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**Te reo o te Kaumātua**

2019 Conference • Interprofessional training & Hauora Māori • Noho marae

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**Cover:** Blessing of the koha at the Engaging Collaborating Empowering conference in Brisbane.  
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# From the editor

**Karen Watson** [editor@speechtherapy.org.nz](mailto:editor@speechtherapy.org.nz)

Tēnā koutou,  
It's exciting to bring you the winter edition of *Communication Matters* which follows the recent NZSTA and Speech Pathology Australia conference with its emphasis on working with Māori and indigenous peoples. This focus also reflects the board's work with Kaumātua Rukingi Haupapa and journeys into te ao Māori. As editor, it's been wonderful to read member's articles that describe journeys towards bicultural ways of thinking and doing. We have reflections from members on learning te reo, interprofessional training with a Hauora Māori focus, learning about working with Māori adults, as well as articles on oral health, dosage for language intervention, an artist with aphasia and thoughts from a visiting scholar.



Recently, I have been learning more about biculturalism and Te Tiriti of Waitangi through professional development training provided at work. It's impossible to understand the colonial history of New Zealand without learning about historic and ongoing injustice and loss. Māori were denied their language and culture, lost land and sovereignty, and their wellbeing. As well as learning this history and its effects on Māori today, our presenter pushed us to think about what we as tauiwi have also lost by not embracing the Māori world. Our class were tasked to brainstorm what the education system would look like if the treaty had been honoured. We agreed that it would be very unlikely that we would have the inequities between Māori and tauiwi that we hear so often about today, and also that the whole system of education would be different – different measures of success, different areas of learning, and different concepts of who can teach and how.

Of course, these conversations are thought-provoking and valuable, but are not enough on their own and action is also needed. To this end, I'm furthering my journey by learning an opening karakia, improving my knowledge of waiata and visiting my local marae.

Hei konā mai,  
**Karen**

## Who to follow:

Laura Mize, paediatric speech-language therapist

Laura Mize, an experienced early intervention practitioner, owns *Teach Me To Talk*. She's produced therapy manuals, DVDs, blogs, regular hour-long podcasts and has printable resources on her website, [teachmetotalk.com](http://teachmetotalk.com). I particularly love her podcasts as I spend a lot of time commuting – professional development while I drive. Her materials are designed for therapists and parents, and she has a real skill for using plain English to explain what we do. Her recommendations are practical and can readily be implemented in therapy. Her resources consolidate information through hierarchies and easy to remember strategies. •

Emily Taylor

teachmetotalk.com

"Joint attention, or being able to shift and share attention, is so important for language development. It's a skill that's missing in lots of late talkers ... In this post, I want to share my best strategy for teaching parents to work on improving joint attention – **Show, hold, and give**".

# President's report

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



Welcome to this special edition of *Communication Matters* with a focus on biculturalism. The NZSTA have had a transformational experience recently due to the relationship we have developed with Kaumātua Rukingi Haupapa. This started with us inviting him to our strategic planning meeting in February, followed by an invitation to a noho marae visit and board meeting at Te Roro o te Rangi Marae in Rotorua in May. The opportunity to be immersed in this level of Māori culture, and to listen and learn from Rukingi, his whānau and colleagues has been invaluable. Rukingi also accompanied us to the NZSTA & Speech Pathology Australia conference in Brisbane. The following is my opening speech.

Tēnā koutou, tēnā koutou,  
tēnā koutou katoa,

**Annette**

## Tihei mauri ora!

E te Atua, nāu te korōria,  
Te whare e tū nei, tēnā koe,  
Te papa i waho nei, tēnā koe,  
Te mana whenua o tēnei rohe,  
tēnā koutou,  
Te hunga mate ki te hunga mate,  
Haere, haere, haere,  
Te hunga ora ki a tātou he hunga ora,  
Tēnā koutou, tēnā koutou, tēnā  
tātou katoa.

