New Zealand: A new national service

Angela Wightman, Bronwyn Bailey, Claire Kinera, Delicia Coetzer, Judith Lemberg, Rosie Lamb, Sophie Te Awa

Exciting. Mad. Messy. Stressful. Some of the terms that described the first half of the year for Speech-language Therapists in Deaf Education. This has been a time of great change.

On July 20 2020, van Asch Deaf Education Centre and Kelston Deaf Education Centre will be no more, bringing to a close 140 years of van Asch and 62 years of Kelston. A new national organisation, Ko Taku Reo Deaf Education New Zealand, will take their place.

Consequently, we will have a national Speech-language Therapy service. Merging our separate services has been a huge learning curve. However, we are embracing this change and relishing the opportunity to have more collegial support and sharing of ideas. The lockdown provided an unprecedented opportunity to meet regularly via Zoom, something that was notoriously difficult when we were all travelling and at separate schools. We are taking this time to re-examine our practice. We will endeavour to provide a fair and equitable service to the 2000+ students who are deaf or hard of hearing within New Zealand, regardless of location and background. We want to champion bilingual and trilingual practice to the best of our abilities. We value New Zealand Sign Language as an integral part of Deaf culture and a language that should be available to all. We see deafness as a communication difference, not as a disorder.

This is a messy, mad, stressful exciting time. But it has the potential to be great. •

Ko taku reo taku ohooho, ko taku reo taku mapihi mauria My language is my awakening, my language is the window to my soul



Left: Collegial support and connection at Ko Taku Reo Deaf Education

Gwen Broadley, Life Member of NZSTA, passed away peacefully on June 8 aged 99

Gwen's family kindly shared memories of Gwen's speechlanguage therapy career, with Shannon Hennig, and we capture some here.

Gwen undertook SLT training in Christchurch in 1944 on completion of Teachers College. Unable at first to get an SLT position, Gwen taught in Blenheim until her son and daughter were born in 1947 and 1950.

In 1957, Gwen began work in a relief role at Grafton 2 Speech Clinic in Nugent Street, Central Auckland. Later describing it as a "floundering start" to her SLT career, Gwen gratefully benefitted from some 're-training' observing Nona Brooker's clinic. This experience had a profound effect, boosting Gwen's confidence, and providing a model for Gwen's later contribution to training new therapists. She learned the value of observation and the chance to work alongside those with specialist skills.

Gwen was a valued member of Glen Taylor School for 23 years until her first retirement in 1981. She later relieved for Special Education Service across Greater Auckland until finally retiring in 1998 aged 78.

Gwen developed professional skills as clinic-based SLT and (later) as supervisor in her role as Senior SLT under Val Lewis's leadership as District Head Therapist from Pukekohe to Kaitaia. Supervision enabled her to develop professional and personal relationships with many fine colleagues as she worked alongside them in their clinics and schools across the region.

Gwen served for many years in various roles in NZSTA; expanding her network of friends and colleagues while organising or attending workshops and conferences throughout NZ and, occasionally, Australia.

Many parents and children kept in touch with Gwen after retirement. She certainly left a lasting impression. In her rest home in Dargaville, despite the advancement of dementia, Gwen astounded a local doctor whose son had a lisp. Gwen switched on her professional persona: performing exercises and prescribing practice! She assured them the difficulty would resolve itself with practice. Next day, she had no recollection of the visit and her help.



Above: Gwen Broadley

Gwen, at 99, would have glimmers of her former life, and announce (in a tone of wonder) that she used to be a Speech Language Therapist! Once when shown a memorial sheet for Helen Flower, Gwen smiled and said, "Helen... she was a kind and good friend". Other names from the past still resonated, and mention of Val Lewis always brought a smile of recognition.

Communication has been at the forefront of all Gwen's professional and personal interactions. Gwen's main interest in life has always been people. Even when her conversations became very brief, and sometimes very muddled, she recognised the value of communication.

