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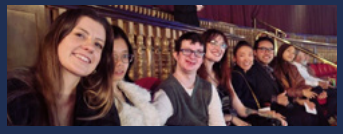
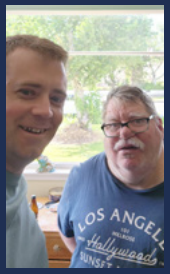
communication matters






From voice to influence: Communication as the pathway to citizenship

Digital Health needs SLTs • Interview with Siobhan Molloy

Contents
Rārangi upoko kōrero

Spotlight on participation and accessibility – this edition of Communication Matters includes articles about three initiatives supporting community participation and connection for people with disabilities. This was a major thematic focus of this year's NZSTA Speech-language Therapy Leaders' Summit, which took place in June.

Cover image: Many thanks to IHC, Spectrum Care, and Headway for providing these images of their community groups.

Please contact the editor with your ideas at any time: editor@speechtherapy.org.nz

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NZSTA upcoming events

Check out the **event calendar**, **member learning hub**, **bicultural kete**, and **online continuing professional development** sections of the NZSTA website for additional professional development opportunities.

Email **editor@speechtherapy.org.nz** to list your event on the NZSTA website in future issues.

OCT

8th National Dyspraxia Conference

Ōtautahi Christchurch
2–3 October

Theme: Paving the way for success

More information available at
dyspraxia.org.nz

OCT

Talking Mats Foundation Training

Tāmaki Makaurau Auckland
23 October

To book a place, email
contact@talkingtroublenz.org

OCT

ORL 2026: 79th Annual General and Scientific Meeting of the NZ Society of Otolaryngology, Head and Neck Surgery

Cordis Hotel Auckland
27–30 October

Deadline for abstracts:
6 July

More information available at
orl26.nz

NOV

Tracheostomy Management Simulation Workshop for Speech-language Therapists

University of Auckland Simulation Centre for Patient Safety, Grafton Campus, Tāmaki Makaurau Auckland

Deadline for abstracts:
19 November

Registration available at
shortcourses.auckland.ac.nz/courses/tracheostomy-management-simulation-workshop-for-speech-language-therapists

NOV
DEC

Mental Health for Young People with Language Disorders – presented by Dr Emily Jackson

Webinar (two sessions)
19 November, 3 December

Registration available at
events.humanitix.com/online-mental-health-for-young-people-with-language-disorders

MAR
2027

Traumatic Brain Injury Conference NZ

Te Pae, Christchurch
10–11 March 2027

Theme: Traumatic brain injury through the lifespan – recovery, living and ageing

More information available at
braininjuryconference.nz

It all starts with Sabi

Tahlia Tini • Member engagement coordinator, NZSTA

If you asked my daughter Sabi what she wants to be when she grows up, she'd tell you a K-pop singer. She has Down syndrome, absolutely loves being the centre of attention, and is one of the most determined people I know.

I'm also lucky enough to be the new member engagement coordinator for the NZSTA. You might be wondering what those two things have to do with each other. **For me, absolutely everything.**

My role is to support our members, celebrate the incredible work happening across the profession, and help create opportunities for us all to connect. Whether that's facilitating learning and professional development opportunities, strengthening connections across sectors and regions, sharing member stories, or simply helping you get the most from your membership, my role is all about building a strong, connected community.

But long before I joined the NZSTA, I was simply Sabi's mum, learning first-hand just how life-changing the work of speech-language therapists can be.

Sabi has a language communication difficulty, and while communication is something many of us take for granted, it hasn't always come easily to her. Processing information, finding the right words, understanding complex conversations and expressing herself can all require far more effort than most people ever see. It isn't until you watch someone you love being excluded because they can't get the right words out that you truly understand how small, and how lonely, the world can become without the connection that communication brings.

At the NZSTA Speech-language Therapy Leaders' Summit recently, I found myself unexpectedly moved to tears while listening to an advocate speak about the work happening in Australia to introduce picture-based menus in restaurants and cafés. My mind went straight to Sabi.

It has taken years of therapy, practice and growing confidence for her to be able to order from a menu herself. The simple act of asking for a lemonade, something most of us do without a second thought, has been massive for our family.

But it's never really been about the lemonade.

It's about independence. It's about dignity. It's about having the confidence to use your own voice and knowing someone will understand you. It's about being able to participate in the small, everyday ways that make up an entire life.

It's about rangatiratanga.

Hearing about picture-based menus reminded me that inclusion doesn't always require huge, expensive solutions. Sometimes it's the simplest changes that have the greatest impact. A menu with pictures alongside words could be the difference between someone ordering for themselves, or needing someone else to speak for them.

> For me, member engagement isn't just about membership. It's about building a community where people feel connected, valued, and supported to do their very best work.

As Sabi's mum, one of the hardest things has been watching her work twice as hard for things that come so effortlessly to others. Along the way, I've become more than Mum. I've become an advocate, a researcher, a cheerleader and, at times, her interpreter.

You celebrate milestones that other people might not even notice. A new word. A sentence that comes a little more easily. A conversation where you don't need to step in. Ordering a lemonade.

Those moments are everything.

While I'm not a speech-language therapist, our family has had the privilege of being supported throughout Sabi's life by some truly incredible members of this profession.

I've seen first-hand the skill, patience, creativity and compassion that goes into helping someone find their voice. I've watched therapists celebrate tiny breakthroughs that eventually become life-changing milestones. I've watched confidence grow because of communication. Many of you have dedicated your careers to helping people achieve moments just like these. I wonder if you realise just how big those moments are for the families standing beside them.

Understanding the impact of your work first-hand makes it incredibly easy to come to work every day in support of this association and its members.

Because you change lives.

Not in abstract ways or through grand gestures, but in the quiet, everyday ways that matter most:

- You help children tell their parents what happened at school.
- You help someone order their own meal.
- You help young people make friends.
- You help adults advocate for themselves.
- You help families connect with each other.
- You give people the confidence to participate in the world around them.

That is truly extraordinary.

