

communication matters



Giving Voice Aotearoa Week of Action

AAC advocate • Leaving a legacy • Consumer focus group

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Rārangi upoko korero

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Cover: Giving Voice Aotearoa Week of Action. *Illustration credit: Gusto.*

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From the editor

Karen Watson editor@speechtherapy.org.nz

Tēnā koutou,

Spring is a busy time for the world of speech-language therapy. There are a lot of passionate, energetic members out there organising events, making posters and videos about speech-language therapy! Ka pai to everyone who promoted our profession and advocated for our clients during the Giving Voice Aotearoa Week of Action. There are a number of organisations and causes related to speech-language therapy that also happen in September – Loud Shirt Day, World Alzheimer’s Month, Music Therapy Week and Te Wiki o te Reo Māori to name a few – so I imagine many of you would have been extra busy during this time.



In the winter edition, many members shared their journeys towards working and living biculturally. Thank you to everyone who shared their story – we received a lot of positive feedback. This edition, you’ll notice many of the regular headings throughout *Communication Matters* now appear in both te reo Māori and English. These were translated by Kaumātua Rukingī Haupapa. We appreciate all the mahi you do for NZSTA, especially at this time when you’re busy preparing for the Māori stroke conference. Tēnā rawa atu koe, Rukingī.

So, grab a cuppa and take some time to read through this issue of *Communication Matters*. Our members have written about conferences they have presented at and attended across Asia and in Australia; technology developed in New Zealand to support Deaf and hard of hearing young people; an innovative app that supports people to leave a video legacy for their family and whānau; and more.

Hei konā mai,
Karen

Who to follow

Mā wai e whai?

Swallow Your Pride podcast

Swallow Your Pride (SYP) is the “not afraid to say it like it is” kid on the block of podcast-land. Effortlessly keep up to date with the latest in dysphagia evidence-based practice internationally. Perfect for those long drives to work in Auckland traffic, SYP host and speech pathologist, Theresa Richard interviews leading experts and researchers in the field of swallowing disorders. She covers controversial, practice-changing and thought-provoking pieces including “the 3 pillars of aspiration pneumonia”, “ethical decision making” and “trach, vent and swallow in the ICU”. With 91 episodes at your fingertips, are you ready to #swallowyourpride and put into practice this new learning to create the best outcomes for our clients, families and communities? •

Stella Karaman



Swallow Your Pride
podcast

Tune in here:
mobiledysphagiadiagnostics.com/podcast-3/

From the president Nā te tumuaki

Annette Rotherham president@speechtherapy.org.nz

Tēnā koutou te whānau o kaiwhakatikatika reo kōrero.

Firstly, a huge thank you for embracing our 2019 Giving Voice Aotearoa Week of Action, that blended with Te Wiki o te Reo Māori. Our digital resources were shared widely, and we loved the videos you posted to social media to celebrate the valuable mahi of speech-language therapy in Aotearoa. My heartfelt thanks also go to Mātua Rukingi who composed two waiata, “Kōrero” and “Tōnā Reo”, for our association. These are probably one of the most significant gifts we have received – *arohanui to you, Rukingi, for all your mahi and tautoko for us in this short time since you joined our association.*

The last three months have been jam-packed for the board and myself. In July, we had the AGM alongside a wonderful professional development day. Bridget McArthur and Anna Miles led a productive private practice workshop that will lead to some new guidelines and resources for those working privately. Emma Quigan from Talking Matters and Polly Newton from REAP wowed us all with a workshop demonstrating the successful early childhood programmes delivered on marae and co-designed with their local communities. A fantastic

example of how speech-language therapy can take our expert knowledge, combine with the expert knowledge of the local community, incorporating their insights on culture and language, and come up with something magical.

The annual leadership forum for the profession was also held in July in Wellington. We were honoured to host Paula Tesoriero, the disability rights commissioner. She praised our profession for taking a disability rights lens to our practice and to government. Speech-language therapists from all over the country and different areas of practice came together to strategise on issues facing our profession. Key issues raised were cultural safety for all and recruitment of Māori to the profession. We raised questions about unmet need and how many speech-language therapists we have in New Zealand versus the need for our services. More data is needed, but it is excellent to have started the conversation.

August was another action-packed month with the second consumer group meeting led by Geneva Hakaraia-Tino. Representatives from NZSTA and NZAS (New Zealand Audiological Society) travelled to IALP 2019 (International Association of Logopedics and

Phoniatrics) in Taipei. They presented and marketed the conference for IALP 2022 in Auckland which will be led by Philippa Friary and Karen Puller from NZAS. This was a highly successful journey, and we thoroughly look forward to our turn to host.

Anna Miles and I also met to revise our ethical framework to align us more closely to other allied health groups in New Zealand. Renee, Rukingi and I were welcomed to Christchurch for two hui with our members down there. At Burwood Hospital with the stroke services, Rukingi presented his own stroke journey and his research, *Stroke in Te Arawa*. We attended the area meeting to talk about culturally safe practice, discussing how the NZSTA can assist members to ensure speech-language therapy services are equitable and accessible to Māori in Aotearoa.

With all that activity, I need coffee and to knuckle down to write my own research proposal!

In the meantime, we hope you can start learning our NZSTA waiata. Start your day with some waiata practice with your colleagues! Send us a video and we will come up with a fabulous prize! ●

Hei konā mai i roto i ngā mihi,
Annette



International Society of Early Intervention Conference, June 2019

Esther Hoh estherws43@gmail.com

This year, I am grateful to have received support to attend the International Society of Early Intervention (ISEI) conference in Sydney through the NZSTA funding grant.



Above:
The ISEI conference was held at the International Convention Centre in Sydney.