I would like to acknowledge the  
Aboriginal and Torres Strait Island  
people of this land,  
I greet the house we stand in,  
I greet the land outside,  
I greet the local people,  
I pay tribute to our ancestors and  
to the deceased,  
I give thanks for those of us living.

As we come together, these  
two associations Down Under,  
representing the profession of  
speech-language therapy, or speech  
pathology as it is known here,

I would like to thank the conference  
planning committee for all your work,  
your hard mahi over the last 12 months to  
bring us to this day. Tēnā koutou.

I would like to thank Gail Mulcair and  
Gaenor Dixon for your collaboration  
and support of NZSTA to join you in this  
shared venture. Tēnā koutou.

I also want to acknowledge and thank our  
NZSTA guests, Mātua Rukingi Haupapa,  
for your tautoko (support and guidance)  
over the past few months to bring us to  
this place today and to present such a  
warm and united whakatau. Tēnā koutou.

To Geneva Hakaraia-Tino, our consumer  
lead for our Giving Voice campaign, we  
value your collaboration and leadership  
to empower other consumers living with  
communication disability. Tēnā koe.

Mātua Tane Taylor, we look forward  
to your insights into inequities for  
indigenous peoples, we thank you for  
your tautoko, support of our association.  
Tēnā koe.

“ We can't do this alone: we need to collaborate, to engage  
and empower indigenous people to guide us, and we need  
to listen, be respectful and ask questions.”

– Annette

The theme of this conference is  
engagement, collaboration and  
empowerment: all very powerful,  
crucial themes and relevant for all  
aspects of professional life: the way we  
work and engage with students, the way  
we collaborate with our colleagues and  
the way we empower the people who  
receive our therapy services. If I asked  
any of you here today why you became a  
speech-language therapist, I am certain  
you would respond, “Because it is  
important”. Talking, eating, and drinking:  
you can't get more important than that!

This theme also aims to give a particular  
focus to the voice of indigenous peoples,  
the Aboriginal and Torres Strait Island  
people of Australia and the tangata  
whenua of Aotearoa New Zealand.  
Why is this so important?

We know that indigenous people,  
not only in our two countries but all  
over the world in colonised countries,  
are over-represented in the negative  
statistics for health, education, social  
development, and law and justice.

Government policies, initiatives and  
strategies are needed to address these  
inequities. But ... we all must take  
responsibility for culturally safe practice.

The NZSTA is dedicated to moving  
towards being a bicultural association.  
To be a platform and resource for our  
members and for our training programmes  
to get it right. In New Zealand, we have  
a phrase, “If you get it right for Māori,  
you'll get it right for everyone”. So, we  
are working out what “it” is and what is  
“right”. We can't do this alone: we need  
to collaborate, to engage and empower  
indigenous people to guide us, and  
we need to listen, be respectful and  
ask questions.

It's a journey that we are all on. We invite  
you over the coming days to join us in  
our cultural traditions of waiata (song)  
and karakia (prayer) which brings the  
spirit – the wairua – of our association,  
NZSTA, and of the profession of  
speech-language therapy over the  
Tasman Sea to your home of Australia.

It is a wonderful opportunity for our  
two associations, members, clinicians,  
students, researchers and consumers  
to come together and network, share  
clinical initiatives and new research  
findings. And realise we have more  
similarities than we do differences.

I'll finish with a proverb that our  
association identifies with and that fits  
well with our theme and the reason  
we are here together:

***Nāu te rourou, nāku te rourou,  
ka ora ai te iwi.***

***With your basket, and my  
basket, the people will prosper.***

Ngā mihi nui.

# Te reo o te Kaumātua

## 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 taku tupuna,  
Ko Rukingi ahau.



Kia ora mai tātou katoa,

On 5 April 2019, it was an honour to be offered the kaumātua role for the New Zealand Speech-language Therapists' Association. The following is a little about myself and maybe what I can contribute.