Those experiences have shaped how I approach my role. For me, member engagement isn't just about membership. It's about building a community where people feel connected, valued, and supported to do their very best work. It's about celebrating your successes, sharing your stories, helping members connect with one another and making sure you know how much your work matters.

Picture-based menus: Grab Your Wheels creator Kimberly Graham spoke at the NZSTA Speech-language Therapy Leaders' Summit about physical, informational, and communication accessibility.

Because I know what that work looks like from the other side.

I see it every time Sabi is understood.

I see it when she orders her own lemonade.

I see it every time she finds the words she couldn't quite find before.

And I see it every time I get to kōrero with one of our amazing members.

I'm incredibly excited to get to know more of you over the coming months, hear your stories, and celebrate the incredible difference you're making in the lives of people and whānau across Aotearoa New Zealand.

You've changed our family's life in ways you'll probably never fully know. From one very grateful mum, thank you. •

Kupu tuatahi

Carleen Heemi • Māori and cultural portfolio, NZSTA

Ki tōku whakaaro iho hoki, he kore noa iho ngā mamae o tēnei wā, ki te whakaritea ki te korōria e whakakitea mai ki a tātou ā mua. Ko te tūmanako hoki o te mea i hangā e tatari ana ki te whakakitenga mai o ngā tama a te Atua.

Rōma 8:18-19

Tēnei aku mahara, kei te hoki atu ki Te Whakatōhea.

Ē, ko Waiaua kei te pūtake o Makeo.

Hoea rā Mataatua. Nau mai te āio o Te Whakatōhea.

Tēnei te mihi ki a koutou, ko Carleen Heemi tōku ingoa.

Tēnā tātou katoa.

Growing up in Blenheim with the support of my whānau and community to pursue my endeavours, speech-language therapy wasn't something that had ever crossed my path. It wasn't until I attended the pōwhiri at the University of Canterbury in my first year, when I heard a woman from the Ministry of Education speak about how SLTs works with Children, that I thought to myself 'that sounds better than a BCom' and re-enrolled during enrolment week.

Before leaving for university, a leader in our community said to me, "go and do what you need to do, then come back home and help your people". That one comment stuck with me, birthing a desire as a Māori SLT to give back to the community that raised me, and to do all I can to support our reo me ōna tikanga as an SLT.

My experience has primarily involved supporting children with complex communication needs. I am fortunate to have worked across three countries, with Indigenous communities in Australia, Ireland, and Aotearoa. I have had the privilege of working alongside tamariki, whānau, and communities to support communication in meaningful ways. Speech-language therapy is a varied profession that continues to inspire me.

My career highlights include working at Kimi Ora School in Wellington, and being a part of the NeuroSwitch journey in Aotearoa. Assistive technology and augmentative and alternative communication have always played a major role in my career, and working alongside an incredible team makes all the difference.

Te Pā Wānanga o Omaka Marae was a career turning point. We opened our doors in 2019, and being hands-on in a marae based kura gave me a

deeper appreciation of who we are as Māori, how we learn and the value of embedding te ao Māori in all we do. These experiences have rooted my practice in whanaungatanga, kotahitanga, wairuatanga, kaitiakitanga, and the pivotal role of mātauranga woven throughout.

As a Māori clinician, I value creating spaces where te ao Māori and SLT can sit together naturally and respectfully. In my involvement with NZSTA kaupapa and the board, I have been fortunate to contribute to initiatives within the NZSTA that strengthen Māori representation, foster connections between Māori clinicians, and whakamana Te Tiriti o Waitangi reflected in our everyday practice.

The Programme Accreditation Framework 2025 was another career highlight, helping shape the future of SLT education and practice. I believe some of the most meaningful progress happens when we learn from one another in wānanga, sharing ideas, breaking down barriers and bringing forth change.

Outside of speech-language therapy, I am actively involved with the Māori Women's Welfare League. The league is a grounding support in my path as a Māori SLT, tōku reo Māori, leadership, and mahi toi. I value the opportunity to give back and to work alongside wāhine who are deeply committed to creating positive change for future generations. Above all, I am first and foremost a mum to three wonderful teenagers, who are my 'why'. They keep me grounded, and remind me daily of the importance of humour, resilience and perspective.

In balancing family, community, leadership, and clinical work my soul finds rest in my weaving and mahi toi. Most days, I'm weaving or working on a māwhitiwhiti (cross stitch).

This is my way of slowing down, connecting, expressing creativity and storytelling.

The patience and care involved in weaving feel similar to SLT, where meaningful outcomes are created one strand at a time.

Communication is far more than words. It is about identity, belonging, relationships, and being heard. That belief sits at the heart of everything I do, both professionally and personally. I feel incredibly fortunate to walk alongside people during important moments in their lives, helping them find their voice. My hope is that the wisdom and impact of those words spoken to me before going to university will continue to flow through me to the lives of others, inspiring all to continue learning, contributing and advocating for communication, equity, and connection throughout Aotearoa. •

Tika tonu, e te Ariki, kia riro i a koe te korōria, me te hōnore, me te kaha.
Nāu hoki i hanga ngā mea katoa, ā, nāu i pai i takoto ai aua mea, i hanga ai.

Whakakitenga 4:11

Kupu tuatahi

Fern Maxwell • Professional standards portfolio, NZSTA

Ko Wēra te
whakapaparanga mai
Ko Baglan te whenua tupu
Ko Hikurangi te kāinga
Kei Glendene au e noho ana
He Kaiwhakatikatika reo Kōrero
au i Oaklynn Specialist School
Ko Fern tōku ingoa
Tēnā koutou katoa

Kia ora! Shwmae! I am excited to be introducing myself to you all and to be taking on the professional standards portfolio for the NZ Speech-language Therapists' Association.

My first connection with NZSTA was as an Auckland Area Representative.

I enjoyed connecting with our membership in our area, and raising items that were critically important to our region. It is such a privilege to be given this portfolio, and be part of an exciting and passionate board.

