

ISSUE / NGĀ TAKE 41  
SUMMER / RAUMATI  
2021

# communication *matters*



## Iwi as early oral language leaders

Māori leading speech-  
language therapy

Cultural and linguistic  
diversity

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**Cover:** Awhina (Mum) and pēpi. Photo kindly provided by Whakatōhea Māori Trust Board.

Please contact the editor with your ideas at any time and we will endeavour to accommodate them in the next edition.  
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# From the president

## Nā te tumuaki

Annette Rotherham [president@speechtherapy.org.nz](mailto:president@speechtherapy.org.nz)



With the historic election result, I was excited and proud to be a New Zealander. We all consider many things when deciding to vote. What really helped me was: “Think about those most vulnerable and make your vote for them”.

I considered inequity and cultural safety. My cultural journey constantly evolves and deepens my understanding of Māori health and Te Tiriti o Waitangi. I am endeavouring to learn te reo Māori and to use it more. New kōwhiri (words) are becoming part of our conversations, reinforced in our media and myriad of resources to help us\*.



**Above:**  
Naomi Bondi and Annette (Lakes DHB SLTs) during the week of connection.

As president, my focus is on embedding biculturalism, building kaupapa and empowering the profession to work confidently within a culturally safe framework. We want to see SLTs actively enriching therapy for Māori receiving services, assisting them to lead full lives. Our Māori communities want to see more Māori health professionals. We are a long way off at 4% Māori in SLT. NZSTA wants to partner with our university programmes to recruit more Māori and build our cultural capacity so the responsibility and burden does not fall entirely on our 4%. In 2021 we will be building marketing and awareness campaigns towards our Māori communities to spark interest.

As a tauwiwi researcher, I am grateful to have access to academic literature to assist my understanding of my role and the importance of partnership with Māori in the Aotearoa research context. We need more kaupapa Māori led research in our profession. We need to build the academic and teaching workforce to strengthen the kaupapa of our profession while ensuring Māori SLTs are valued and empowered to practice with a Te Ao lens.

We are all responsible for addressing inequity where we work. We all need to reflect on institutional racism and to

“call it out” when we witness racism. We must acknowledge our unconscious and conscious biases. Those of us from the dominant pakeha culture must realise the reality of white privilege and colonisation and its impact on society. We must build understanding and empathy rather than polarisation.

As a non Māori, some tools that have assisted me to embed cultural practices into my clinical and professional mahi in recent times have been;

1. using a Māori framework for goals – Te Whare Tapa Whā is excellent,
2. reading and reflecting on Māori literature and research\*
3. cultural supervision. I would strongly encourage you all to consider cultural supervision.

This could be through other allied professionals, your Hauora Māori health services, or from own SLTs in He Kete Whanaungatanga.

*Ehara taku toa i te toa takitahi  
engari, he toa takitini  
Success is not the work of one,  
but the work of many*

**Annette**

# NZSTA happenings

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



19 AUG

**AHANZ meeting** – Zoom meeting and great to hear about telehealth working groups, ACC adaptations to contracts and to see all our colleagues from the wide range of allied health groups.



28 AUG

**Consumer group meeting** – Lots of great ideas and support for Week of Connection. Key message from this group – “Focus on what you can do, not what you can’t”.



AUG/SEP/  
OCT

**International Communication Project** – Emma and Annette attending.



8 SEP

**IALP conference planning meeting** – Conference planning is underway for 2022 and all the keynotes and discussants have been confirmed!



21 SEP

**NZSTA Board meeting, Wellington** – We welcomed 2 new board members and Katrina as a permanent member of the NZSTA Board.



22 SEP

**Student networking meeting**  
NZSTA joined as students from Massey and Auckland met employers from DHBs, MOE and private practice via zoom.



15 OCT

NZSTA presenting at **Health Leaders Forum**.



16 OCT

**Developmental Language Disorder (DLD) Awareness Day**, and our NZSTA DLD Kaupapa was launched. Claire Winward will tell us more about this important mahi in the next issue of CM, on behalf of the DLD Kaupapa rōpū.





## Recount and review

Thank you to everyone who got in touch about the Spring issue of *Communication Matters*. It was lovely to hear that people enjoyed it's emphasis on equity and diversity amongst the many people we work with.

Heartfelt apology to Rukingi for a misspelling of his surname in a byline in the previous issue.

"Every article was full of such rich and inspiring content" – Libby French.

It was also great to hear that it was useful to profile the broad work SLTs do, during our awareness week.

"Just received the Spring edition and was pleasantly surprised by kaupapa Māori all the way through. To me it is an amazing array of matauranga from [those] who contributed. I showed it to my whānau who were also surprised. One asked, "who receives them and do they share them with anyone else".

Please think about passing your copy to colleagues, friends and whānau to read when you have savoured it's content. Consider leaving it in a waiting room or library for others to enjoy. ●



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

### Below:

The Christchurch Art Gallery looked stunning lit up in purple and gold for Developmental Language Disorder Awareness Day! The Council offered on the grounds that they had no idea how prevalent it is. SEVEN TIMES more prevalent than Autism, yet almost no one has heard of.



Photo credit: Mary Cronin

“

Feedback, ideas and, of course, contributions for *Communication Matters* are always very welcome. are always very welcome and are a great addition to your CPD log!

We love seeing high-resolution photos of interesting aspects of SLT practice, which we can profile with a descriptive caption, or use on our cover. Contributions can be lengthy or brief, and all add to lively kōrero.