I was a teacher and educator for much of my life, but this all changed when I experienced stroke in 2005. Memory loss was a major effect and I had to relearn who Rukingi was, who was my family, and everything else around that. I learnt again how beautiful our Māori language and culture are.

Life after stroke meant that I had to relearn what is Māori and being Māori because I had no memories that I am Māori. This has been another beautiful journey of reawakening and relearning who I am. This may be another set of experiences that can benefit the association and you, the members, in my role as kaumātua.

I returned to tertiary study and completed my Bachelor of Teaching in 2008, my master's in 2015, and am now into the last year of my doctorate study. Both research studies are around Māori and stroke in the Bay of Plenty which is another passion and driving motivator for everything I now do.

The two months since joining the association have focused on two major projects. One was the May board meeting held on a marae, and the other was the Brisbane conference in June.

Though seemingly totally opposites, for me they involved the same purposes:

- Know enough Māori culture and language to enhance the work.
- Have indigenous knowledge and skills within the NZSTA team.
- Have confidence to give it a go.
- And stand united, as one.

The Brisbane conference theme was Engaging, Collaborating, Empowering – and that is what we applied with our stay at the marae in Rotorua, as well as the cultural activities, and Māori and indigenous workshops presented in Brisbane. The NZSTA team/whānau quickly joined in and represented the association and our country with pride, confidently used what we know, moved as one, with respect and honour, with those around us.

Based on what we have already achieved in the last two months, the future is looking bright. I look forward as your kaumātua to meeting many of you, celebrating and sharing the work you do for our people, and supporting bicultural programmes and initiatives throughout Aotearoa New Zealand.

*Ngā whakawhētai nui ki koutou o te Poari,  
ki a Annette kōrua ko Renee hoki.*

*Tēnei te mihi nui me te aroha ki a tātou katoa.*

Nāku noa,  
**Rukingi**

# Noho marae

The NZSTA board and He Kete Whanaungatanga rōpū members were humbly welcomed onto Mātua Rukingi's whānau marae, Te Roro o Te Rangi, and guided around his beautiful Ohinemutu village, learning the history from story after story as we walked together. •



**Far left:** Some of our NZSTA Board and He Kete Whanaungatanga members outside Te Roro o Te Rangi marae.

**Top:** Stories unfolding with Mātua Rukingi.

**Bottom:** NZSTA President Annette with Mātua Rukingi in his new "NZSTA Kaumātua" jacket.

# Studying Te Pōkaitahi Reo

Fiona Dominick

When I first moved to Whakatāne from Scotland with my husband, we were lucky to connect with Te Whānau-ā-Apanui. My husband worked with Te Ao Hou in Ōpōtiki and his rangatira (leader) was wāhine Māori.



Left: Fiona and occupational therapist colleague Beth Robertson on their graduation day.

Leanne Morehu took us to Pāhāōa marae, Te Kaha, where her kapa haka group was training for Te Matatini. We sang waiata, sewed poi, ate delicious kai and experienced the generosity, love and kindness of te ao Māori. I felt at home there and often pondered why I longed to share space with tangata whenua thereafter.

Fast forward 12 years, and it was time to weave in my informal learnings of te ao Māori and begin my journey studying Te Pōkaitahi Reo with Te Whare Wānanga o Awanuiārangi. Working as a speech-language therapist in the Eastern Bay of Plenty, knowing te reo Māori would be beneficial in providing a good service to tangata whaiora (clients). What I didn't realise was that it would also be a journey of self-discovery.

Our first two aromatawai (assignments) were learning our whakapapa (connections to people) and pepeha (connections to land). I had to think deeply about where I was from, as someone living overseas from their birthplace who moved around a lot growing up. I began researching my clan and discovered clans had their own waiata and used rongoā (natural medicine), such as seaweed. They were Pagans who had a strong connection to nature and living in oneness with all beings (kotahitanga). Our language had been suppressed and musical instruments banned. Our bards (entertainers who carried wisdom through stories, poems and songs) were killed and buried face down so they could no longer speak of our history. This was why I was here! My tipuna had brought me to Aotearoa to learn from Māori that I had my own rich history and indigenous roots and a land that was waiting for us to wake up and remember!