I have been fortunate to call Aotearoa home for the past 15 years. What started as a quick trip for the Rugby World Cup turned into a rich and exciting SLT career that has taken me all across the motu.

I grew up in a small village in South Wales right on the coast. I have a large, loud and passionate Welsh whānau who have all been touched by SLT in some shape or form since I was a young child.

This lived experience is what brought me into the field that I am so passionate about.

I am now lucky enough to call West Auckland/ Hikurangi home, where I live with my husband, two children and a myriad of pets. I spent the first years of my career in London, studying at City University and then working in North London as a mainstream schools SLT.

This was where I first became involved and interested in AAC. After three years of working with large caseloads in a varied and fast paced role, I moved to Tāmaki Makaurau where I started off contracting at the Ministry of Education, ACC and for a brief time, BLENNZ- Homai Specialist School.

Following this, I was with TalkLink Trust for 12 years, building my knowledge and skills working with AAC across the spectrum.

I spent time in this role developing supervision pathways for CAT accreditation, managing waitlists, and focusing on building capacity in therapists, whānau and school staff to integrate AAC into day-to-day activities.

Most recently, I have taken a role at Oaklynn Special School, which has been the perfect opportunity for integrating my interest in coaching, AAC, autism, capacity building, and connecting with whānau and pulling it all together.

In 2022 I started my Master's degree at Massey University.

My role at TalkLink, managing waitlists, had led me to ask the question "what does the evidence tell us about service delivery models?" This evolved into a piece of research that looked at the impact of coaching on early childhood educators' confidence with implementing SLT strategies.

This was an exciting and rewarding experience that has positively impacted my day-to-day practice, as I look to weave coaching into my practice with teachers and whānau to achieve the best outcomes for the ākonga I support.

My passion lies in access to services, communication as a human right, and whānau/kiritaki voice.

I am excited to connect with you all over my term holding the portfolio and hope to be able to represent you all as we take our waka forward, into the future together. •

From voice to influence

Debbie Hughes • Chief executive,
New Zealand Disability Support Network

The following is an excerpt of New Zealand Disability Support Network chief executive Debbie Hughes' presentation to the NZSTA Speech-language Therapy Leaders' Summit, which took place this year as a hybrid virtual and in-person event at Parliament in Wellington.

This year's NZSTA Speech-language Therapy Leaders' Summit at Parliament – a fitting location to reflect on concepts of influence and citizenship.

For those who don't know me, I am the chief executive of the New Zealand Disability Support Network. Before joining NZDSN, I worked across disability services, health, and government. Before all of that, I trained and worked as a speech-language therapist.

While I haven't practised clinically for around 23 years, I continue to use what I learned as an SLT every day. In fact, when I look back across my career, speech-language therapy has shaped the way I think about people, systems and participation more than any other professional experience.

I have spent those 23 years watching what happens when communication is absent from systems, policies, and decision-making.

I've seen people excluded from decisions because information wasn't accessible. I've seen consultation processes that met the requirements on paper but failed to enable genuine participation. And I've seen well-intentioned reforms struggle because the people most affected were not meaningfully involved in shaping them.

As a former speech-language therapist and now CEO of NZDSN, I have the privilege of seeing the disability sector from a very different perspective.

From the perspective of a disability sector leader, communication is becoming one of the most important strategic issues facing the sector.

What strikes me is that communication sits at the centre of all of it.

Not communication as a clinical issue.

Communication as a leadership issue.

A citizenship issue.

A system design issue.

A policy issue.

I want to explore a question with you: What does leadership look like when communication is the pathway to citizenship?

Five major shifts shaping the disability support sector

When I look across the disability sector today, I see five major conversations taking place:

1. Choice and control
2. Citizenship
3. Workforce sustainability
4. Outcomes and accountability
5. Inclusion

At first glance those conversations seem quite different, but I would argue they all have something in common. They are all conversations about participation. As speech-language therapists we understand that participation depends on communication, but increasingly I think communication needs to be viewed as more than a clinical issue. It is becoming a leadership issue, a system design issue, and a citizenship issue.

1

Choice and control: Communication is the foundation of self-determination

One of the most significant shifts occurring across the disability sector is the move toward greater choice and control.

There is a difference between providing choice and enabling choice, there is a difference between being offered options and being able to make meaningful decisions, and there is a difference between participating in a decision and influencing its outcome.

Discussions about choice and control often focus on the mechanics of the system rather than the communication conditions that make meaningful participation possible.

As speech-language therapists, we understand that communication is not simply about expression. It is about understanding, processing, questioning, negotiating, and influencing. All of those skills sit at the heart of decision-making.

That's why I don't see communication as a support sitting alongside self-determination. I see communication as one of the mechanisms through which self-determination is exercised.

If the disability sector is increasingly built around supported decision-making, should our role be limited to supporting individuals – or should we also be helping shape the systems around them?

Ultimately, the question isn't whether someone was offered a choice, but whether they genuinely had the opportunity to influence the outcome. That is a communication question.

2

Citizenship, civil engagement, and voice for people with disability: The next frontier is influence

For much of the last fifty years, the disability rights movement has fought incredibly hard for access, including access to education, services, employment, communities, decision-making. Those gains matter.

For me, the next challenge is influence. There is a difference between being present and being influential, there is a difference between being consulted and shaping the outcome, and there is a difference between attending a meeting and changing the decision that emerges from that meeting.

One of the questions I increasingly ask myself is:

Where are people with intellectual disability in the places where power is exercised? Where are they exercising

influence, where are they leading organisations, where are they helping shape legislation, where are they influencing funding decisions?

If we genuinely believe in citizenship, then we need to be talking about power.

Power is not a word that the disability sector is always comfortable with – we often talk about support, care, and safety, but citizenship is fundamentally about power. This includes the power to influence, to disagree, to challenge, and to shape the future.

> “ Communication is not just the pathway to participation, communication is the pathway to power.

If we truly believe in citizenship, then our role is not simply to help people find their voice, our role is to help ensure that voice can influence the world around them.