Over three days, I did a great deal of listening and gaining knowledge that spanned many professional fields. The mission of the ISEI is to provide a framework for communicating advances and promoting international networks in the field of early intervention. This has led to a group with over 3000 members across 100 countries, including researchers, clinicians, policy makers, speech-language therapists, and paediatricians. What a rich moment in time for me to add to my kete! A highlight for me was being able to connect with others from around the globe with the same passion for our tamariki.

I also had the privilege to present findings from my master's research project at this conference. Since completing my master's in speech and language therapy at Massey University, many doors have been opened for me to share my research at local, national and international level; presenting on how to deliver culturally competent early intervention. Having a platform on the ISEI stage was daunting, however it provided an appropriate forum to share and receive feedback about a cultural practice framework I developed. This framework emerged through a qualitative analysis of the intervention

I provided to two Malaysian families via telepractice.

My presentation explored how our early intervention principles – family-centred practice, collaborative relationships and using naturalistic settings as the intervention context – naturally align us with specific practices such as using adult learning strategies, being child-led and using play as a context for intervention. While having research evidence, it is important to consider that this is not always a “fit” for all whānau we work with. Part of evidence-based practice means we consider our families' preferences and values. As identified in the research, families may have deeply rooted values that do not align with our typical practices. A thematic analysis of my research data identified that listening to families' voices about their values around parenting, perception of family supports, and expectations of early intervention can go a very long way to navigating intervention and supporting successful outcomes. ●

31st World Congress of the International Association of Logopaedics and Phoniatics (IALP), Taipei, Taiwan

Philippa Friary, co-chair, IALP Auckland 2022

The final boarding call sounded at the Auckland International Airport – we were off, destination: Taipei for IALP 2019.



Above: Annette Rotherham with International Communication Project partners, Derek Munn (RCSLT), Arlene Pietranton (ASHA) and Kamini Gadhok (RCSLT).

Packed to the gunnels with 100% New Zealand tablecloths, silver fern pins, Kiwiana pens and truckloads of Kia Ora chocolates. From the land of the long white cloud to the land of dumplings, bubble tea and big smiles. This Kiwi contingency was ready to represent Aotearoa and show the world of everything speech-language therapy true Kiwi manaakitanga. We were also heading over to showcase what Aotearoa has in store for the 32nd congress which will be in Auckland in 2022.

A quick read through our presentations, a check over the programme and many movies later, we landed in Taipei. From 14 degrees to 41, my Dove aloe vera and cucumber was no longer making me feel so fresh! Nevertheless, through customs and onto the underground – such intrepid travellers – we made it to the hotel, Caesar Park – our digs for the week, right in the heart of the old city.

Taipei is an oval shaped island which sits with the East China Sea to its west and the Pacific Ocean to the east. It's a subtropical mountainous country scattered with dense green forests and flat tea plantations. The cultural and economic hub of Taiwan is Taipei, the

new Hong Kong some say. This 24/7 city promises to overload all your senses at once. From the constant ring of mopeds and scooters, to the call of roadside fruit sellers, and the inviting smells of dumplings and bao. And amongst the calm chaos, groups of locals practising their tai chi and chi gung. This dizzying combination of Taiwanese, Chinese and Japanese culture makes for an incredible experience. Yet we were here firstly to attend the IALP congress, a five-day speech-language therapy extravaganza.

IALP is the world association for clinicians, academics and researchers in the fields of speech, voice, communication, audiology and swallowing. This global association was founded in Vienna, Austria, in 1924, by Dr Emil Froeschels. One of our pioneers for speech-language therapy, Froeschels chaired IALP until 1953. Since its inception, IALP has grown in membership with both individual and association members from around the world. NZSTA is a member of IALP.

With 95 years under its belt, IALP has many traditions which are woven throughout their congresses. The flag ceremony is one of these which is held during the opening ceremony. All countries who are members of IALP have flag bearers who parade the



Left: Opening ceremony entertainment from children with cochlear implants performing percussion.

flags to the claps and cheers of a hall of attendees. Jodi White did us proud as the New Zealand flag bearer. This event truly was a celebration of our global community.

Other cultural and social events included a half-day excursion for all delegates and the gala dinner. The gala dinner was held at the stunning Silk Palace, where we were treated to entertainment by some traditional Taiwanese dancers and a Taiwanese puppet show. We were truly looked after by our hosts who invited us to a banquet of traditional Taiwanese food with a modern-day twist. With full stomachs and new Facebook friends, the evening drew to a close.

The scientific programme was four days long with six streams covering all corners of speech, communication, voice, audiology and swallowing. The type of presentations varied from keynote style, to panel discussions, oral presentations and posters. The main reports or keynotes were impressive and delivered by Professor Martine Smith (Innovations in multimodal communication), Professor Helen Grech (The impact of forced migration on communication and social adaptation), Shelly Chadha who spoke at the World Health Organisation

Roundtable event (Global action for hearing), and Dr Chia-Ying Lee (Neural underpinnings of early speech perception and emergent literacy). There truly was something for everyone. And when you needed some time out from growing new neural networks, you could walk around the expo and see how many textbook authors you could spot: Pamela Enderby, Lilly Cheng, Ilias Papatthanaseou, Liz Ward, and our very own, Gail Gillon. Not often do you get to share the lift or a bit of banter over some afternoon tea with the “who’s who” of speech, language, swallowing and audiology.

When we weren't giving out chocolates and enticing our international colleagues over to Aotearoa in 2022 with tales of hobbits and world-class wine, we were sharing jokes about our 'e's and 'i's while offering silver fern “pins” and 100% NZ “pens”. Much hilarity was had! The final showcase came during the closing ceremony when we officially welcomed the 961 delegates to Aotearoa in 2022 with a rousing rendition of “Tūtira mai”. With the exchange of the flags, from one kumara loving country to another, it's all sights set to August 2022, Auckland, Aotearoa. ●



The New Zealand Speech-language Therapists' Association in collaboration with the New Zealand Audiological Society are thrilled to be bringing the world of speech, communication, voice, audiology and swallowing to Auckland, New Zealand, in August 2022.