Gwen told everyone how lucky she is and what a long life she lived. As a Life Member of NZSTA we are so grateful for all Gwen contributed to SLT. •

Gender affirming voice and communication therapy

Fiona Dominick, Whakatane Hospital

Late last year, I attended a Midland regional hui in Hamilton, working to agree on a regional pathway for Gender Affirming Healthcare. Jack Byrne, Human Rights Consultant from TransAction, set the scene, reporting on the findings from the **'Counting Ourselves Community Report'**.

This was a survey with 1178 participants, conducted from in 2018. Participants were from all regions across Aotearoa. They were 45% Non Binary, 29% Trans men and 26% Trans women. Confrontingly, it revealed that **50% of Transgender women had an unmet need for voice therapy!** There were notable differences between gender groups' demand for voice therapy. While this demand was higher for trans women (61%) and lower for non-binary participants (18%), almost a third of trans men wanted voice therapy and very few had been able to access it (32%)."

countingourselves.nz/
index.php/community-report/

These findings were upsetting to me to hear. However, I reflected that as a SLT working in Aotearoa for 14 years, I had not carried out any Gender Affirming Treatments so how could I have suspected anything less? I felt that I am part of a system that was letting Gender Diverse People down and therefore I want to be part of the solution. After 8 years of playing Roller Derby (an inclusive sport with a strong Rainbow community), some of my closest friends were transgender men, transgender women and non-binary. It was time to start learning and growing a service that could meet their needs. The Professional Association for Transgender Health Aotearoa (PATHA) reports that "limited access to gender affirming healthcare has a negative effect on the mental health and wellbeing of people seeking to access them".

The reasons why people cited for not having accessed voice therapy included;

Don't know where to go 52%

Cannot afford this 46%

Do not know what to expect or not familiar with the procedures 21%

Afraid to 17%

Might be treated badly for being trans or non-binary 12%

Do not have confidence in the service provided 7%

It takes too much time 7%

Another reason 9%

The 'Guidelines for Gender Affirming Healthcare for Gender Diverse and Transgender Children, Young People and Adults in Aotearoa New Zealand'* state that "Speech and communication are fundamental to the way in which we express our gender." They acknowledge the SLT role in helping transgender and gender diverse people develop voice and communication that reflect their unique sense of gender and that this will likely lead to increased comfort, confidence, and improved participation in everyday life.

As Speech Language Therapists I believe that our role would be inclusive of explaining how the voice works, education on voice care and developing a personalised plan on how an individual wishes to express their gender. This could include working on any of the following parameters;

- Speaking Pitch
- Resonance
- Intonation
- Voice Quality
- Articulation
- Duration
- Eye Contact
- Facial Expressions
- Gestures
- Posture
- Touching

We should also have a wider community focus and increase awareness of the services we can provide and build relationships with key organisations such as Rainbow Youth, InsideOUT, Hui Takatapui committee, local support groups and other key providers.

As many of our Speech Language Therapy services across Aotearoa upskilling ourselves with the skills to provide a quality service to our gender diverse population, I look forward to the ways in which we can learn and share knowledge together. Perhaps some international webinars from SLTs experienced in Gender Affirming Healthcare and the formation of a national SIG will continue to propel us in the right direction.

Poipoia te kakano, Kia Puawai Nurture the seed and it will blossom



Guidelines for Gender Affirming Healthcare for Gender Diverse and Transgender Children, Young People and Adults in Aotearoa New Zealand

Above: Guidelines for Gender Affirming Healthcare downloadable from patha.nz/Guidelines

*Reference available on request.

66 Speech and communication are fundamental to the way in which we express our gender."

Engaging with community-living older adults about swallowing

Marie Jardine, PhD candidate at the University of Auckland

Our survey-based study was recently published in 'Dysphagia' about the swallowing and nutrition status of community-living New Zealanders aged 65 years and over.

Over 1000 adults aged up to 96 years old responded to our study invitation through community groups, such as Probus, SeniorNet, Grey Power and Rotary. The questionnaire included demographic information and two validated screening tools: Eating Assessment Tool (EAT-10) and Seniors in the Community: Risk Evaluation for Eating and Nutrition (SCREEN-II).