3

Workforce pressures and building communication capacity: From delivering services to building capacity

Communication doesn't just happen in therapy sessions, it happens in homes, workplaces, communities and relationships.

Support workers, managers, families and community leaders all influence communication outcomes.

I think one of the biggest opportunities for our profession is moving beyond being providers of communication support and becoming builders of communication capability.

If communication is the pathway to citizenship, then communication capability cannot sit solely within our profession.

4

Outcomes, accountability, and demonstrating value: If communication matters so much, why is it so invisible?

Twenty years ago, success was often measured by activity: how many people we saw, how many sessions we delivered, how many assessments we completed.

Today the question is: What difference did it make?

It raises an interesting question for speech-language therapy leaders – if communication is as important as we believe it is, why is it often so invisible in the outcome frameworks that drive the sector?

Outcomes such as participation, belonging, employment, relationships, choice and control, citizenship, and independent living are dependent on communication.

Yet when I read policy documents, performance measures, and outcome frameworks, communication often feels strangely absent.

It's assumed and it’s implied, but it is rarely visible.

One of the questions I would pose to you is this:

> “ Are speech-language therapists sufficiently involved in defining success?

If success is defined through participation, citizenship, and belonging, then communication expertise should have a stronger voice in those conversations.

People do not seek communication for communication's sake, they seek communication because it helps them live the lives they want to live.

For me, the challenge is no longer proving communication matters – the challenge is ensuring that communication is recognised as one of the key drivers of the outcomes the disability sector values most.

5

Inclusive communities and universal design for communication

Who owns communication accessibility?

Too often, communication accessibility is treated as a specialist issue—something that belongs to speech-language therapists and gets considered only when someone with communication needs appears.

I think the future requires a different approach.

One of the most significant shifts occurring internationally is a move away from expecting individuals to adapt to systems, and toward expecting systems to adapt to people.

Communication accessibility is one of the clearest examples of that shift.

Most organisations understand physical accessibility because physical barriers are visible. Communication barriers are often invisible, yet they can be just as limiting.

Speech-language therapists cannot create communication-accessible communities on their own – communication accessibility needs to become everyone's responsibility.

That is why universal design matters. Not because it creates accommodations for a few people, but because it improves participation for everyone.

What this means for the speech-language therapy profession: From communication experts to system influencers

When I trained as an SLT, I certainly didn't imagine I would one day be talking about legislation, citizenship, governance, and system reform.

Communication sits at the centre of all of those conversations, and what strikes me is that speech-language therapists possess expertise that is becoming increasingly valuable beyond traditional clinical settings.

SLTs understand participation, communication barriers, supported decision-making, and accessibility, and you understand what happens when people are excluded from decisions that affect them.

Those are not just clinical skills – they are leadership skills, policy skills, governance skills, and system design skills.

If communication is the pathway to citizenship, then our role is bigger than supporting communication.

It is helping create the conditions that allow people to exercise rights, influence decisions and participate fully in society.

Three challenges for the profession

As I look across the disability sector today, I think there are three challenges that should sit front of mind.

The **first challenge** is moving from intervention to influence.

Supporting individuals will always be important. But people leave our services and return to workplaces, schools, communities, government agencies and families.

If those systems remain inaccessible, participation will remain constrained.

The challenge is not simply how we support individuals, but how we influence the systems that shape their lives.

The **second challenge** is ensuring supported decision-making becomes a reality rather than simply a principle.

The disability sector talks a lot about choice and control, and the challenge now is implementation.

What does good supported decision-making look like in practice? How do we know it is working? And how do we avoid slipping back into substitute decision-making when systems come under pressure?

These are fundamentally communication questions, and I think speech-language therapists have an important contribution to make.

The **third challenge** is citizenship.

I think this is the biggest challenge of all.

If I were standing here in ten years' time, the question I would want to ask is:

Are more people with intellectual disability influencing decisions than they are today?

Not attending meetings, not being consulted, but influencing decisions.

Are they on more boards? In more leadership roles? Helping shape public policy?

Citizenship is not measured by presence, citizenship is measured by influence.

Communication is one of the key pathways through which influence occurs.

Communication as the pathway to citizenship: *The big idea*

If there is one idea I hope you take away, it is this:

Communication is not the destination. Communication is the pathway.

Throughout my career I have increasingly come to believe that communication is the mechanism through which citizenship is exercised.

Communication is how people influence decisions.

Communication is how people express preferences.

Communication is how people challenge systems.

Communication is how people build relationships.

Communication is how people participate in communities.

Communication is how people exercise rights.

Ultimately, communication is how people influence the direction of their own lives.

That is why I think communication access has become system critical – not because communication itself has changed, but because the expectations we now have of disability support systems have changed.

- We expect participation.
- We expect self-determination.
- We expect citizenship.
- We expect inclusion.

All of those things depend on communication.

What strikes me is that the disability sector often talks about participation as though it is the goal.

I increasingly think participation is the outcome of something else.

Participation occurs when people can understand, when they can contribute, when they can influence, and when they can be heard.

Participation occurs when communication is enabled.

That means communication access is not sitting on the edge of disability reform, it sits at the centre of it.

A leadership challenge

I want to finish with a challenge rather than a conclusion.

You already understand communication. I want you thinking about leadership differently:

- Where can you influence systems rather than individuals?
- Where can you influence decision-making rather than simply support participation in it?
- Where can you help create pathways to citizenship?
- Where can you help create pathways to influence?
- And where can you ensure that communication expertise has a stronger voice in the conversations that are shaping the future of disability supports?

The future of the disability sector will not be determined solely by legislation, funding or policy.

It will be determined by whether disabled people are genuinely able to influence the decisions that affect their lives.

If communication is the pathway to citizenship, then speech-language therapists have an extraordinarily important role to play in shaping that future.

Please email:
editor@speechtherapy.org.nz
for the full text of Debbie's kōrero.

Digital Health needs SLTs: Are you ready to get involved?

Rowena Woolgar • Co-chair, Scientific, Technical and Allied Health Digital Council

Digital Health can sound like something that belongs to IT teams, software developers or people with "informatics" in their job title. But it is much closer to everyday speech-language therapy than many of us realise.