Please contact [editor@speechtherapy.org.nz](mailto:editor@speechtherapy.org.nz)



# Te reo o te Kaumatua Nā Rukingi Haupapa

Rukingi Haupapa, Kaumatua

Ngā mihi o te wā.

This issue of *Communication Matters* is sub-titled Summer or *Raumati*. The weather is warming up and all plants and animals are active. Now we are out and about doing lots of things including implementing the strategies and plans that were developed during the colder seasons of *Hōtoke* and *Kōanga*.

*Raumati* also celebrates with Christmas/*Kirihimete* and the New Year/*Te Tau Hou* in December and January months. As mentioned in the last issue, with a review in the month of *Matariki* (July) rising and the second at the end of the calendar year, it offers at least two times a year to reflect and plan strategically for the future. Hope what you planned was achieved. If not, leave the unfinished business to be included in the mahi for the future. **Ko te tumanako kia whakatūtuki pai i tērā.**

## Speech Language and Stroke Awareness Weeks

Activities and the events for September and October Awareness weeks were calendared and planned. However, none of us could prepare for a pandemic jumping us around between levels which in turn determine how we work.



Left:  
Stroke Awareness week and Speech therapy awareness combined at Rotorua Hospital 6 October.

The theme of “Connectedness” for the Awareness Week, despite some activities being postponed or cancelled, still allowed many of us to carry on the best way we could, such as the iPad competition, sharing *pūrākau* (stories), hui, etc etc. **He mihi nui ki a tātou i tautoko mai i te kaupapa, ahakoa te aha. He whakawhētai ki ngā ringaraupā o NZSTA i whakarite rauemi aha noa** (Congratulations to all who supported the Awareness Week activities no matter what. Particular thank you to those who organised resources and supports for us. Thank you.)

## 2021

In a way, many of us have had enough of 2020 with so much disruption and chaos. However, we have done some great work and we do need to remember

and acknowledge this. Great examples include the association strategic plan for the next 5 years, farewelling outgoing board members and welcoming new ones, and the successful undertaking of our zoom-based AGM hui. Members have continued our mahi well day in and day out. Therefore, well done whānau. **Ngā mihi ki a tātou katoa e kawe ana huri noa i te motu. Kia kaha, kia maia** (Be strong, be resolute).

**Kia miharo tō whakatā hei te kirihimete me te tae o the Tau Hou** (Have an awesome break over Xmas and New Year). **Mā te Wāhi Ngaro hei arahi kia tūtaki anō tātou i a tātou** (May the Supreme Being guide us till we catch up again). ●

Nākū noa  
**Rukingi**

# Get connected, Be connected, Stay connected!

We celebrated our Week of Connection 7–13 September. Here are some highlights:

## Message of support



Paula Tesoriero, NZ Disability Rights Commissioner gave us a special message of support:

“Covid 19 has highlighted the importance for us to connect and communicate regularly. For those 400,000 New Zealanders living with a communication disability, the sudden need to adapt to new ways of communicating and connecting has added an extra level of strain to them and their whānau. Being able to communicate and being heard, supports self esteem and allows people to take part, to be confident and live a more fulfilled life. When we all connect, we all thrive.”

## Connection in Action

Congratulations to Amanda White who won the Connection in Action draw for an iPad.

Amanda profiled maintaining connection through multimodal communication, providing top tips based on her research into ways that unspoken communication took place between one-year-old babies, their families/whānau and teachers in a culturally diverse community.

Amanda told us: “A few weeks ago I shared research findings as part of the University of Auckland’s ‘three-minute thesis’ event. Using video methods was a powerful tool that allowed me to capture and replay the ways that our youngest tamariki engage with others, moment-by-moment in multimodal ways – but some signals were so subtle that if you blinked, you could miss them!

As speech-language therapists with a broad and deep understanding



of communication, I think we are in a unique position to keep reinforcing the value of holistic, embodied and cultural forms of interaction including gestures, body language, facial expressions, proxemics, graphics as well as verbal and written language as ways to keep us all connecting with one another in challenging times. Kia kaha!”

## Keen to learn more?

Check out the video of her talk:  
<https://bit.ly/36tFhfv>

*Continues over >*



### Winning video

Lucy Sparshott (Sommerville Special School) video achieved the greatest reach (2.5K!) during our Week of Connection, and she received a bonus prize of a \$100 Noel Leeming voucher. She tells us about how her beautiful keyword signing videos came to exist:

“During lockdown, we used the school facebook page for weekly clips promoting keyword signing. We used two keyword signs per clip and used posters and images to support the videos.

They became very popular with parents, teachers and staff so have continued throughout the year. Huge acknowledgement to Ruth Pologa for making this happen. Ruth is also the best te reo speaker on our team and her clips are peppered with our other beautiful national language.”

### Promo poster

Our Week of Connection promo poster celebrated Whanaungatanga – connecting through relationships.



### Fundraising at UC

For this year’s Awareness Week the University of Canterbury NZSTA student representatives organised a raffle and a sausage sizzle to raise money for the Christchurch Aphasia Speaks Group’s accessible bike fund.

We were overwhelmed with the support from local businesses who generously donated prizes for the raffle, as well as the support from those who bought raffle tickets. The university SLT student club “SpeechSoc” kindly helped out with the sausage sizzle which we ran on campus. Our grand total came to \$886 which is a terrific result.

– University of Canterbury NZSTA Student Reps Livvy Pride, Jessica Eagle, Emma Barbafigera, Renee Ung, Laura Murdoch







### Follow along with Polly

I have been trialling making “follow along with Polly” videos for some of the children I see who need consistent daily practice, but due to competing demands within their lives, sometimes their families are not able to manage this.