The 32nd World Congress for the International Association of Logopaedics and Phoniatics will be co-chaired by Philippa Friary and Karen Puller, together with the conference planning committee members; Helen Sullivan, Annette Rotherham, Anna Miles (scientific chair), Holly Teagle (scientific co-chair), with the support of Keynote Professional Conference Organisers. Visit our website for more information about how you can get involved with the great event at www.IALPAuckland2022.org and follow us on Twitter @IALP2022AKL.

Sharing dysphagia research in Japan

Marie Jardine

I'm a PhD candidate in speech science at the University of Auckland, investigating age-related swallowing changes, particularly in advanced age. I am supervised by Dr Anna Miles and Dr Jacqui Allen and have received funding from the Health Research Council of NZ and the HOPE Foundation.

In March this year at the Dysphagia Research Society Annual Meeting in San Diego, I was awarded the Sumiko Okada Fellowship. This involved travelling to Niigata in Japan in September to present at the Japanese Society of Dysphagia Rehabilitation conference. There were about 7000 attendees and, unsurprisingly, it was a challenge to navigate through the crowds! At one stage I arrived in a lecture only to find there were no seats, but quickly realised I was in a Japanese session. The number of exhibitors were impressive, displaying a large range of modified and high calorie foods (the katsu meal as a liquid was inventive but a bit strange), assistive eating utensils and oral hygiene items. A large proportion of products were catered towards the ageing population in Japan. Attending lectures and scientific presentations by well-known researchers from Japan and the USA were highlights.

I was also invited to present at the 3rd International Dysphagia Symposium

at Fujita Health University in Nagoya. Before the event, speakers were given a tour of the almost 1500 bed university hospital, which is the largest in Japan. The rehabilitation spaces were a hive of activity, reflecting the hospital's emphasis on the overload principle. Patients participate in rehab at least three hours with therapists every day. The facilities were remarkable; I have never seen so many medical robots. It was fascinating to observe this technology in action in a real context, rather than as a concept. There were patients suspended from the ceiling to assist them with walking in order to reduce the risk of falls, patients on treadmills with cameras so they could monitor their gait while being tested with the sensation of tripping over, occupational therapy using video games with life-sized controls, a robot that assisted with bed to chair transfers, a robot that helped with activities of daily living ... I felt like I had stepped into a future of rehabilitation.

In the speech-language therapy department, we were shown specialised chairs for videofluoroscopy and the 320-row area detector CT scan, which the Fujita Health team are famous for. The team demonstrated how they used the swallowing software programme for CT; the 3D moving images were colour-coded and rotatable to clearly visualise

a completed swallow ... wow! The dysphagia-friendly vending machine also amazed me. It could grind coffee beans and then thicken the coffee (or tea, juice or hot chocolate) based on the desired thickness level and temperature selected. In addition, there was a machine which thickened jugs of tea in a standardised way, without lumps. Despite the role of technology at Fujita Health, their overall mission was more traditional: "to conspire" (inspire as a team) and "walk straight as rehabilitation professionals", which resonates with us in NZ. •



Above: Dysphagia-friendly vending machine.

An audiologist and a speech-language therapist meet at the movies...

Rosie Lamb

Sounds like the start of a joke, right? Well, it's a true story that resulted in the creation of a new digital game for Deaf and hard of hearing (DHH) young people in New Zealand. The game aims to facilitate the development of pragmatic and self-advocacy skills.

Zoe Hector began developing the idea of Talk Town while completing her masters in audiology at the University of Canterbury. She first had the idea for it when she was working as a teacher aide with DHH children. Zoe entered and won several competitions which allowed her to develop the idea further. Zoe and I met at van Asch Deaf Education Centre (DEC), at the premier of a short film about a Māori Deaf boy. A working relationship developed, initially through collaboration between Talk Town and van Asch DEC and later I joined the Talk Town team. You might say the rest is history.

The game starts with the player creating an avatar, choosing their own listening devices and identity. They then move to a map of Talk Town and explore the different scenarios that present unique communication challenges for DHH young people.



Talk Town was created with the input of DHH students from van Asch DEC and Deaf adults. Zoe and I also used the best research available to inform development. •

Find out more

www.talktowngame.net

Contact Rosie
fire.chief@talktowngame.net

App available on Google Play and iTunes stores.

Above: Talk Town allows users to personalise their avatar and explore different situations where communication can be challenging.

Resources for working with clients who have life-limiting diseases

Fiona Hewerdine, NZSTA expert advisor on palliative care, Fiona.hewerdine@bopdhb.govt.nz, 07 579 8783

Recordmenow is a free app that allows you to leave a legacy for your loved ones in video form. It grew out of research on what 100 bereaved children wish that they had known about their family. The app allows you to make a lasting video. This could be for fun or history. The app will guide you with prompts. The recording is private and it's free.

I encourage you to pass this to your families who may be about to lose their loved ones. This may be through head and neck cancer, motor neurone disease, Huntington's chorea or something else. Our job is all about communication, so we are well-equipped to promote this resource. The nature of degenerative disease means that the time of optimum communication may be earlier in the disease trajectory, so again we may be well-placed to identify the best time for making a video.

You may find that this links well with advance care planning and may wrap naturally with conversations about supported breathing and nutrition. Thousands of people have chosen this means of leaving messages for their family and friends, aiding timely communication, bringing enhanced quality of life and purpose for the patient, and a legacy gift for the listener.