SLT's are already part of Digital Health

Arise Consulting defines Digital Health simply as *"the use of technology that helps people manage their health, or helps healthcare services work better"*. 'Health' in this context is meant in its broadest and most holistic sense and this is certainly an area for those working in Education and Justice as well.

Speech-language therapists have been working in Digital Health for a long time. It's our view that SLTs probably haven't always thought about it, or called it that.

We use communication devices and voice-banking tools. We provide therapy by video, create accessible information, contribute to electronic records and help people use technology in everyday life. Augmentative and alternative communication remains important, but it is only one part of our Digital Health story.

The global Digital Health industry is already valued at nearly US$200 billion, and is projected to grow to more than US$500 billion by 2030. The products, services and decisions behind that growth will increasingly shape how clients and whānau access and experience care.

The question is not whether Digital Health will affect speech-language therapy. It is whether SLTs will step forward and help shape it in NZ and beyond.

Step into the rooms shaping healthcare

Who decides which technology receives funding? Who represents communication access when a new hospital is designed? Who helps a software vendor understand what actually happens during a clinical appointment?

Many decisions affecting frontline care are made at tables clinicians may never see. These conversations can include funding, technology investment, engagement between IT and clinical services, procurement, accessibility, system design, data governance, and the interface between digital systems and the people using them.

SLTs understand how communication, cognition, culture, behaviour and the environment affect participation. We notice barriers others may miss.

Our contribution could mean regularly co-designing software with large vendors, rather than being invited to comment when development is nearly complete. It could mean shaping digital check-in

> We do not need to understand every component of the engine, but we should know the important basics: how to check the oil, use the indicators, turn on the windscreen wipers.
>
> Alex Kemp

systems, patient portals, hospital signage, and wayfinding so communication accessibility is built in from the beginning.

It could also mean influencing funding decisions so accessibility is recognised as an essential part of digital transformation, not an optional feature added later.

Clinical informaticians play an important role at these interfaces. They bring clinical knowledge into the design, implementation and improvement of information and technology systems. They often act as a bridge between practitioners, digital teams, leaders, funders, vendors and service designers.

That role may feel familiar. SLTs already translate between people, professions and environments. We understand that even a technically successful system can fail if it does not work for the people expected to use it.

Build the confidence to influence what comes next

Artificial intelligence is becoming part of healthcare administration, documentation, education, decision support and consumer health information. We do not all need to become technical experts, but we need enough understanding to participate confidently.

When some of us met with NZSTA leaders this year, Health Informatics New Zealand chief executive Alex Kemp compared growing our capability in artificial intelligence and Digital Health to owning our first car. We do not need to understand every component of the engine, but we should know the important basics: how to check the oil, use the indicators, turn on the windscreen wipers, and recognise when something is not working properly. AI is similar. SLTs do not need to know how every algorithm is built, but we should understand how to use these tools safely, what questions to ask, where risks may sit, and when human judgement must take priority.

For SLTs, this might mean asking whether voice technology recognises dysarthric speech, whether AI generated information is genuinely accessible, or whether an automated process disadvantages someone with aphasia, cognitive-communication difficulties, or limited literacy. It also means helping clients and whānau understand where digital tools may help, where they have limitations, and when professional advice is still needed.

Digital fluency is more than learning which button to press. It includes curiosity, critical thinking, privacy, governance, evidence, equity, and the confidence to challenge tools that do not work for the people we serve.

Different journeys, one shared direction

STAH Digital is an independent community organisation supporting the Scientific, Technical and Allied Health workforce across Aotearoa New Zealand.

Our beginnings go back around eight or nine years, when professionals across the former district health boards recognised the need for more coordinated and joined-up national working. The group was later endorsed by the Ministry of Health, and we continue to have a memorandum of understanding with the Ministry.

Historically, the group has run an annual event, bringing people together to exchange ideas, strengthen connections and grow Digital Health capability. More information will be shared soon about our November engagement as part of Digital Health Week.

There is no single route into Digital Health.

Our Council members have taken very different career journeys, but we are united by one goal: joining up and amplifying scientific, technical and allied health voices across Digital Health in Aotearoa. To give you a small flavour of how we got here when we were all clinical initially:

Kiri	Hospital Pharmacy > Medicines Information > Digital Health and publishing > Transformation leadership > Health consulting
Mel	Clinical speech-language therapy > EHR system design > Senior system design > Clinical informatics > Digital strategy and design
Andrew	Physiotherapy > Clinical leadership > Quality improvement > Digital Health innovation > System transformation
Jacinta	Physiotherapy > Digital Health study > Quality improvement > Digital Health communities > Technology-enabled care
Wendy	Physiotherapy > Digital Health study > Clinical informatics leadership > Service and locality leadership > AI and digital innovation
Rowena	Speech-language therapy > Specialist practice > Regional management and research > Project and programme delivery > Allied health leadership > Health consulting and system redesign > Digital Health governance and coaching

We are also supported by Health Informatics New Zealand (HiNZ), Aotearoa New Zealand's largest Digital Health community network. HiNZ hosts our website and enables us to use platforms including the eHealth Forum, where people can connect with peers and participate in national and global conversations about Digital Health.

Join us and help shape the future

Our vision is for an amplified, well connected ecosystem that supports and grows the Digital Health of tomorrow with scientific, technical and allied health workforce communities.

We are already at some of the tables you might not know exist. But we need more SLTs involved asking questions, sharing ideas, building confidence and bringing the realities of clinical practice into Digital Health conversations.

You do not need to wait until you are an expert. We invite you to join the community, connect with your peers and start contributing. The future of Digital Health is being shaped now. Our profession, our clients and our whānau would value your expertise and perspectives, we'd encourage you to step in and be part of this growing area.