I record a session that they can then watch and practice alongside both with their parents or independently. Sometimes I even get a “helper” join in!

– Polly Newton



### kōrero and kai —

Thanks to Elizabeth Knowles for designing this kōrero and kai image for NZSTA.



### UOA schools campaign

This connection week we focused on raising awareness about the SLT profession through a schools campaign. We contacted more than 20 schools across Auckland and the wider North Island, as well as reaching out to our university undergraduate population. We sent an informational brochure about the role of an SLT, who our client populations are, and the various pathways into the profession. We had fantastic feedback, with respondents saying the information would be useful for their career education programs.

– Tash Thompson



### Ordering using a coreboard with fringe vocabulary

SLTs from Whakatane Ministry of Education went to a local café and ordered using a coreboard with fringe vocabulary. It started a great conversation with the staff at the café about what SLTs do and how people can communicate in different ways. Our waitress turned out to be fluent in sign language!

– The SLTs from left to right: Carla Knott, Lauren Salisbury, Abigail Gates, Kate Ombler and Anj George

# Introducing Emma Quigan, Communications portfolio

**Emma Quigan** (Kāi Tahu, Pākehā), Communications Portfolio,  
Tūranga Whakapaoho, [communications@speechtherapy.org.nz](mailto:communications@speechtherapy.org.nz)

Ko Aoraki te mauka  
Ko Aparima te awa  
Ko Takitimu te waka  
Ko Kāi Tahu te iwi  
Ko Oraka-Aparima te Runaka  
Ko Takutai o te Titi te Marae  
Ko Harriet Bates toku tīpuna  
Ko Erin Jackson raua ko  
Mike Quigan tōku mātua  
Ko Beatrice Clarke tōku wahine  
Ko Emma Quigan tōku ingoa  
Ko taku kāinga i roto i  
Tāmaki Makaurau

I joined the NZSTA board during one of the busiest times of my career so far. My full-time job is with Talking Matters, a national movement to grow the next generation of thinkers, talkers and readers – focusing on babies and their whānau in their first 1000 days. However, I was also in the final stages of writing my master's thesis: Village Style Parenting in an Urban Context: Exploring the power of whānau to whānau coaching.

For my study, I analysed the formation of a parenting programme, 'Talking Matters to Tāmaki' (TMTT), which is aimed at creating rich language environments for babies and young children. TMTT was created in partnership with parents, whānau

and community members and offers an alternative to 'top-down' programmes where traditionally outside experts design the programme and set the criteria for success. My study widened the lens of early oral language support. Community-led parenting programmes can make space for whānau to re-centre Indigenous linguistic and cultural practices – which lead to better outcomes for all! Whānau are no longer on a programme, they are the programme.

This gives a bit of an introduction to how I plan to approach my role of holding the communications portfolio for NZSTA. I absolutely and completely see communication and the ability to connect with others as a human right and I'm passionate about the power of speech-language therapy. We really can change lives! I hope that I can help share our knowledge with a wider audience, in mana-enhancing ways. I want to make space for diverse knowledge systems in the speech-language therapy world.

I'm based in Tāmaki Makaurau, however I often travel for work. Whanaungatanga is the mahi. It's not something we 'tick off' or 'get through'. It's ongoing. So please don't hesitate to get in touch. Together we can raise the profile of SLT. ●



*Left:*  
Emma Quigan.

# Introducing Akshat Shah, Member Networks portfolio

**Akshat Shah, Member Networks Portfolio, Tūranga Whatunga Mema,**  
[membernetworks@speechtherapy.org.nz](mailto:membernetworks@speechtherapy.org.nz)

The area meetings continue to grow as a platform for members to network, share their views and experiences in a safe and supportive environment.

Members have told us that meetings encourage collaboration between SLTs supporting a myriad of clients and communities, and the value of this whaunaungatanga especially during this challenging year.

Over the next few weeks and months, I'm looking forward to working with the private practice, area, and student representatives to support the resilience and dedication of SLTs. With your help, I would like to review processes for representatives and meetings, and would warmly welcome any suggestions or ideas from any members.

As a board member, I am passionate about supporting speech-language therapists in the field. This emerged as a graduate SLT from Massey University, when I joined Learning Support (the artist formerly known as Group Special Education or GSE). I developed a greater

appreciation for the role SLTs play in the community and the impact we can have as advocates. A few years later I joined the team at Middlemore Hospital and had the privilege of working with and learning from some of the most incredible colleagues providing life-changing interventions. More recently, I've enjoyed opportunities to work in traumatic brain injury, complex needs in children and adolescents, and the emerging role of SLTs in justice.

In 2018, I completed a Masters study in training community based SLTs in cleft speech disorder. Along with working as Auckland Area Representative role since 2017, I have further refined my relationships and understanding of SLT across Aotearoa. I am looking forward to adding to the incredible work done by the NZSTA Board behind the scenes over the last few years, exemplified by their support of SLTs over the tumultuous year so far.

Now based in Whangarei, and working clinically up into the Far North, I have also recently taken a role on the Disability Advisory Group for Whangarei District Council. It is my strong belief that enabling greater communication access in the community leads to better outcomes for all of society.

*Below:*

Akshat with  
Gotham and Dash.