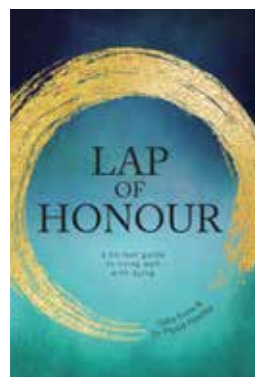
The founder of the app, Gaby Eirew, has also collaborated with Dr Pippa Hawley and produced a book called *Lap of Honour: A Guide to Living Well with Dying*. It's new this year and it's aimed to support the minutes after the breaking of bad news and to help people scaffold a quality of life in the time that they have left. It has been helpful to link with bucket lists and goals. Readers report it has been helpful to interpret what the diagnosis means. It's also put together in a very patient-friendly way and is jargon-free.

These two resources may help enhance the difficult practice of palliative care for the speech-language therapist, and equip us to take the opportunity to make a difference for patients, and their families and whānau, living and dying with life-limiting diseases.

Please contact me if you'd like to know more. ●

Find out more

recordmenow.org
Free to download onto Windows, Mac pcs, iphone.
lapofhonourbook.com



Left: "We both field many questions about death and dying each year, so this book is the best way we can get all the honest practical answers out there", Gaby Eirew says of the book she co-wrote with palliative care doctor, Dr Pippa Hawley.

Advocating for AAC users

Lacie Glen Vile, Massey University speech-language therapy student & **Jessamy Bell**, TalkLink Trust

Nathan Thompson is a 20-year-old man who aspires to support others like him. To communicate, Nathan uses an eye gaze device with text-to-speech to type. He uses this to write emails, complete NCEA schoolwork and like any other young adult, scroll through Facebook and Instagram.

Below: Nathan with speech-language therapy student, Lacie.



He received this communication device four years ago, and after taking a few months to learn it, he now uses it throughout the day for face-to-face and online communication. Nathan will get a new eye gaze system soon, as his current device is old and having technical issues. Before using this device, Nathan trialled multiple communication systems including head switches and paper-based low-tech methods.

Nathan shares, "I have been blessed to help people like me. Just seeing the kids' smiles. You can't put a price tag on that. I used to say that I don't care about becoming 'rich' or being famous – I just want to have a proper voice like most people. That was my biggest insecurity, because I thought, man, if I could talk and walk – I could help so many people in need. That was bringing me down all the time. And people spoke too fast for me to respond in that short amount of time. I was like 'hold on', while I'm writing a response, or I'm trying to type really fast to get my point across. These were the main factors that played a huge role in me being frustrated, not necessarily with people, but with myself. Most of my frustration was directed at myself for not being able to speak, however, I've learnt how to combat all of that and I just focus on the positives and not on the negatives, because I believe that I have a purpose on this earth, and I believe my purpose is to help the

parents of those kids that I've mentioned in the beginning of this, to have faith, because it's a process to get where you want your kids to be. Take it from me who has been there, done that. I was and am so lucky to have all the support from all my friends and family. I just hope I can pay you guys back, one day! I've been so fortunate to [use] my eye gaze! Because without my eye gaze – I wouldn't have been able to share my story and help people by telling my story. The eye gaze allows me to do just that!".

Nathan understands that he has the right to be heard. When he leaves school, Nathan wishes to be an advocate for individuals like himself. He has two important tips for those who communicate with individuals using alternative communication. First, "the most important thing is to be patient" by giving an individual time to construct their message, not talking over them or guessing what they are trying to say before they have finished speaking. Second, as a communication partner it is important to "read a person's body language" when something needs to be actioned immediately and they don't have their device available. ●

If you want to get in touch with Nathan for support or advice, please contact Jessamy at jessamy.bell@talklink.org.nz.

Giving Voice Aotearoa Week of Action Communications / Tūranga whakapaoho

Amy Oughton communications@speechtherapy.org.nz

Press pause – Please give us time to talk

This was the theme for the Week of Action 2019. We had a great response to the material created this year, in particular the new association video. Our video, “What does a speech-language therapist do?” was created by the team at Gusto Design. You can watch on the NZSTA’s YouTube page and share it from there.

We were pleased to see many of our members get on board with the video competition this year: “A day in the life of a speech-language therapist in Aotearoa”. This was won by Beth Laurenson from Speech Language Illustrated. Beth created a beautifully illustrated and animated video, combining together Te Wiki o Te Reo Māori and Giving Voice Aotearoa awareness week. You can see Beth’s video on her business Facebook page.

Thank you to everyone that put in an entry. You all created fabulous videos that highlight the broad work we do as speech-language therapists in New Zealand. These will be fabulous resources. Keep sharing them around.

It was great to see so many members getting involved in the Giving Voice Aotearoa Week of Action. A team from

the University of Auckland organised a screening of the award-winning film, *When I Stutter*, directed by John Gomez; speech-language therapists from different practices came together to celebrate awareness week over dinner; businesses and speech-language therapy departments ran their own competitions for the general public and other staff members which helped to increase engagement during the week. Well done, everyone, to thinking outside the box, being creative, and giving back to the community while advocating for our clients and our profession.

We do amazing work as speech-language therapists and it is getting noticed! Keep up the amazing work.

Amy



Giving Voice Aotearoa week of action

University of Canterbury

We held a soup, scone and baking sale across two days. This year, we combined efforts with our university speech-language therapy student club, SpeechSoc, as well as aphasia advocate, Junelle Robinson, and other members of the Christchurch Aphasia Community Support Group. Given the success of our bake sale last year, we set the bar high with a target of \$1000 to raise money for the group’s rail trail fund. We were overwhelmed with support, and generous donations of soup and baking. Our grand total came to \$1136.71 which was a fantastic result.



Community team in Bay of Plenty

The interprofessional team based with district nursing shared reflections on the meaning of communication in their patient work. The team were asked to write one word on the importance of communication to them.