Written by Rowena Woolgar on behalf of the Scientific Technical Allied Health Digital Council

Useful links:

Join the STAH Digital community page: **ehealthforum.nz/g/STAHDigital**

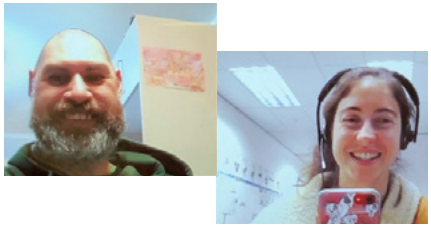
Follow any of the council members on **LinkedIn** to stay up to date with news and event information:

Rowena Woolgar | LinkedIn
Melanie Consedine | LinkedIn

The IHC Online Friendship Programme

Hannah Verry • Online Volunteer Coordinator, IHC New Zealand

The IHC Online Friendship Programme connects someone who has an intellectual disability with a volunteer friend who shares similar interests, helping them build a meaningful friendship through video or phone calls. Because it's all online, it doesn't matter where you live or where you travel. You can stay connected and maintain a friendship from anywhere.



IHC Online Friendship Programme volunteer Rachel and friend Lee.

Peter and Ross have shared weekly phone calls since the programme started about five years ago during COVID lockdowns. The pair talk about TV, sport, and life.

Rachel and Lee catch up on Zoom to talk about movies, music, LEGO, and even Rachel's cat.

> "Our friendship has really grown a lot over the last five years," Rachel says. "It has shown me the power of consistently showing up for each other."

Not all online friendships last that long, nor do they need to. People commit for as long as it's beneficial to them. IHC's volunteer coordinators match friends from across the motu, creating opportunities to get to know someone from a different part of the country and broaden social connections. Every friendship is unique. All communication is safe and supported, with volunteer friends carefully vetted to ensure a positive experience. The programme is not only a fun way to connect but also helps build confidence when using technology, supporting people to grow their digital skills in a safe and healthy way.

Building connections and confidence

People join the programme for many different reasons, and everyone has their own motivation. Our overall aim is to create opportunities for people with intellectual disabilities to communicate, participate socially, and build friendships along the way.

While every friendship is distinctive in its own way, there are often common communication learning outcomes that emerge through ongoing conversations over time in a supportive environment. These can include initiating conversations, taking turns in communication, understanding emotions, maintaining topics of conversation, and building social confidence.

When communication is supported through online friendship in this way, we often see positive outcomes such as increased social inclusion, greater self-confidence, improved communication skills, stronger friendships and support networks, better emotional wellbeing, and reduced loneliness within our communities.

These outcomes do not happen because people are being taught communication skills in a formal way. Rather, they develop naturally through meaningful interactions and shared experiences with someone who takes the time to listen, connect, and build a genuine friendship.

From a speech-language therapy perspective, the Online Friendship Programme creates opportunities to practise communication skills through real-life social interactions. The one-to-one nature of the programme allows friends to build trust over time, supporting people wherever they are on their communication journey. For example, some video calls might simply involve listening to music together or playing an online game before conversations begin, and that is perfectly okay. Meaningful communication looks different for everyone.

Digital inclusion and safe online connections

People often have mixed feelings about meeting and communicating with others online. The idea of strangers meeting online can be daunting for people wanting to explore these opportunities, as well as for their whānau and support networks. This is why we created a programme that addresses these concerns while keeping digital inclusion at the centre of our planning.

Everyone has the right to access the digital world, and we want to ensure that technology barriers do not limit social opportunities. This commitment is strengthened through ongoing information sharing and Easy Read resources that have been co-designed by people with an intellectual disability who are involved in the programme.

We also recognise that disability is not just about a person's impairment. Disability is created when people encounter barriers in their environment that limit their ability to participate fully. By understanding this, we can identify and reduce barriers online and create environments where communicating with other people, groups or services is more accessible. This might include using visual supports, Easy Read resources, alternative communication methods, adapted technology, or simply allowing people to engage in ways that work best for them. Our aim is to create online spaces where people can communicate, participate, and build relationships in ways that suit their individual strengths and preferences.

We also aim to keep this conversation open through our ongoing online ambassador and self-advocate, who facilitates monthly Connect in the Community sessions alongside the Online Volunteer Coordinator. These sessions provide opportunities to share experiences, learn new skills, and build confidence in navigating online spaces safely in a group setting.

We work with a range of abilities: people who are highly confident using technology, as well as those who need extra support, which we are happy to provide. We also regularly see people with intellectual disabilities introducing their volunteer friends to online games, chat platforms, and technology they may not have used before. The learning often goes both ways.

Looking ahead

We know there is still more work to do to support people in our community to engage online. And we will respond by continuing to build on our mahi to create opportunities for friendship and develop safe and healthy ways to participate in social activities online.

We want the programme to be accessible to more people, and that includes exploring new technologies and communication techniques. We are always keen to hear from people who would like to volunteer or share skills that could help us expand what is possible. Every friendship is different, so we always start by having a conversation about the communication methods that work best for each friendship and go from there.

The Online Friendship Programme is about creating opportunities for connection, belonging, confidence, and friendship, ensuring that everyone has the chance to participate in meaningful social relationships, no matter where they are.

If you would like to join the programme, either as someone looking to make a friend or as a volunteer, please get in touch with Hannah Verry at Hannah.verry@ihc.org.nz. We would love to hear from you.

Discovering new experiences with Gig Buddies Auckland

Hans Matig-a • Gig Buddies Project Lead, Spectrum Care

Gig Buddies was founded in Brighton, England in 2013 with a single goal: to support disabled people to stay out late. It has since seen projects spring up across the UK, Australia and Germany. In 2024 Spectrum Care launched a project in Tāmaki Makaurau Auckland, with the ambition of encouraging many more projects across New Zealand.

At Gig Buddies Auckland we believe that everyone deserves the opportunity to enjoy the social experiences many of us take for granted. Our project matches disabled adults, referred to as participants, with volunteers who share similar interests, creating genuine friendships through shared activities and experiences.