Please do reach out to me with any ideas and thoughts, and continue engaging with your local area meetings and representative(s). *Never doubt that a small group of committed and thoughtful people can change the world... it's the only thing that ever has.*

I'd also like to congratulate the Board, Giving Voice Champions, and our fantastic membership for a successful Awareness Week – we saw tremendous engagement from all around the country in the community and on social media highlighting the incredible work SLTs do on a daily basis. ●

# Cultural and linguistic diversity: Challenges and opportunities

Yuchen Lin, The University of Auckland

The cultural and linguistic context of Aotearoa is undeniably diverse. From time to time, SLTs work closely with people and families speaking non-English languages and people from a variety of cultural backgrounds.



This semester I worked with a Mandarin-speaking adult on aphasia and apraxia of speech via telepractice. Being a Chinese-English bilingual and an SLT student with a background in linguistics, these are some thoughts on the challenges and opportunities I encountered.

## Assessment

Before our initial session, I searched widely for a culturally and linguistically appropriate assessment to obtain baseline information. I was also looking for an assessment tool with great validity and reliability and suitable for telepractice. Unfortunately, many existing Chinese assessments are either outdated or not accessible as an e-version.

Informal assessment came to my rescue. I reached out to an SLT working in a hospital rehabilitation centre in China and adapted their assessment tool to evaluate my client's expressive and receptive language. A language sample and examples of non-verbal communication were elicited and recorded during the assessment. This told me about my client's communication strengths and areas needing improvement, however family opinions and comments offered me valuable insights into the client's daily communication. It was

also helpful to learn about the family's attitudes towards and understanding of communication disorders.

## Materials for intervention

Language systems are quite variable and there are multiple linguistic factors to be considered when treating a non-English speaking client. Examples include speech sounds, phonological rules, use of words, sentence structure and conversational styles.

Even though my client mainly speaks Mandarin, her accent and use of words are influenced by a dialect that she also uses at home. This required me to constantly reflect on differences between languages and select linguistically appropriate materials such as *pinyin* (i.e. Chinese phonetic alphabets). I needed to work closely with the family to understand what is linguistically appropriate for my client. For example, we would use a specific word with a dialectical pronunciation for 'granddaughter', which is appropriate for the client's regional culture.

A culturally appropriate and linguistically accessible material can make a difference in the level of motivation and engagement. In one session, I used a song that is quite popular among my





We use language as a key to know more about our client's world and to heal or reduce 'wounds' in communication."

– Yuchen

client's age group in China as a warm-up exercise. The client lit up hearing the song and it provided an excellent, warming, beginning to that session.

### Resources used for family education

Family-centred practice is highly recommended, but how do we deal with terminologies in another language? The vagueness of jargon is shared across languages: Words like *shiyuzheng* (aphasia, literal translation: lose language syndrome) and *shiyongzheng* (apraxia, literal translation: lose use syndrome) sound quite unclear. I therefore opted to be descriptive, rather than dwell on terminology.

Luckily, there is a great amount of educational resources in different languages on the Internet. It is quite useful to individualise the resource by picking out key information that was most relevant to the client and the family from multiple posters and brochures. Also, explaining in succinct and colloquial terms appeared to resonate more than handing over a lengthy translation.

### Telepractice

In the context of COVID-19, telepractice has become a new normal. With all the technological advances such as 'share

screen' and 'mirroring', the accessibility of multimodal as well as multilingual materials has been improved. This enabled me to display various tabs with Chinese materials, mirror a Chinese AAC app on my phone, and switch between them easily during the session.

However, there are still limitations. Perception of linguistic-specific suprasegmental features such as tones can be challenging. Also, repairing a communication breakdown by typing Chinese characters or *pinyin* with tones on Zoom is markedly slower than handwriting.

### Conclusion, or not

Challenges and opportunities continue to emerge throughout any journey working with a culturally and linguistically diverse population. When encountering non-English speaking clients, it is crucial to think of language as a facilitator, instead of a barrier. We use language as a key to know more about our client's world and to heal or reduce 'wounds' in communication.

Moreover, despite all cultural and linguistic differences, we can still find 'common ground' that applies universally such as family- and client-centred, evidence-based practice, and functional communication.

To finish this article, I want to share a great quote from Frantz Fanon: "To speak a language is to take on a world, a culture". Culturally and linguistically accessible speech-language therapy should always be promoted and highly valued. ●



Left:  
Yuchen Lin.



# Iwi as early oral language leaders

## With Talking Matters

**Hana Tuwhare**, Community Activator for Talking Matters, **with support from Anthony Quinn-Cowley**, Opōtiki Coordinator **and Huhana Moselen**, Community Activator – Māori

*Ko te mātauranga te waka  
e kawe nei ngā wawata*

Education is the vehicle to realizing our potential dreams and aspirations.

The Whakatōhea Māori Trust Board (WMTB) are leading the way as an iwi focusing on early oral language development. They have high aspirations for the future of their tamariki (children) and see oral language as a foundation for wellbeing, educational achievement and life success as Whakatōhea. They're doing it from the grassroots, and they do it for the aroha of whānau.

Talking Matters, a kaupapa to get everyone talking with pēpi in the first 1000 days, and the WMTB connected over shared values and purpose. A vision aligned to create an Opōtiki wide focus on early oral language that also supports the implementation of Whakatōhea's Maurua Education strategy, which at the heart is all about the revitalisation of Whakatōhea reo (language) and tikanga (culture). WMTB carries Whakatōhea specific indigenous ways of parenting, learning, and mātauranga (knowledge), while Talking Matters weaves in



**Above right:** Anthony and his daughter Athena talk about pou whakairo in the WMTB boardroom.

**Left:** Intergenerational transmission of mātauranga and language with pēpi.

its cutting-edge LENA technology, experience, and technical skills to form a partnership based on iwi leadership.