We also replaced the jokes in the ladies’ loos with info about speech-language therapy for a week – catching that two-minute hand washing time with advice on being a great listener. We also looked at how the Talking Mats approach could be used for goal setting with people with compromised communication by occupational therapists, physiotherapists and dietitians.

Fiona Hewerdine

Cuppa tea for motor neurone disease

Jessamy Bell, TalkLink Bay of Plenty

Lacie, third year speech-language therapy student at Massey University, and I went to a café in Tauranga during MND (motor neurone disease) Awareness Week.

We used an augmentative and alternative communication (AAC) device called Predictable on an iPad Mini, and a partner-assisted scanning communication book to introduce ourselves to the café staff, tell them about MND, why we were using AAC, and order our food and drinks. The main thing we both noticed was the time pressure. This is something I talk to spouses, family members, caregivers and staff at rest homes, hospices, hospitals about all the time! It takes time to use AAC and it is important to be patient when someone is constructing their message. Well done to the staff for getting our orders correct! •



Above:
A successful order using AAC.

MND New Zealand,
mnd.org.nz,
for more information
and free direct
personal support.

TalkLink Trust,
talklink.org.nz,
for a communication
book template or
support with AAC.

Auditory processing disorder guidelines: A welcome step forward

Jessica Scott, final year speech-language therapy student, University of Auckland

Guidelines launched



In August 2019 the Eisdell Moore Centre supported the launch of *The New Zealand Guidelines on Auditory Processing Disorder (APD)* at the University of Auckland.

Published by the New Zealand Audiological Society (NZAS), with support from the Ministry of Education and Ministry of Health, the guidelines represent three years' work by the APD Reference Group. The resulting internationally peer-reviewed document has gained a highly recommended rating from the Appraisal of Guidelines for Research & Evaluation II protocol (Keith, Purdy, Baily & Kay, 2019). The guidelines aim to provide practical direction and clarity to clinicians and public agencies, as well as the many people directly affected by APD in Aotearoa New Zealand.

APD in New Zealand

APD is a hearing disorder which is estimated to affect 54,000 (6.2%) of our child population (Esplin & Wright, 2014) and yet many people who work with children are not aware of it. APD can impact a child's participation, academic achievement, ability to communicate and make friends. Diagnosis of APD is made by a specialist audiologist, and it is not detected by standard audiological tests (Keith, Purdy, Baily & Kay, 2019). APD has been a challenge for those in the fields of language, education and health to understand and treat. Consequently, there are concerns that it is under-recognised, under-diagnosed and under-funded.

Why does it matter?

I have been collating interviews as part of a research project focusing on parental experiences of APD in New Zealand, supervised by Clare McCann and Lucy Sparshott. I feel the powerful stories that parents shared with me deserve to be brought to the fore. Many parents reported that APD is not well understood and there are misconceptions about it in the community. Some have encountered people who deny the existence of APD as a condition. Parents expressed bewilderment, confusion and a lack of

support both leading up to and following their child's diagnosis of APD. This seems to be felt most acutely by those living rurally and outside of main centres. As APD must be diagnosed by a specialist audiologist, many parents report feeling frustration at having to travel to and pay for a costly assessment because publicly funded assessment is not common. The expense of funding remote microphone hearing aids, which have proven benefits for those with APD (Smart, Purdy & Kelly, 2018), is another barrier to seeing improvement in their child.

Spreading the word

The guidelines have been warmly welcomed by those active in APD communities such as the Ministry of Education, the Ministry of Health and Hear for Families. I feel hopeful that the guidelines will bring about both practical and attitudinal changes to how we manage APD. I encourage you to review the recommendations specific to speech-language therapy; it is something we should all be aware of. ●

New Zealand Guidelines on Auditory Processing Disorder can be accessed from the NZAS website: www.audiology.org.nz

“The guidelines aim to provide practical direction and clarity to clinicians and public agencies, as well as the many people directly affected by APD in Aotearoa New Zealand.”

– Jessica



Above:

(L-R) Dr David Wales, national director of special education at the Ministry of Education; Prof Suzanne Purdy, head of School of Psychology, University of Auckland and co-deputy director, Eisdell Moore Centre; Prof Peter Thorne, director, Eisdell Moore Centre; Philip Daniels, senior at School of Psychology, University of Auckland; and Dr Bill Keith, director, SoundSkills NZ. Image Credit: SoundSkills Ltd.

Left page:

The New Zealand Guidelines on Auditory Processing Disorder is available now.

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Hear for Families (H4F) is a nationwide organisation for people living with auditory processing disorder. Your clients can find them on Facebook.

Time saving tips for assessment of multilingual language skills

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



Kia ora koutou katoa,
Assessment of multilingual children's language skills is challenging. Over and under identification of children with language disorders is common in this population.

It has been estimated that bilingual assessments can take three times the amount of time required for a monolingual child. Time is a limited commodity for clinicians and the reality is that this extra allocation of time is not always possible. Recently, I have come across a few ideas and resources for how to save time in multilingual children's assessment but retain high accuracy in identifying children with developmental language disorder (DLD).

While it was previously thought that all languages needed to be assessed to accurately diagnose DLD in a multilingual child, Li'el, Williams and Kane (2018) recently demonstrated that DLD in bilingual children can be diagnosed accurately using an

English-only assessment. Their assessment protocol included:

- English language skills (see their article for details).
- Alberta Language and Development Questionnaire (ALDeQ) (Paradis, Emmerzael & Sorenson, 2010) regarding exposure and competence in the other language (the questionnaire is an appendix to the article).
- Processing measures (non-word repetition and sentence repetition).

This assessment protocol achieved acceptable levels of diagnostic accuracy. This option could be a practical solution for identifying bilingual speakers with DLD in New Zealand, where speech-language therapists seldom speak the same non-English languages as the children they serve.