The core of Gig Buddies is when a paired participant and volunteer get out and about together to enjoy their shared interests, but we also create regular "socials" where everyone can meet as a group and enjoy experiences together. Live gigs are at the heart of how Gig Buddies began, but the project has since grown to include a huge range of experiences, from sports and festivals to cafés, movies, and outdoor adventures. The goal isn't just to attend events; it's to build confidence, foster independence, and create meaningful connections that extend beyond our organised activities.

One of our most recent collaborations with Wellness Riders introduced participants and volunteers to the exciting world of skateboarding. For many, it was their first time stepping onto a skateboard. There were plenty of smiles, a few wobbles, and lots of encouragement along the way.

Experiences like these are what Gig Buddies Auckland is all about. They give participants the chance to try something new. After giving skateboarding a go, some may realise it is not for them, while others may discover a whole new passion.

Through these socials, participants and volunteers may gain a new hobby, build confidence, make new friends, or discover a community where they feel they belong. When that happens, we know we've done our job.

Gig Buddies attending the Aotearoa Music Awards 2026.

Ultimately, the biggest achievement is simply having the confidence to try something new.

At Gig Buddies Auckland, we celebrate every new experience, every friendship formed, and every person willing to say, "I'll give it a go." Because sometimes, one new experience is all it takes to open the door to confidence, connection, and belonging. •

If you'd like to sign up as a participant or volunteer, go to:

gigbuddiesauckland.org

Finding your people after brain injury

Stacey Mowbray • CEO, Headway NZ

Joan calls her local Headway Connect Group "a lifesaver." For her, it's a room full of people who simply get it.

Living with concussion or brain injury can be isolating. Recovery often continues long after appointments end, and many people are left navigating it without anyone around them who truly understands what's changed.

That's what Headway NZ's Connect Groups are for: bringing people together to share experiences, swap practical tips, and be reminded they're not the only one going through this.

"These volunteer-supported groups are a chance for people to meet others who understand what you're going through, share experiences and connect with your local community," says Nicola Cottle, Headway's navigation services lead.

For participant Paul, that's meant picking up small, practical ideas from others in the group. "I personally like getting little nuggets of ideas or nudges in the right direction, and this time it was about the volunteering that one of the guys was doing." For Joan, it's been about her own wellbeing – her group has been *"lifting my spirits, by speaking to others going through a similar experience."*

The groups are growing fast. *"Our Connect Groups are hugely popular with our community. We now have 12 groups running across Auckland and Northland, including our newest groups in Pukekohe and Warkworth,"* says Nicola. Some connect over a shared interest such as art, singing, or tai chi, and more are on the way. *"As interest grows, we'll keep creating more groups. Te Atatū and Wellsford are next on the list."*

It's a need that's easy to underestimate.

50,000

New Zealanders affected by concussion or brain injury every year

Up to half

go on to experience persistent symptoms that affect learning, work and everyday life

For clinicians, that often means the person discharged from services may still be some way from feeling like themselves again, and peer connection can be part of what carries them through that stretch.

Connect Groups sit alongside the rest of Headway's work supporting people and whānau. Through our navigation service, we offer free advice and information and help connect people with the right services. We also deliver HeadSmart

The New Lynn Connect Group meeting in a café.

Schools, supporting teachers and students with return-to-learn; BrainSmart workplace education for employers; and Lunch and Learn sessions on topics like overwhelm, fatigue and everyday strategies after injury.

Nearly 50 years on, Headway is still doing the work Dr Dorothy Gronwall and Dr Phillip Wrightson started in 1981 – guided today by an advisory board of some of New Zealand's leading brain injury experts and researchers, alongside people with lived experience. •

If you think a client would benefit from a Connect Group, we'd love you to refer them through our website. Find out more at headway.org.nz/our-services/connect-groups and sign up for our newsletter to stay in the loop.

Kupu whakamutunga
Interview with retiring kaiwhakahaere matua Siobhan Molloy

Emma Wollum • Editor, Communication Matters

As announced in the NZSTA email newsletter, Siobhan was recently named the **New Zealand Society of Association Executives' 2026 Association Leader of the Year**. *In an interview with Communication Matters editor Emma Wollum (CM), retiring kaiwhakahaere matua / executive director Siobhan Molloy (SM) discussed her highlights in the role and her hopes for the SLT profession in the future – as well as her views on capital letters.*

CM: Are you looking forward to your retirement?

SM: I have very mixed views, actually. Sometimes I feel a little bit tearful about it, to be quite frank. But I promised myself I would retire when I was still really enjoying work. I'm going to actually have this lovely warm feeling.

CM: How has the speech-language therapy profession changed during your time with the NZSTA?

SM: I think the profession has grown in confidence, visibility, and ambition. One of the biggest changes has been confidence in Te Tiriti responsiveness, and the ability to articulate that well. The shift to cultural safety has been major. Technology has also been a huge change, and has certainly enabled a lot more than was possible, but has also made things more complex in some ways. It feels like the demand for SLT has increased, and workforce shortages and inequities in access seem much more apparent than before. I'm sure they've always been there, but perhaps we're actually taking notice and providing evidence for that now.

CM: Often increases in need can accompany increases in awareness of the profession, do you see that happening?

SM: Absolutely – I think SLTs are working across increasingly complex areas in all sorts of sectors. I think there is a stronger understanding about communication and safe swallowing, and how it's so fundamental to people's health, dignity, and citizenship, to borrow the words of Debbie Hughes *(Editor's note: Debbie Hughes' presentation to the NZSTA Leaders' Summit on* **p.10** *of this issue).*

CM: What are the highlights of your time as kaiwhakahaere matua, and what would you say are your most significant achievements?

SM: The first highlight of this job actually has been working with some really nice people. I have to say it really did feel like coming home for me, after managing other membership associations. I found that the people I was working with and the passion that they brought to the work was fantastic. I'm proud of the part I've played in helping build a stronger and more sustainable platform for NZSTA. When I arrived, the NZSTA hadn't had an executive director for some ten years, so one of my first tasks was really to look at moving what was essentially a management committee into a governance group, and being quite clear what was governance and what was management.