### **Authentic whanaungatanga takes time but takes us far**

Whanaungatanga is about connecting through shared experiences and working together to create a sense of belonging. Over an 18 month period, Talking Matters and Whakatōhea met mata-ki-te-mata (face to face) and had many conversations, which allowed time for trust and understanding to grow. Whanaungatanga is the work that has allowed the partnership to be authentic, flexible, and sustainable. It has also laid the foundation for the implementation

to flow and for Talking Matters to be in tune and responsive to the aspirations of Whakatōhea.

Rota Carrington, the Education Group Manager for WMTB in 2019 shared: "It has not been two years since I 'discovered' Talking Matters and wondered how this Auckland outfit could help our Iwi. We have come such a long way and in such a short time accomplished so much even as we are still building the framework around how we will deliver. This has all been done with Talking Matters approach to empowering us to do this in a way that is ours... It has all been offered with support and guidance for Whakatōhea to have control over how we do it. An amazing journey with a long way still to go."



Huingapani has taught us a thing or two on the language we use around her... At the age of 1 her dictionary already amazes us.”

– Awhina

### Whakatōheatanga | Identity as Whakatōhea

Through the whanaungatanga process, it was clear that any kaupapa coming into Whakatōhea needed to be flexible enough to encompass the local mita (dialect) and tikanga as well as being flexible enough for whānau to use the kaupapa in their own way. It also needed to be responsive and relevant to where whānau were at in their own reo Māori and tikanga journey.

Talking Matters engaged with Rota in an exploration of ancient forms of Māori literacy contained within iconography, i.e., pou whakairo (carved posts), moko (Māori tattoo) and te taiāo (the environment). ‘Reading’ Māori iconography was an essential skill for tūpuna (ancestors) to ensure the intergenerational transmission of knowledge to pēpi (baby). It is a skill and art form that declined along with the speaking of te reo Māori. However, as with te reo Māori revitalisation, it is possible to revive ancient forms of Māori literacy with a focus on early oral language.

The WMTB boardroom holds many pou whakairo that carry the pūrākau (origin stories), histories and language of Whakatōhea tūpuna. Rota suggested that the boardroom, which was usually

reserved for meetings with adults, could be opened to whānau and pēpi. It was an opportunity for Whakatōhea whānau to experience a language rich environment that grounded them in their Whakatōhea identity.

Danny Paruru, Iwi Development Projects Manager, is an expert on Whakatōhea whakapapa and tikanga. He shared with whānau and pēpi, the pūrākau of the nine pou whakairo in the boardroom which represent tūpuna associated with the nine hapū (sub-tribes) of Whakatōhea. A beautiful example of a rich oral language experience that whānau can continue to share with pēpi, strengthening their Whakatōhea identity.

### Reaching pēpi across Ōpōtiki

A focus on early oral language within the first 1000 days across Ōpōtiki has started within the WMTB early education center and social services. This focus allows whānau, teachers and social workers who connect with pēpi to take a deep dive into data that informs their parenting and practice. Working alongside Talking Matters speech-language therapists as technical coaches, whānau and practitioners develop their capacity and capability to create language rich environments for pēpi.



Awhina Kurei-Ranapia, mother of one-year old Huingapani, shares, “Huingapani has taught us a thing or two on the language we use around her. Every day we try our hardest to implement rich reo in our whare both English and te reo Māori. Everyday her and her sisters are growing in an environment that supports their personal growth. Every day at home or at homecare she is a part of a village that cares about her taiāo and mātauranga. At the age of 1 her dictionary already amazes us.”

While this kaupapa is still in its infancy, we celebrate the leadership of Whakatōhea iwi in the oral language space and look forward to watching their tamariki and pēpi flourish as bi-lingual thinkers, talkers and readers. ●

# Peer support following traumatic brain injury: The Reconnect Programme

Eleanor Jackson, Jo Deaker, Kristin Gozdzikowska, Kristin@lftcant.co.nz

Individuals recovering from traumatic brain injury (TBI) can have difficulty adapting to social situations, even years after their initial injury.

This perpetuates a cycle of isolation, and can undermine an individual's self-confidence. Social peer-mentoring groups are emerging as international best-practice for functional, holistic intervention for individuals with chronic TBI.

The Reconnect Programme, at Laura Fergusson Brain Injury Trust (Canterbury), is a group-based, client-led programme for individuals with TBI. The goal of this programme is to encourage individuals with TBI to participate in meaningful activities, develop positive relationships, and receive peer-mentoring and support.

Though this group has been successfully running for more than the past ten years, it has yet to be assessed in terms of its efficacy. We recruited a random sample of ten attendees and used open-ended questions to capture participants' impressions of how the groups had impacted on their lives.

**100%**

liked that the group was led by **professionals**, at the **same time** each week

“I know I can plan my week around this event”

**100%**

said the group made them **feel happy** and helped them form **friendships**

“It's made me more comfortable connecting with other people”

Peer support groups may aid in building relationships with others who share common goals and challenges. Research acknowledges engagement between consistent participants, supported opportunities, and funding to access such groups are key in making peer support groups successful.

**60%**

said the group helped them to deal with **feelings of anxiety or worry**

“Sometimes it just helps to hear someone else's feelings.”

**70%**

felt that they learned more about **brain injury**

“It's certainly opened my eyes ... made us be more conscious and aware.”