Multilingual children's best interests are likely best served by assessment and intervention in all the child's languages (Kohnert, 2010). It is particularly important to provide a bilingual service for Māori and English bilingual children who are attending Māori immersion

education (May & Hill, 2005). Hemsley and colleagues (2014) published a useful tutorial on bilingual assessment of child language relevant to our context. This article includes two case studies (Samoan and Vietnamese) and outlines the procedures undertaken for both assessments and interpretation of the results.

Search for the CHESL (Child English as a Second Language) Resource Centre website. There is a great summary of information about bilingual language acquisition, and useful resources to guide clinicians in accurately distinguishing between language difference and disorder.

If you'd like talk about this, feel free to email me.

Ngā mihi nui,
Jayne

Please email Jayne or editor@speechtherapy.org.nz for full list of references.

Consumer focus group

Geneva Hakaraia-Tino

**Ko Mataatua te waka
Ko Rakaumangamanga te maunga
Ko Ipiripi te moana
Ko Te Rawhiti te marae
Ko Ngāpuhi te iwi
Ko Ngati Kuta me Patukeha ngā hapū
Ko Geneva Hakaraia-Tino tōku ingoa.**

Tenā koutou katoa,

2019 marks the third year that the Giving Voice Aotearoa campaign has been running. I feel very privileged to have been part of this journey as consumer lead.

This year, we have made consumer focus a priority by providing the opportunity for voices to be heard. With the amazing support of Amy Oughton, the communication portfolio holder, and Georgia Holibar, Giving Voice Aotearoa champion, we have formed a consumer focus group connected to the campaign. We have had two meetings this year so far with attendees in both Auckland and Christchurch, connected via Zoom. There are people with a range of communication disabilities in our group, providing different views and opinions. It was notable in our February meeting that all participants shared a common goal: to raise awareness about communication accessibility in Aotearoa through sharing stories, lobbying government and gaining media attention.

In August, we held our second meeting which was centred around the Week of Action and the Choosing Wisely (a global initiative to stop unnecessary tests and treatment) campaigns. The group made suggestions on the "Press pause" logo and how to best use it as a promotional resource during the awareness week. People were particularly interested in getting involved in Choosing Wisely by reviewing the resources to support shared decision making for people with communication disabilities. It will be really exciting to see where this group will lead Giving Voice Aotearoa and our association in the future.

Continuing with the concept of ensuring that the voices of consumers are heard, a consumers' panel session was held at the NZSTA and Speech Pathology Australia collaborative conference in June. This session aimed to challenge whether the practice of speech-language therapy does a successful job of collaborating, engaging and empowering with clients and their whānau. This created a space for consumers to talk and delegates to reflect. Three representatives were on the panel, including NZSTA's kaumātua, Mātua Rukingi Haupapa. Panel members shared their experiences as clients and their interactions with speech-language therapists. Although their stories were different, the discussion surrounded

The Giving Voice Aotearoa consumer focus group aims to meet three times a year with people who have the lived experience of communication disability. The group has identified that communication access and raising awareness are key goals. They are able to provide feedback on projects within NZSTA and related areas. New members are always welcome.

the importance of building a rapport with a client and including their whānau in this process. Then the consumer representatives and conference delegates had an open discussion about how the service of speech-language therapy can be improved. Again, relationship-building appeared to be the main focus within group discussions and how essential it is to communicate effectively with clients, to ensure that their needs are met. I am so grateful to have had the opportunity to facilitate this consumer panel session and be part of a very successful conference. Ngā mihi mahana, ngā mihi ki a koutou a NZSTA.

Based on what we have achieved thus far, the future is looking bright. The support and insights provided by consumers will help guide the practice of speech-language therapy in Aotearoa towards collaborating, engaging and empowering.

Nāku noa,
Geneva

Professional standards Tūranga ūmanga

Anna Miles professionalstandards@speechtherapy.org.nz

International Dysphagia Diet Standardisation Initiative (IDDSI) update

I hope everyone is happily using IDDSI terminology and standards in their workplace now.

Level 7 Regular Diet Easy to Chew

There are a few updates to IDDSI. Check out the new Level 7 Regular Diet Easy to Chew. This was created based on our feedback that the jump from Soft and Bite Sized to Regular was too great.



Copyright guidelines

Remember you can freely use all the IDDSI handouts and resources at www.iddsi.org

If the IDDSI framework or any IDDSI material is reproduced in any electronic or printed materials, website, promotion information, communications, please be sure to cite the creative commons license:

The International Dysphagia Diet Standardisation Initiative 2016 @ <https://iddsi.org/framework/>. Attribution is NOT PERMITTED for derivative works incorporating any alterations to the IDDSI Framework that extend beyond language translation.

Supplementary Notice: Modification of the diagrams or descriptors within the IDDSI Framework is DISCOURAGED and NOT RECOMMENDED. Alterations to elements of the IDDSI framework may lead to confusion and errors in diet texture or drink selection for patients with dysphagia. Such errors have previously been associated with adverse events including choking and death.



New Zealand progress

The NZSTA are participating in the Health and Disability Services Standards Review and advocating for communication and swallowing standards in aged care. A NCEA Assessment Standard – Hospitality on IDDSI has been proposed and approved. This will eventually lead to the development of IDDSI training for chefs in aged care.

Keep in touch with your successes and challenges.