“Our approaches to wellness must consider nourishing the wairua of our whānau that we work with.”  
– Fiona

## In addition to this great realisation I also learnt:

- To pronounce names of people and places confidently and correctly, and greet whānau in te reo Māori
- Karakia and waiata that I can use during therapy sessions. We may start and end sessions with these. I also worked with a kuia (female elder) who became anxious during therapy and I discovered if we sang together between activities, it helped her to relax.
- About Māori Atua (gods) – this knowledge was applied with a stroke survivor who taught in total immersion. Each term at kura (school), they chose an Atua to be the focus for language therapy and teaching practice, rebuilding the confidence for their return to work.
- The importance of really connecting with your clients – whakawhanaungatanga. Our “professional boundaries” may hold us back from this. However, working with tangata whaiora helped me realise that sharing a hug, who you are, where you're from and identifying how you connect is not only OK, it's an essential part in supporting someone's healing. You must be open to sharing a little bit about yourself.

- Marae protocol – my studies recently gave me the confidence to go by myself to a marae in Ruatoki and I was able to see a wāhine I had been working with stand up and kōrero Māori for the first time since having a stroke. It brought happy tears!
- That our approaches to wellness must consider nourishing the wairua of our whānau that we work with. We must ensure the non-physical parts of ourselves are healthy and thriving as well as the physical.

My final whakaaro is what's good for Māori is good for tauiwi (non-Māori), and compassionate, responsive, excellent healthcare systems can be built by embracing Aotearoa's indigenous heritage. Seek out opportunities to learn from tangata whenua and remember *your* roots. If you've been thinking about that te reo class for some time, jump on board and do it, you won't regret it! Karawhiua – give it everything! ●

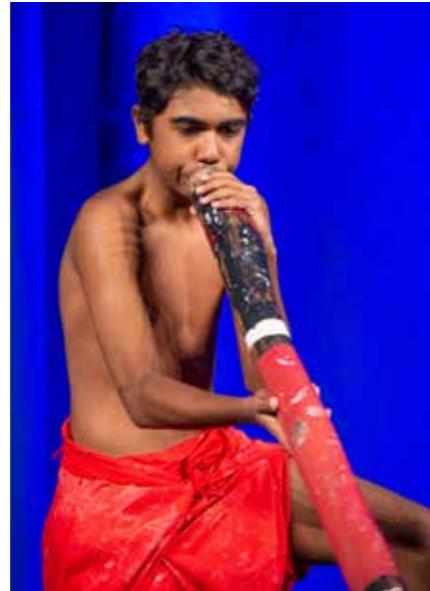


Above: Fiona with some Te Pōkaitahi Reo students doing the annual Awanuiārangi hiko through Whakatāne town on graduation day.

# Engaging Collaborating Empowering

## NZSTA and SPA Joint Conference 2019, Brisbane

Our 69 members who made the trip across the ditch enjoyed a warm welcome from our Australian hosts. Highlights included our consumer group discussion, Suzanne Purdy's speech and of course, rousing waiata at every turn! •



*Far left:* Suzanne and Annette with the Grace Gane award.

*Top:* Acknowledgement to the traditional owners of the land, the Turrbal and Jagera peoples, supported by students from Ipswich High School.

*Bottom:* Professor Suzanne Purdy delivers the Grace Gane Memorial Lecture.



*Top left:* Kaumātua Rukingi leads us in the first waiata of the conference.

*Far left:* The board took the superheroes dinner theme very seriously!

*Above:* SPA President Gaenor Dixon and NZSTA President Annette Rotherham close the conference.

*Near left:* Geneva Hakaraia-Tino, the ambassador for Giving Voice Aotearoa and consumer lead, facilitated a panel discussion with three consumer representatives.