We concluded that increased prevalence of swallowing difficulties in older age is attributed to health conditions and medications, rather than ageing itself. We feel strongly that swallowing complaints from community-living older adults should not be ignored or attributed to the normal ageing process. This study supports routine nutrition screening in older adults, particularly those with risk factors. This project was part of my doctoral research yet was much more than an exercise of data analysis. It provided an important opportunity to engage with the focus of my research. The online questionnaire enabled community-living adults from around NZ to take part (not just those who lived nearby to a university).

Recruitment involved presenting at local groups, courtesy of supportive club organisers. During morning teas, I met with members who recounted personal experiences of swallowing problems or supporting a family member with dysphagia. Similar stories were shared through emails and telephone conversations. One email particularly resonated with this study. A GP declined to make a referral, so the person sought a specialist's opinion. A hernia operation was performed privately, resolving their swallowing problems and indigestion; '[I] feel much better in myself'.

Many potential respondents expressed a willingness to complete the questionnaire for the greater

good. The enthusiasm and discussion generated from respondents suggest they benefited from being involved and may be interested in future studies. The majority of respondents requested a summary of the results, unanimously positive feedback was elicited when findings were disseminated.

Just over half of respondents had no general knowledge of 'dysphagia', while one third correctly defined the term. Eleven respondents suggested 'dysphagia' was a speech or language impairment. In line with our Giving Voice Aotearoa campaign, **we need** to continue to find ways to raise dysphagia awareness in our workplaces and communities, especially for our older population.

Acknowledgements: Dr Anna Miles and Dr Jacqui Allen.

References available on request.

KiwiChat goes virtual

Paula Shennan and Lauren Forster, Speech Language Therapists, The TalkLink Trust

The TalkLink Trust aims to 'break down barriers' to communication as a fundamental human right. Lately, there have been new challenges to overcome as we navigate supporting clients virtually.

KiwiChat was established in 2010 to support individuals and people around them to use assistive technology. These are fun-filled sessions of learning and sharing to support people to be competent communicators.

Traditionally, KiwiChat Groups were regularly held around the country. With COVID-19 lockdown, we decided, with some trepidation, to run a Virtual KiwiChat group.

Our first Virtual KiwiChat group ran in April following minimal advertising through Facebook and word-of-mouth. Fifty-eight participants from around the country attended. Families embraced web-based meeting technology, and engagement and enthusiasm of participants was remarkable. This gave us the confidence to plan and run further sessions for a variety of age groups. Teamwork was required to ensure sessions ran smoothly. We were keen to record the sessions so that others could access later. This raised challenges around privacy as some clients and whānau did not wish to appear in a recording freely available online.

After some initial tweaks, the technology issues reduced, and when they didn't, this was a great opportunity to model language such as 'uh oh, there's a problem!'. Attendees were really receptive to this new way of connecting with TalkLink staff and other teams.

There was some fantastic feedback from attendees, including the following comments:

> OMG that was so amazing. It was so well presented, clear and just blew me away. My brain is fizzing with ideas. You all worked so hard. Amazing how you added so much to the story. Just brilliant. Loved every minute."

We have never met other children who use talking devices before. Really appreciate this."

One of the most rewarding outcomes of running virtual groups, is that these sessions have been accessible to more clients than ever before, removing barriers such as location. Individuals who are unable to sustain their attention for a full 45 minutes have been able to watch the session at their leisure, and many teams have reported multiple viewings!

We know that many organisations will have discovered smarter ways of working during this challenging time, and Virtual KiwiChat is one of the positive outcomes TalkLink will endeavour to continue.

> He absolutely loved the KiwiChat Zoom meeting and is super keen to do more!! He gave it 2 thumbs up."

Today's session was awesome, thank you. He seldom concentrates for that long! We would love to join a session like this every week. Will use the story and follow up activities for the next few days."

Unlocking prisoner potential

Helen White, Kidz Therapy

It began as a response to a plea from the Howard League, an organisation which has been responsible for establishing programmes for prisoners to assist them with learning, training for employment and physical activities such as yoga.