Anna



Expressions of interest:

NZSTA position paper – the speech-language therapy assistant role

Calling speech-language therapists working in education and health. The NZSTA position paper on the speech-language therapy assistant role was created in 2008. It is now out of date, and much has changed in how we work with other professions and with delegated responsibilities. If you are interested in participating in the revision of this position paper, please contact Anna Miles at professionalstandards@speechtherapy.org.nz

Member networks Tūranga whatunga mema

Jodi White membernetworks@speechtherapy.org.nz



Kia ora koutou and welcome to spring,

Thank you to for your continued commitment to the profession and NZSTA. Great things have been happening this year and a lot of it is down to the members' active involvement, we really appreciate it. The association can only be as strong as its membership. The last few months have been very busy for me: attending the joint NZSTA and SPA conference in Brisbane in June and then the IALP conference in Taipei in August. It was humbling to be able to represent NZSTA and New Zealand, and to help promote the 2022 IALP conference. Most exciting for me was being the flag bearer at the opening ceremony!

Ngā mihi nui,
Jodi

Q: Can we have further detail about what the **consumer focus group** entails for clients who volunteer?

- How many meetings a year?
- Where with these meetings take place?
- Will client travel costs be covered?
- Will the expectation be that people attend remotely over Zoom or

Skype? If so, this could be a barrier to participation for some of our client groups.

- How many consumers in total do they envisage? Just one for each client type?

A: Geneva Hakaia-Tino, our consumer lead, has written an article for this edition on page 15. If anything requires further clarification, please get in touch with me.

Q: Discussion led by Hannah Barnes on the **high cost of thickener for patients with swallowing difficulties**. Many members working in the adult population contributed, and discussed accessing WINZ funding. We are looking at alternative thickeners, not just ones made for this purpose. Alison Paulin promoted the need to increase the use of the free water protocol. We request advocacy from NZSTA for funding or subsidisation of thickeners.

A: A submission to Pharmac is being prepared, including information from the IDDSI (International Dysphagia Diet Standardisation Initiative) guidelines. Please contact Anna Miles for more information or to contribute.

Q: Is it possible not to have a plastic cover for **Communication Matters** environmental reasons?

A: The current soft plastic packaging indicates that it is biodegradable. We understand there are different levels of biodegradability, at this stage it is our best solution.

Note from editor: MMA (Media Magazine Association) is currently testing compostable wrapping for magazines that is strong enough to go through mailing machines. They intend the final product to be available for all magazines, so watch this space.

Q: "I had raised with the CPD Audit panel that it would be great if they could put some support behind an **overseas 'area meeting' or forum** of some kind."

A: We are unable to set this up as the logistics are very challenging. However, if anyone living overseas wants to create an international area meeting, they are welcome to. Please contact me and I will help.

Q: Please could we progress the provision of a **microphone** to enable members attending area meetings over Zoom to hear more easily?

A: We have been looking at different options and believe we have now found a suitable solution. We plan to purchase a number of these devices and share them around area reps for use at meetings.

Māori & cultural development Tūranga kaupapa Māori

Renee Taylor culturaldevelopment@speechtherapy.org.nz

Kia ora koutou,

Mātua Rukingi, President Annette and I recently spent time in Christchurch. Since our noho in Ohinimutu, we've been thinking of ways to better connect with the wider membership to realise our goal of working within a bicultural framework. We aren't there yet but have come leaps and bounds. The most promising part of this journey so far has been the connection of Mātua Rukingi with the NZSTA, and the positive attitudes amongst the board and membership which are moving in the right direction.



Above:
Visiting the memorial wall was a moving experience.

The volume of work that we all do on the board is tremendous and at times it feels like the visibility of this constant mahi is not so obvious. So, what better way to bridge this gap and increase the connection across the motu than kanohi ki te kanohi (face-to-face)! While we'd absolutely love to provide this kanohi ki te kanohi in every single part of Aotearoa, you can appreciate that this is not logistically possible. We must start somewhere though, right?! And what better place than Annette's old stomping ground of Ōtautahi Christchurch.

We started our day quietly visiting the memorial wall. This was a very emotional time. We spent time being present, taking in the quiet and calm space, and thinking of those who were lost in the earthquakes. Mātua Rukingi gently started a karakia and then we jointly sung a waiata. It was a moving moment; beautiful and heartfelt.

We had been invited to visit and present to the speech-language therapists and wider staff at Burwood Hospital with a focus on stroke. A big thank you to Adele Siave for organising a great event. There was a large turnout with a mix of speech-language therapists, dietitians and doctors. Being welcomed by Mātua Ruru was very special. As usual, Mātua

Rukingi stole the show and presented a great kōrero about his stroke journey, where that has led him, and our new pathway together. The response was immense and revealed a lot of emotion. The connection was deep and wairua present, to say the least.

Next stop was University of Canterbury for the area meeting. I've been to a few area meetings in Auckland in my time, but this one took the prize for "best incentives to attend an area meeting". Nothing quite like being greeted with a glass of bubbles and an assortment of snacks. I think the best part was watching Mātua wear a headset to connect with the speech-language therapists who were using Zoom to join! Again, this forum was a great way to use face-to-face interactions to help grow and strengthen the bond between the board, members, and our new kaumātua, and share the values of biculturalism that we're trying so hard to achieve. There was some great kōrero and whakaaro shared.

Our time in Ōtautahi was hugely beneficial and we are so grateful for the hospitality.

So, until next time!

Ngā manaakitanga,
Renee



Te reo o te Kaumātua Rukingi Haupapa

Ngongotaha ki runga, Pukeroaoruawhata ki raro

**Ko Te Utuhina te awa e rere nei ki Te Rotoruanuia
Kahumatamomoe**

Ko Te Arawa te waka

Ko Ngāti Whakaue te iwi

Ko Tamatekapua te tupuna

Ko Rukingi ahau

Kia ora mai tātou katoa,

It has been a busy three months since the last time I shared whakaaro with you in the winter issue. I was privileged to be involved in the accreditation process at the University of Auckland, and then meet with people at the other end of the country at Burwood Hospital, the University of Canterbury and even an aphasia group. This gave me a chance to meet health clinicians, speech-language therapists, university staff and students, and survivors – and just share what we are doing. It amazes me the diversity of the work you all do. Ngā mihi nunui ki a koutou katoa.