# Working with Māori adults

Karen Sturge

Early last year, I volunteered to take part in a trial of a new online course Working with Māori Adults with Acquired Communication Disorders developed by speech-language therapist Karen Brewer of the University of Auckland.



I volunteered primarily because I work in Northland which has the largest proportion of Māori in New Zealand, and I want to encourage the development of resources that enable better delivery of services to this population.

Working at Whangarei Hospital in the adult team, I interact daily with Māori as a therapist. I have always seen this as a privilege, especially because I get to be

with people at a vulnerable time in their lives, often after serious strokes, head and neck cancers, or when living with a progressive neurological condition.

I will be honest that when I embarked on this trial, I thought I had pretty much got it sussed. I had completed the compulsory paper for my degree and two courses provided by my employer about the Treaty of Waitangi and cultural sensitivity. I had also been working with this population for seven years. So, I wasn't really expecting to gain any major new insights. I was so wrong!

Within a short time of commencing this course I had invested in a notebook to scribble down all the useful insights and advice about working with Māori. One of the things I really like about this course is that Karen Brewer (who is of Māori decent herself) has relied heavily on actual Māori patients' experiences of the health system. It is not written from a purely theoretical, academic perspective; rather it is packed full of real-life examples provided by Māori themselves.

I don't want to go into too much detail of the many insights I gained from this course, as I want to encourage others to do the module, which is now available through the NZSTA website. However, one of the things that really impacted me

was the section about how accessible and equitable our services really are. I realised that Māori often don't access services because they don't realise what services are available to them through the Pākehā system. Often, they also have transport or financial barriers that make phoning or getting to appointments difficult. I see now that we are too quick to discharge patients from some of the poorest areas of Northland because they have not returned our calls or not attended our appointments. Sadly, I have also become aware of the negative attitudes towards Māori of some employees working in the health system and how white, middle class patients often get a gold standard experience even with employees who see themselves as culturally sensitive.

Since completing this course, I have changed many aspects of my practice and have also completed an introductory course in te reo Māori. I recommend this module to anyone serious about working in a culturally sensitive and equitable way with Māori. •

See the [e-learning platform on the NZSTA website](#) for more information.

# World Oral Health Day at Waitemata DHB

Kate Hedworth, Gabrielle Simpson, Lara Shasha, Suzanne Morris & Tanya Watt, Waitemata DHB Inpatient and Community Speech-language Therapy Services

20 March 2019 was World Oral Health Day. The speech-language therapists at Waitemata District Health Board (WDHB) joined forces with oral health therapists, dietitians and registered nurses to spread the word on the importance of oral hygiene.



Above: Kate and Gabrielle ready to answer questions at Waitakere Hospital.

A lot of people don't know that speech-language therapists can provide education and advice on oral hygiene practice. Many populations we work with (such as people with dysphagia, head and neck cancer, people who receive non-oral nutrition) are at increased risk of insufficient oral care management, as well as aspiration and aspiration pneumonia.

The day was an opportunity to raise awareness of the role of speech-language therapists in oral cares and the risks associated with poor oral health. We ourselves learnt so much from spending time with oral health therapists. This is a relatively new profession, predominantly working with the paediatric population, but with a wealth of knowledge transferable to all ages.

The multidisciplinary conversations that arose whilst spreading awareness to the public were a highlight. It was so valuable to get the perspective of nurses and those who deliver oral care on a regular basis.

Keiko Oda, a specialist nurse, has a passion for oral health and is set to publish her research into why oral care matters for dependent adults in hospital. Keiko explains that oral care is a key intervention that can help prevent vicious circles of deconditioning,

aspiration pneumonia, sarcopenia, and lower respiratory function. However, oral care is one of the most missed nursing interventions in hospital. The goal of her research is to identify the barriers and facilitators for oral care practice. Some of her preliminary findings include:

1. Lack of oral care protocols and policies.
2. Insufficient oral care training.
3. Limited time and awareness available for the implementation of oral cares.