This patient-centred programme may provide a template as a safe, supported environment to practice skills, maximising participation in the areas of life important to the individual following TBI. Please feel free to contact us if we can help in any way. ●

References available on request.

# Top tips for careful screen time in pandemic time

Frances Stevens, VOX Speech Language Therapy, Hawke's Bay

In these times, parents and therapists may be stressed with the question of children's electronic screen time.

Two studies in 2017 and 2018 showed screen time can decrease the words and sentences that toddlers use, resulting in delayed language development.

One study found that toddlers who were exposed to more handheld screen time were more likely to have delayed expressive language skills. They also found that for every 30-minute increase in daily handheld screen time, there was a 49% increased risk of expressive language delay.

Another study found that toddlers who watched more videos said fewer words. For each additional hour that 8–16 month olds watched in a day, they spoke an average of seven fewer words.

The researchers concluded that overuse of media screens hinders language development in children. However, the researchers also concluded that **screen time with parental (or therapists') interaction and careful consideration for educational value could help with child language development.**

1

**TV shows, movies, and social media can be viewed in a way that optimises social interaction.**

Watch them together and ask who was the favourite character, what will happen next, and why the show ended that way?

2

**Children with language disorders may find phone and video-calling challenging.**

Practice conversations in advance and suggest topics such as making comparisons between weather in different places. Involve siblings and discuss ways that they can help their sibling with a language disorder. Video chats with friends and family are a two way interaction and so will be helping children learn about communication, despite occurring online.

3

**Monitor children's behaviour during and after use.**

Do they seem anxious or bothered? This is particularly important for teenagers, who are vulnerable to bullying, issues of body image or addictive gaming. Ask teens how they feeling both inside and outside of their screens.

Keep bedrooms screen-free, so children can relax, read, and sleep. A 2018 study showed that teenagers spending more time on screens were more likely to show symptoms such as hyperactivity, inattention, and restlessness.

4

Rather than allowing free rein with media, **preselect a variety of content you think developmentally appropriate.**

Two or more people watching media content together in the same room benefits children, who pay more attention and have more positive responses when viewing.

5

**Try to minimize app and gaming noise** so players have the opportunity to talk about the game and what they are playing. Research indicates that when reading e-books, background music and sound effects negatively impacted vocabulary learning. Just because technology has sound, doesn't mean we have to use it. ●

References available on request.

# Māori leading speech-language therapy: Future directions for Aotearoa

## People involved in this rōpū:

Karen Brewer, Kerrie Collier, Rebecca Anderson, Adele Siave, Katrina McGarr, Nicky-Marie Kohere-Smiler, Amy Rosenfeld, Ruth Pologa, Tracy Karanui-Golf, Ellen Faithfull, Hana Tuwhare, Waimirirangi Andrews, Renee Taylor, Carmen Fairlie, Ryan Meechan, Suzanne Purdy, Emma Quigan, Rukingi Haupapa.

“Māori leading speech-language therapy: Future directions for Aotearoa” is the title of a seeding grant Dr Karen Brewer received from Ngā Pae o te Māramatanga, New Zealand’s Māori Centre of Research Excellence.



The purpose of a seeding grant is to get together a research team and develop a proposal for a larger research grant. The aims of this project were to:

- Undertake a literature review to find out what Māori-focused research has been undertaken in the field of speech-language therapy and what this research tells us about the speech-language therapy needs of Māori
- Host two hui to establish a network of research colleagues and set an agenda to prioritise the speech-language therapy needs of Māori
- Evolve a plan for a three-to-five year research programme and write an application for a funding grant for this programme

Māori SLT and PhD student, Ryan Meechan, has taken charge of the literature review. We hope to publish the findings this year and present them at the NZSTA conference in 2021. The hui proved more difficult. Karen initially wanted to host a hui for all Māori SLTs. Unfortunately, the funding wouldn’t cover such an event so a smaller group of Māori

SLTs with an interest in research were invited. We planned to gather with Matua Rukingi at a marae in Rotorua for two days of whakawhanaungatanga and whakawhitiwhiti kōrero. Then Covid-19 came along and our two-day hui became two Zui. This was disappointing because we lost much of the essence of the project when we were not able to meet kanohi ki te kanohi, stay together, and share kai with our kōrero.

The online hui began with whakawhanaungatanga and then we reflected on these questions:

- What drew you to speech-language therapy in the first place and have your expectations in this regard been fulfilled?
- What barriers and facilitators do you experience when practising as a Māori SLT?
- What are the most pressing needs you have observed in the Māori whānau you work with?
- How can we as Māori SLTs begin to address these needs?



We came up with a long and diverse list of topics for future research.

- How we as Māori SLTs can support each other in leadership
- Workforce issues – Support for Māori SLT students and practitioners to be Māori and practice as Māori
- The need for a pathway for Māori to get into SLT, recognising life experience and life commitments that mean people can't travel to Auckland or Christchurch for fulltime study
- Tamariki literacy and language acquisition, particularly in te reo Māori
- Brain injury/referrals. Māori trauma, why is access and engagement in rehab so low? Or is it that access levels are the same in relation to referrals but Māori are under-referred and under-prescribed?
- Mate wareware (dementia). Dementia care tends to follow a Pākehā model. There is no SLT research about dementia but there is a large rōpū led by Dr Makarena Dudley that is working on mate wareware



- Supporting whānau to realise their dreams for students as they turn 21 and leave specialist schools
- Dysphagia care for Māori
- Incarcerated wāhine Māori and their understanding of the communication development/needs of their tamariki

We also responded to a query from the kaiārahi in an Engineering school which is putting together a team to investigate using artificial intelligence to diagnose ASD. They are aware that to do this for Māori they need to have Māori involved in the design and development of the system.