At the same time, I was also tinkering with writing waiata to go with the already growing kete (collection) of songs used in the many formal situations we are involved in, for example, the Brisbane conference. The waiata used are excellent, however, none are specific to NZSTA or to the work you do. And this led to two waiata, and to the right are the words and meanings.

The waiata tunes will be loaded on to our website so you can learn and practise wherever you are.

Nō reira, kia kaha, kia maia tatou mā.

Nāku noa,
Rukingi



Tōnā Reo

Ko te tohu o te rangatira, ko tōnā reo
Tu kaha tu maia ki tōnā ao

Nā te aituā, mate tīnana

ka pā ki te kōrero o te tangata

Ko te ora o te rangatira, ko tōnā reo

Tō mātou mahi he awahi, he arahi

i te hunga hauā ki Te Ao Tūroa

Ko te kai o te rangatira ko te kōrero

Kōrero

Ko te kai o te rangatira ko te kōrero.... o
whakarongo, a waha, tuhituhi, pānui kupu... u

Ka hapa ēnei pūkenga ka whakararu i te tangata ... a

Ko mātou tetehi hunga hei awahi, hei arahi ... i

Kia kōrero anō te rangatira e...!

Voice

The sign of a person is reflected in his language
Standing strong and tall in this world.

Accident and illness

affects the communicating abilities of the person.

The wellness of a person is reflected in his voice

**Our work is to support, guide and teach people
with disabilities in today's challenging world.**

Communication is essential to how we live.

Communication

Communication is how we live.

Listen, speak, write, read.

If these skills are broken the person will be
seriously affected.

We are a group who can support and guide
to communicating affectively once again.

NZSTA Private practice forum July 2019

Anna Miles professionalstandards@speechtherapy.org.nz
Bridget McArthur privatepractice@speechtherapy.org.nz

Over 50 NZSTA private practitioners met in Wellington to talk about what is going well, the challenges and possible solutions.

The attendees were positive and showed a strong desire to support each other at a national level. We reflected on what it is like to be a private practitioner. The collective knowledge of the group also meant we could discuss practical solutions and finalise a plan.

Look out for the new NZSTA private practitioners' page on our website, a place to share resources and feedback on courses relevant to working privately. The NZSTA have agreed to support an annual meeting for private practitioners and to investigate webinars relevant to working privately.

What I love ...

- There is no shortage of work across health or education
- Good work and business satisfaction
- Autonomy and creativity
- Ability to build and work to own values
- Varied caseload
- Sharing of resources
- Control over waitlist, caseload/clients and how you work, new ways to work
- Gain confidence in clinical skills
- Easy to specialise
- Feel valued
- Flexibility of hours

The challenges ...

- Vulnerability of working for self, health and safety (client and self), liability
- Learning how to run a business
- Feelings of being an outsider, isolation
- Accessing other professional services, as an outsider
- Lack of support
- Marketing: you're not selling a product, selling yourself
- Financial issues: practitioners must charge enough to cover supervision, conferences, continued professional development, advertising, and other non-billable time

Solutions

- NZSTA private practice webpage: recommendations between members, list of supervisors, links to useful resources
- Advice from private practitioners in *Communication Matters*
- Professional development events, e.g., risk, ethics, small business management
- Annual private practice meeting
- Working document for some guidelines for private and public working together
- Recommendations for people going into private practice: mentorship, health and safety policies, peer review audit form, etc.

We need your help with the actions from the workshop. Please:

1. Write an article for *Communication Matters* with your reflections or advice on working privately.
2. Recommend courses and resources you have found. Send to Bridget McArthur for the NZSTA private practitioners' page.
3. If you'd be happy to be a supervisor to a NZSTA private practitioner, let Bridget know so your name can be added to the NZSTA private practitioners' page.
4. Let us know if you'd like to participate in a working group to help develop documents to support NZSTA private practitioners.



Area updates Kōrero a rohe

Waikato

- NZSTA awareness week was a success with lots of wonderful activities throughout the region and excellent engagement from colleagues and the public. We received positive feedback on the electronic resources created by NZSTA. It was also wonderful to incorporate Te Wiki o te Reo Māori within this as well.
- We are looking forward to supporting the conference for Māori Stroke Survivors being convened by Mātua Rukingi Haupapa at the beginning of October in Rotorua.
- Waikato DHB hosted a Midlands Regional Stroke day which has had some great feedback already.
- Recent increased funding has been provided to education for disability and DHB staff. It is currently being decided how this funding will be allocated.
- Members who had attended the private practitioners' forum in July gave positive feedback.

Time to get out more and enjoy the longer evenings from now on. Happy kōanga (spring) everyone.

Gwen Kerrison

Central

- There have been several staffing changes and new vacancies arising, with people returning from maternity leave and others moving out of the region.
- Kate Willoughby will be completing her postgraduate diploma in applied linguistics shortly.

Elisa Mynen

Canterbury/Westland

We were lucky enough to use our winter meeting to meet with Kaumātua Rukingi Haupapa, Annette Rotherham and Renee Taylor. Mātua Rukingi spoke about his journey following his stroke and how he came to be working alongside speech-language therapists in his new role as kaumātua for our association. He shared some of his experiences so far with NZSTA board and some of his learnings from his PhD in progress. Annette, Renee and Rukingi – it was an awesome opportunity to meet with you all and learn from you all – thanks for heading south!

Ruth Ramsay & Kate Cook

University of Canterbury

We have continued to organise our popular student professional development events. The topics have included working in the NICU (neonatal intensive care unit), ICU, and working with people with hearing loss. It is a great opportunity for students to see where their studies can lead to and we are grateful for the speakers who gave their time.

Livvy Pride, Emma Barbafigera & Jessica Eagle

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