These findings suggest that a key step forward is establishing oral care protocols in hospitals. This will lead to enhanced awareness, more effective training and education, and better health outcomes for hospitalised older adults.

With this in mind, we are now in the process of organising an in-service training for the speech-language therapists at WDHB, in collaboration with oral health therapists. From this, we hope to increase our knowledge of the gold standard of oral care delivery. This will enable us to more confidently provide training and advice to those in need. •

# Tairāwhiti Interprofessional Education Programme

**Biddy Robb**, speech-language therapist, Hauora Tairāwhiti

Last year, I was involved in the Tairāwhiti Interprofessional Education Programme (TIPE), a five-week programme for final-year health professional students.

The students come to Gisborne to work collaboratively with other disciplines for both professional and personal development. TIPE began in 2012 with seven students and now they have 12 per year who come from nursing, physiotherapy, pharmacy, dietetics, dentistry, medicine, occupational therapy, oral health, paramedicine, speech-language therapy or social work programmes.

The learning focuses on the provision of rural healthcare, chronic condition management, and principles of Hauora Māori<sup>1</sup>. I loved being a part of the programme and found it a great way to promote our profession. Each block starts with a noho marae. Most students have never been to a marae, let alone stayed on one, so it is a huge learning curve. They then do three days clinical work in their discipline and two days

“TIPE was fantastic in so many ways. Being in a rural area in a smaller hospital meant I was able to develop clinical experience out in the community as well as with inpatients. I learned about working in a rural setting and gained practical experience working in a Hauora Māori framework through group projects and working in the hospital.”

Quotes from **Hana Tuwhare**, Massey University speech-language therapy student

“Living with other health students (dietitians, medical students, nurses and paramedics) was the best interprofessional learning I’ve experienced as a student. We spent hours in the evenings and weekends talking about health and discovering how other professions worked – which was both fascinating and fun!”

“The area is stunning, my commute was a three-minute walk, the people are laid-back, and I made the most of my time there. I did extracurricular activities with the other students such as hot pools, te reo Māori classes, yoga, waka ama, farmers’ markets, hiking, and kapa haka, which really rounded out the whole experience. I’d recommend this to any student wanting to develop interprofessional experience, cultural competencies, and clinical experience in both community and inpatients with adults, all while having fun.”

“ This programme reinforced to me how important cultural information and education is to building trust in a relationship. ”  
– Biddy

in the community with a range of local health providers on the east coast, some of which are quite remote.

Last year, we had our own lovely speech-language therapy student, Hana Tuwhare from Massey University, in the programme. As well as getting out with TIPE, Hana experienced an inpatient and outpatient caseload, observed the Child Development Services speech-language therapist, visited the paediatric ward, and visited coastal rural areas with a private speech-language therapist who has an ACC (augmentative and alternative communication) caseload.

This programme reinforced to me how important cultural information and education is to building trust in a relationship. I saw, over the next three blocks, students who came with no or little Māori cultural experience or knowledge develop and grow in confidence. They talked about how it improved their interaction with patients and fostered better outcomes as a result. I look forward to presenting our profession to the group and having another speech-language therapy student this year. ●

1. Māori philosophy of health and wellbeing.



Above: TIPE students from a previous programme.

# Documentary inspires speech-language therapist to study in New Zealand

**Magdalena Nosko-Goszczycka**, speech-language therapist, AAC therapist, NDT-Bobath therapist, Kwidzyn, Poland. Former visiting scholar & intern, ACTIVEating Clinic at Massey University. **Interviewed by Emily Jones**, senior professional clinician & speech-language therapist.

Kia ora koutou,

Last year, I watched *The Secret Lives of Fussy Eaters* depicting the difficulties of children struggling with feeding disorders. This documentary met my needs and dreams. It showed professionals and institutions meeting the needs of these families. Distance, financial and language barriers ceased to be significant. Thanks to the internship at Massey University, I learned day after day for three weeks, how to work with children and families, for whom the subject of food is so difficult.