I think that as a team, we've successfully navigated that, and we're still navigating it. NZSTA is also seeing other staffing growth, in that we now have a member engagement coordinator *(Editor's note: See membership engagement coordinator Tahlia Tini's article on* **p.4** *of this issue)*, and a qualifications approval officer.

Other highlights include membership growth – in the five years I've been here, membership has grown from just over 1000 to over 1500 now. Another area where I think we've become stronger is putting in submissions, which in turn raises awareness of the profession.

CM: Would you say that the advocacy role of the NZSTA has been a major focus for you over your time as Executive Director?

SM: It's certainly taken up quite a bit of time. I'm quite proud of the business case we put together a couple of years ago (see **speechtherapy.org.nz** for 'The case for building the speech-language therapy workforce capacity: We need more SLTs'), and there was a whole team involved – I seldom do anything just by myself. What we've done is laid a foundation for where we're at, provided evidence for when we are going to argue about workforce issues. I think it is quite powerful.

Siobhan accepts her award as New Zealand Society of Association Executives' 2026 Association Leader of the Year.

CM: What are your thoughts about speech-language therapy in the context of becoming a registered profession?

SM: I would say to SLTs, be careful what you wish for. I think we've got an excellent, robust, self-regulation system of accountability. We've developed a strong bicultural Programme Accreditation Framework, and I'm very proud of the work that's gone into it. We are about to very soon reveal the Code of Ethics, which again is a bicultural document. In many respects, our processes already mirror those of registered professions.

What we lack is two things – the fact that registration is not mandatory, and that there is no title protection for SLT. I'm working very hard with the different sectors to try to make registration mandatory. I think there could be other, less heavy-handed options in the Health Practitioners Competence Assurance Act – for example, our self-regulation processes could be audited. I think that just having registration and then having two separate bodies would be very, very unaffordable for the profession. Perhaps the NZSTA has to do something about working with perceptions of members and the public, about being proud of being self-regulated and having trust and faith in the self-regulation.

CM: What do you see as being the most significant priorities going forward for the NZSTA?

SM: I think a key priority will be continuing to grow and diversify the workforce. But along with growing and diversifying the workforce, one has to grow the jobs as well. You can't just train a whole pile of people for no jobs, and some of that's not in our control other than our advocacy work. The profession doesn't reflect the communities that it serves, so we need to look at more training places, and more funding for roles in areas of unmet need. Clinical placements accompany more training, so we need more support from the field, and stronger pathways for Māori and Pasifika students.

For the NZSTA as an organisation, an ongoing priority would be strengthening the profession's cultural, regulatory, and organisational foundations. We have got a great Te Tiriti o Waitangi Responsiveness Policy now, but this needs to be embedded at every single level, and that won't happen overnight. We'll probably need to be reviewing our Return to Practice and New Graduate Framework, are they still fit for purpose?

I think member wellbeing is also quite important. I feel that expanding the workforce in terms of numbers, is only going to take us so far. If we actually have clinicians leaving because they're exhausted and they're burnt out, that's something we need to address.

I hope the profession continues to communicate its value confidently, build strong partnerships across sectors, and engage thoughtfully with technological change, including artificial intelligence. We need to be thinking about protecting relationships, professional judgment, and human connection, because that's obviously the heart of SLT.

CM: In terms of providing sufficient placements for a growing workforce, how do you see that working – how do we do it?

SM: I'm kind of surprised that placements aren't mandatory in teaching hospitals for a start. I know we don't all have placements in health settings, but it would strike me that there should be obligations in teaching hospitals for meeting that need. I think that everybody after a year or two of practice should be starting to take on students, maybe initially sharing with a more senior colleague to support them.

CM: What first sparked your interest in transitioning from SLT to association management, and ultimately the kaiwhakahaere matua role?

SM: I was very active in the NZSTA in the 90s as a past vice-president of membership, and I was on the original Program Accreditation Committee as well as convening a conference. I was also the representative to Allied Health Aotearoa New Zealand, where I would meet a lot of executive directors from different professional bodies. I thought they just seemed to have quite a groovy time talking about issues that were quite fascinating, and I would say to them, how do I get to do your job? I was with three other professional bodies before I came back to the NZSTA doing a similar kind of work.

CM: What have been the best and the most challenging aspects of your role? What have been the most surprising aspects, or the aspects that you've least expected?

SM: I think I started with this, the best part being the people. I've really enjoyed bringing people together and bringing their expertise, and trying to make sense of what they're saying and put it out there for members. The most challenging part has been the breadth of the role, and deciding what to prioritise.

What surprised me most is how relational and how emotional the role can be – yes, strategies and submissions matter, but I have had the privilege of talking one on one with members who have contacted us when life has been very difficult for them. I have found that quite challenging to deal with, but at the same time, it was an incredibly rewarding part of the role.

It's a fabulous job, and I recommend it to anyone.

CM: What advice would you give for someone who might be considering an executive or board role?

SM: I would advise people to know the difference between governance and management. The governance is really about setting the direction and delegating to operational staff, which is headed by the executive director to do the doing. It's about listening, learning, and asking questions. It's also about learning to be comfortable with constructive disagreement – I think it's invaluable when I'm in a meeting where people disagree and they can constructively do so, and come to an understanding somewhere in the middle. I think for a board role you need curiosity, integrity, courage, and a willingness to be open and learn.

CM: What are you looking forward to the most following your retirement?

SM: I think it's freedom – being able to get up every day and think 'I don't have to do anything today'. But that certainly doesn't mean that I'm going to forget about NZSTA, it's actually been a really important part of my life. I will take a keen interest in what's happening in the profession, and where it's going.

CM: Any other comments you want to make or legacies that you'd like to leave?

SM: On a lighter note, if I leave no other legacy, I hope it's fewer unnecessary capital letters. I hope those who follow me will continue to ask: does that word really need a capital?

Finally, I want to thank all the members for making this the best job of my career. It's the last job of my career, and it's been wonderful to come home to the NZSTA. •

Please email:
editor@speechtherapy.org.nz
for the full text of the interview.

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Whakapā tangata

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

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