With such a large and diverse rōpū we didn't end up developing one research topic to pursue further. However, the

seeds have been sown. Individuals are thinking about what research they might do in future and the more experienced researchers in the group are there to tautoko anyone who wants to embark on this process.

We also discussed how to foster the relationships that started through this project and how we could reach out to other Māori SLTs across Aotearoa to provide peer support. We are investigating options for establishing a nationwide Māori SLT organisation. If any Māori SLTs are interested in being part of further developments in this space, please get in touch with Karen – [k.brewer@auckland.ac.nz](mailto:k.brewer@auckland.ac.nz). •

# Aphasia therapy groups – a national snapshot

Carolien Clemens, Waitematā District Health Board, Auckland, [Carolien.Clemens@waitematahnb.govt.nz](mailto:Carolien.Clemens@waitematahnb.govt.nz)

Population growth within Waitematā DHB and staffing limitations prompted us to explore therapy groups for people with aphasia to offer more timely service for these patients who spend longer waiting for SLT compared to patients with dysphagia.



We contacted SLTs nationally, working across various settings. We learned that groups for people with aphasia were being run with the majority focussing on supporting people to manage everyday communication situations, developing confidence and strategies. Some therapists included education for whānau such as the Relaxation Group run by Hutt Valley and published in *Communication Matters*, Winter 2018. Gavel Clubs

were run by one DHB as well as two universities, offering ToastMasters-style atmosphere for people ineligible or unable to join regular registered ToastMasters programmes.

Literature review revealed the following different types of community aphasia groups:

- Impairment based aiming to change communication function or structure
- Practising communication for everyday situations through communication activities and participation
- Sharing recovery journeys and developing strategies for everyday situations
- Improving communication and living with disability, focussing on wellbeing, advocacy, education, communication strategies

Consumer feedback was obtained from four patients on our SLT waitlist for communication input in February and March 2020. All four patients expressed interest in attending group therapy with one of those stating they were 'not typically a group person' but group therapy was 'better than nothing'. All patients relied on others for transport to get to the group venue. Patients identified a variety of communication skills they wanted to work on in group

therapy given a range of prompts. Two of the four patients felt two hours of therapy was too long and preferring one hour to manage fatigue, one was unsure, and the other felt two hours of therapy sufficient.

We learned:

- Community SLT could keep a register of patients suitable for group therapy either on initial assessment or on completion of individual therapy
- A screening tool would be useful to ascertain which patients would benefit from group therapy
- Prior to attending a group, language assessment and goal setting needs to be completed with the patient/family to help determine how group therapy would best help
- Outcome measures based on group goals should be used to measure effectiveness of group treatment, consumer feedback and to guide direction of future therapy
- Running groups with SLT students on placement works well
- Telehealth may work well if transport inaccessible for some patients

We would be interested in hearing from colleagues about any other ideas or experiences you may have had. •

# Remembering Lois Lawn 1932–2020

## NZSTA Life Member, Member New Zealand Order of Merit

Speech-language Therapists joined many others in our communities and overseas in sadness on learning of Lois' recent death in October.

Lois Powell was born and raised in Taranaki where she returned from Christchurch Teachers College beginning her career as sole speech-language therapist for the province, travelling for visits on foot, by bus, tram, school bus, regular bus service or her bicycle.

When Lois married Owen Lawn they moved to Dunedin where they raised their family of Rachel, Nicholas and Jennifer. Lois developed an exceptional career, based for many years at George Street Normal School's Speech Clinic and latterly with the Ministry of Education's regional office.

Lois was fun-loving and popular; with a quick mind, keen intelligence and life-long love of learning. She was unflappable. With Chris Justin, they produced many practical resources at a time when funds were scarce and resources expensive. The Dunedin Articulation Test was just one of these.

Lois was an active NZSTA member and office-holder, and President from 1980–1984. Her keen involvement successfully witnessed two significant milestones for the profession, the establishment of the University of Canterbury Bachelor and postgraduate programmes, soon to be followed by the two further training schools at Massey University's Albany Campus and the University of Auckland.

NZSTA biennial national conferences were always successful when led by and teamed with Lois. Her hospitality was legendary and she enjoyed entertaining colleagues and keynote conference speakers from United Kingdom, Denmark, North America, Australia and elsewhere, pushing schedule time limits to ensure they left having experienced tourist opportunities around Otago and Southland. Not surprisingly many of these colleagues forged life-long friendships, further enjoyed with Lois and Owen's overseas travels.

It is astounding to acknowledge the extent of Lois' many other interests, abilities and achievements. She was Trust Board member of Dunedin's Fortune Theatre for 12 years and their Friends member for over 30 years, their costume hire convener and, as with NZSTA, an extraordinarily imaginative and productive fundraiser.



Lois was on the Otago Art Society council for 12 years and was made a life member. She was the Provincial Executive of Girl Guides and their District and Divisional Commissioner for 10 years. Lois was a member of the vestry of St Paul's Cathedral and on the Chapter for six years. She was a past president, coach and life member of the Kiwi Swimming Club, a life member of the Friends of the Dunedin Symphony Orchestra, a Rotary International Paul Harris Fellow and she was named Dunedin City Council's 1999 Citizen of the Year.