An established literacy programme is in place and, although I have considerable experience in literacy and phonological awareness, I wanted to devise a programme which extended their language development. As Speech and Language Therapists know, it is recognised that a substantial number of prisoners have underlying problems with language.

In London I managed a centre for students with specific language impairment, the first in the country to be attached to a mainstream secondary school. We undertook the difficult task of gathering strategies which we thought would enhance their learning. These students were of average or above average ability and were not deaf, physically disabled nor autistic, as there were other centres in secondary schools for individuals with these needs. We began work with a large cohort arising from a single extended family and this family became part of a worldwide study to find a genetic basis for their disorder. This gene was found while I was working with them in the 1990s.

While working with these young people with language processing disorders we developed a "toolbox" of strategies, through practice of what worked and what didn't over the years, particularly in the areas of literacy, understanding and ability to communicate. During this time I had to advocate for our students in a gruelling court case and this led me to wonder about how many people appeared in court with underlying language processing disorders.

One of the "tools" in our toolbox included the Six Thinking Hats devised by Edward de Bono. This lead to me devising a programme for the prisoners deliverable in short targeted sessions, particularly for those on remand.. It was experimental and we were unsure of how it would be received. I believed the strategy would be useful in challenging prisoners' thinking and perceptions and that it would give them the concrete means to express themselves.

Six Hat Thinking is a difficult concept and one in which I have trained and used for years but still sometimes struggle with. I designed the programme so that it could be delivered in a formulaic but practical format with a simple easy introduction to the power of each Hat's function. It was designed to assist the learners to remember the way each Hat worked and to also enable the students who were training with me to become facilitators and to help them understand the reasoning. The trainee facilitators were mainly students of criminology, ... it helps with negative thinking, it gives you strategies to deal with issues and it gives you a way to plan forward."

psychology and law, with one from Mt Eden Correction Facility's education department. The trainees were to learn from observation initially with further facilitator training to be undertaken as follow-up.

Fifteen men turned up for our first session and respectfully participated, listened and felt able to express their ideas enthusiastically. After the initial introduction to the Six Hats, the men were asked to consider an entertaining problem under each hat in smaller breakaway groups, which they were to feed back to the larger group. Their summing up was lively, interesting and very amusing. The review showed that they had retained the method and its reasons, so they were asked to go away and to reflect upon how they felt it could impact their lives. At the end of this first session, men came up to feedback that they had found the session and interesting.

At the beginning of the next session, which was again fully attended, men came up voluntarily to say how they had reflected upon the method over the past week and how helpful they found it. They liked its simplicity, its visual nature, the ease with which they could practise it and its potential impact on their thinking and reflection in their lives. The programme was put in place permanently due to its enthusiastic adoption by prisoners, the prison staff and the facilitators. Potential benefits were significant and the programme evolved to include issues such as relationships.

After a year or so my role became one of facilitator for the training of new students who were to deliver the programme. The feedback from the facilitators, Mt Eden's education officer and the prisoners, was overwhelmingly positive. After a couple of years, the new prison education officer took over and there are plans to review how the programme is now progressing.

The Six Hat Thinking Course has now been rolled out across many prisons and rehabilitation centres. Prisoners who complete receive a Certificate which is taken into account for their parole and court sentencing proceedings.

A prisoner due for parole, commented to his lawyer that the Six Hat Thinking course is "really good because it helps with negative thinking, it gives you strategies to deal with issues and it gives you a way to plan forward." •

Contact **helen@kidztherapy.co.nz** for further information.

SLT in the media

Hana Tuwhare featured in a recent news feature, about the work of Talking Matters.

www.newshub.co.nz/home/ new-zealand/2020/06/ maori-speech-therapistwalks-the-talk.html

My Perfect Family documented the highs and lows of living with aphasia, and profiled the work of SLT and The University of Auckland MSLT Prac students.

attitudelive.com/playlist-page/ My-Perfect-Family/

Noticed on social media...



Themounter 23 June at 1440 - O Rich Stephens is the President of SAY: The Stuttering Association for the Young - Australia. He speaks with #Theinformer. Secrep Donikian about how they help kids overcome their stutter.

Renewed interest in developmental language disorder: What are we going to do about it?

Dr Jayne Newbury, lecturer in paediatric speech and language disorders in the School of Psychology, Speech and Hearing, University of Canterbury and NZSTA Expert Advisor on Child Language, jayne.newbury@canterbury.ac.nz

The renaming of specific language impairment (SLI) as developmental language disorder (DLD) (Bishop et al., 2017) has reignited interest in language disorders amongst SLTs in NZ. This is excellent, as children with language difficulties have long been under-identified and undersupported. At present, there is no NZ data on prevalence, service provision or outcomes for children with DLD.



Research suggests language intervention for school-aged children with DLD can result in short term gains in language standard scores (Mecrow et al., 2010). It doesn't necessarily matter whether an SLT or trained parent / educational professional delivers intervention for general language stimulation, or whether it is individual or group-based (Dickson et al., 2009; Law et al., 2005). However support needs to be intensive or gains in standard scores are unlikely to result (McCartney et al., 2010). This has huge implications for any low intensity general language support to school-aged children with DLD.

Receptive language seems to be more resistant to intervention than expressive, however gains in syntax can be made, even in older children with severe difficulties, if *intensive explicit systematic instruction* is provided (Ebbels, 2014). I wonder how many children with DLD receive an optimal language support service across their primary school years in NZ? I believe there are multiple reasons children with DLD are under-identified and under-supported. Firstly, language development through the school years is incremental and ongoing. Therefore other than when the child achieves ageappropriate language scores or when the child uses error-free conversational language, there can be no clear end point for language support services to stop. This represents a huge ongoing need for language support services. How can we meet this need?

Perhaps also the *lack of knowledge about DLD in the general population* contributes. Once a child has conversational level expressive language, teachers and parents may think the role of the role of the SLT is over and shift emphasis to how specialist teachers can support the child's learning. We (as SLTs) know the child is struggling with learning because he has an ongoing difficulty with language. Others may not. Do we advertise that we could play an ongoing role? These children do not tend to have major behaviour difficulties (St Clair et al., 2011). They may be going *under the radar* in terms of priorities for identifying and meeting their needs due to their acceptable behaviour in class.

Finally perhaps because once these children are adults, they may still struggle to communicate complex ideas, they are not always able to advocate for themselves. It is difficult for parents of children with DLD to know what to ask for.

Whatever the reasons, the difficulties these children face throughout their lives in reading, writing, listening and speaking clearly fall into our scope of practice (ASHA, 2016). Now that we have a new label and renewed interest in DLD, as members of the NZSTA and advocates for these children, what are we going to do about it? •

For research interests, **email me**. To raise awareness, visit **radid.org**. Perhaps the simplest way to start raising awareness is to formally diagnose children with DLD and to use the term in person, in reports and online?

References available on request.



Dear Friend, a letter to our speech language therapist

"Two years ago, Finn only had a handful of words, flash forward to today, he is a completely different child, he is very easy to understand exactly what he wants/needs".

We have learnt that all kids are very different when it comes to speech but with lots of time and dedication we put in, we will get the results. We have also learnt that there are so many different kinds of speech exercises with certain types working better for others, Ashleigh always makes sure our new exercises will work well for Finn (and are fun too!). We think this has been a magical ingredient in the speech language therapy service we have received; making Finn's service individual and meaningful to him and his interests. You have given our boy a voice, which is everything we have ever wanted.

These insights from the parents of Finn came to us from Ashleigh at Canterbury Speech and Language Therapy. Thanks Ashleigh for sharing these thoughts with us.

If you are working with or have worked with a client or service user who would like to tell our SLT community what made our service come alive or work well for them, or what would have helped them along the way, we would love to hear their message.

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Please consider contributing content to *Communication Matters* about any aspect of our profession. Feel free to discuss with Selena Donaldson, Editor, any ideas you have. **editor@speechtherapy.org.nz**