And very specially Lois was awarded Membership of the New Zealand Order of Merit [MNZM] and life membership of NZ Speech-language Therapists Association.

A truly delightful and remarkable person. Rest in peace, Lois. ●

– Sally Schoon

# Dear friend: a letter to my speech- language therapist

Seeing a speech and language therapist made me realise how much I needed rehabilitation. The entire hospital team got me home, but once home I still needed my 'Speechie'. Without this, I doubt I would have been able to return to work. I certainly wouldn't have been able to write this article.

In January 2011 I had a seizure at work. I fell over backward and fractured my skull on the concrete floor. I remember nothing from that day and barely anything of the next 2 ½ weeks.

My memories begin mid-February when I transferred from acute to rehabilitation at Burwood Hospital. It was all rather odd to me as I worked in the main hospital and knew several of the people who



were going to be looking after me. I also recognised several of the other patients as they had originally been on the ward I worked on. I was relieved that none of them recalled who I was. I remembered what had happened to them but not their names.

When I arrived at Burwood, I felt I didn't need rehabilitation. I could walk and dress myself – what more could I need? I did have double vision but was ok with an eye-patch. I changed my mind when I had my first session with a speech-language therapist. She gave me a pen and paper and asked me to write my full name. I spelt my surname wrong. I realised I was in a very different situation from my normal one.

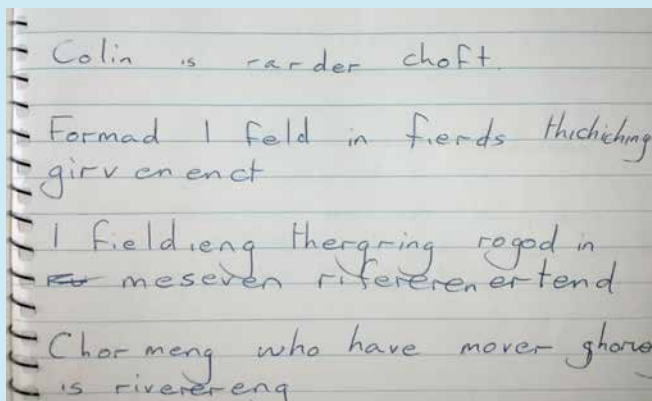
I had always read for pleasure and relaxation. Now, I could read individual words but not join them together to understand a sentence. I was basically illiterate. My reading improved slowly but writing and spelling were a different thing. Here is a notebook entry from

this time. I would really appreciate it if anyone can translate it into English and let me know what on earth I was trying to record!

After a week at Burwood my reading had improved quite a lot. This was the time of the February earthquake and, the day after, I was able to read and understand the newspaper. I also recognised some hospital staff in the photographs. The head injury made me more emotional and reading The Press that day I was crying and feeling very guilty about not being at work to help look after the injured. I managed to bring myself together by remembering that I could barely look after myself at that time, never mind anyone else.

Background noise was a real challenge. Before my injury I was quite able to have a conversation with someone when others were talking nearby, a radio on, or any other sort of noise really. After the accident it was really hard. The background noise seemed





Left:  
A notebook  
entry from  
my time at  
Burwood.

overwhelming and made it very difficult to concentrate on conversation.

Word finding was a real challenge too. Often, I could explain what something did or what letter the word started with but then got stuck. One time I was shown a picture of something and asked what it was. My answer was 'It's a seed from an oak tree'. Obviously, it was an acorn, but I couldn't remember the word, but I knew what it was. Any word finding problem like that is frustrating, and the more frustrated you are the harder it is to find the word. My answers like the acorn one was technically right, just rather odd.

Word finding problems are incredibly annoying. It's even more frustrating when people try to help by saying what they think you are wanting to say. Although displaying best intentions it really doesn't

help at all. Since getting back to work I have never tried to finish a sentence for someone. I have also shared with my colleagues and student nurses my experience of all this and encourage them not to try to finish other people's sentences. I think one of the best things to do is go away for a minute or two to let the person find their own word. Believe me, it is much easier to find that missing word without an audience.

Being tired makes everything in rehabilitation harder. Having a head injury also makes it much easier to get very tired. When I was tired my word finding problems were worse. Head injuries take a long time to recover from too, and it took me well over a year to get close to what I had been like before cracking my skull. •



The New Zealand Speech-language Therapists' Association 2021 Conference Committee is delighted to announce the new dates for the conference **Aoraki Iho Ake: Grounded – Aspiring – Connected** are Monday 30 August – Wednesday 1 September, 2021

Reflecting on **Aoraki**, the most well-known maunga tupuna (ancestral mountain) of the Southern Alps, and on the imagery of **Iho Ake** 'from Earth to heaven and everything in between', this conference seeks to create a panoramic view of speech-language therapy in New Zealand and its local and global partnerships.

Opportunities abound for discussion, connection and new insights from both research and practice champions, and exhibitors. Talk with your colleagues and make a plan now to join us in Christchurch to contribute your experiences and draw inspiration from others.

#### Important dates:

**Monday 11 January 2021:** Call for papers goes live

**Tuesday 9 March 2021:** Call for papers closes

**Monday 24 May 2021:** Notification to authors if accepted/not accepted into the conference programme

**Tuesday 15 June 2021:** Online conference programme and registration goes live

Please visit the website [www.speechtherapy.org.nz/info-for-slts/nzsta-2021-conference/](http://www.speechtherapy.org.nz/info-for-slts/nzsta-2021-conference/)

for all conference information or email [pam@prcc.com.au](mailto:pam@prcc.com.au)



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