Ngā mihi,  
**Magdalena**



*Above:*  
Magdalena in the Massey Speech-language Therapy Clinic resource room.

**Emily:** You have come a long way to be with us in New Zealand. Why?

**Magdalena:** In Poland, we lack system solutions for children with feeding difficulties. I want to learn from practitioners. If getting knowledge is associated with a trip to New Zealand, then you just have to go. I chose the ACTIVEating Clinic at Massey University, because it is similar in nature to the Rehabilitation Centre for children in Poland where I work. Children in both facilities attend outpatient sessions. A speech-language therapist/feeding disorder therapist works with them.

**Emily:** Can you tell us about your work as a speech-language therapist in Poland?

**Magdalena:** I work with children born prematurely, with genetic syndromes, intellectual and motor-related difficulties. The Independent Public Centre of Therapy and Rehabilitation in Kwidzyn operates within the framework of healthcare. All sessions are free of charge.

**Emily:** What did the internship at Massey University provide?

**Magdalena:** I received more than I dreamed of. I had an opportunity to experience work in a kindergarten,

special school, hospital and clinic. I received training in the field of feeding disorders which I needed. I experienced a culture that was warm and welcoming. I was welcomed by Ngāti Whātua and I was able to read out my own pepeha in te reo Māori. I experienced the care of the internship tutor, Emily, and the staff, and support from the speech-language therapy students.

**Emily:** Two months have now passed since your internship. How has it impacted your work in Poland?

**Magdalena:** The internship has given me tremendous power. I transferred the experience gathered in the ACTIVEating Clinic to my work right after my return. I see the first effects in the progress of children and their parents. I have implemented new ideas. I am in the process of creating a consultation team for feeding disorders and was offered a lecturing position. I recommend everyone overcome their own barriers: USA, UK, or New Zealand are closer than we think. •

**Thanks to everyone who supported Magda's journey: The ACTIVEating team; Natalie Myles; James Ray; Toybox on Rawhiti; Janet and Cathy Catto; Massey University staff.**

# Dosage: Is more always better when working with children with language disorders?

**Dr Jayne Newbury**, lecturer in paediatric speech and language disorders in the School of Psychology, Speech and Hearing, University of Canterbury and NZSTA expert adviser on child language, [jayne.newbury@canterbury.ac.nz](mailto:jayne.newbury@canterbury.ac.nz)

Kia ora koutou katoa!

Earlier this year I wrote about dosage with regards to speech sound intervention. When it comes to speech sound intervention, dosage seems relatively straightforward, namely that more intensity of intervention is better, particularly for older children and those with more severe disorders.



I received several emails from clinicians commenting on how useful this article was, but also how difficult it was to achieve more intense dosage in real-world contexts. This issue, I will discuss dosage with regards to language intervention.

Recently Professor Laura Justice visited the University of Canterbury. Laura presented the results of the STEPS study in USA of 233 children with a primary difficulty in language (aged 59-96 months) on the caseloads of 76 speech-language therapists (Schmitt, Justice and Logan, 2017). Data collected over the course of an academic year included videos of intervention sessions (pull-out model), therapy logs and assessments of the children's language skills. Videos were coded to calculate the time spent in each session on language targets, speech targets, behavioural management and other. An estimate of the total time spent on language targets was calculated for each child across the year and analysed in terms of its impact on child language outcomes.

## Statistical analyses showed surprising results:

1. Children who received more intervention (measured as time spent on language targets in speech-language therapy sessions) over the year did not do better as a group than those who received less intervention. Instead, there seems to be a point of diminishing returns (too much intervention) (see also Yoder, Woynaroski, Fey & Warren, 2014). Translated into practical terms, children who spent 15 minutes three times a week on language targets did roughly the same as those who spent 5 minutes once a week.
2. In fact, the children who made the most gains were those who had low-dose and high-frequency (e.g. 5 minutes x 3 per week) and those who had high-dose and low-frequency (e.g. 15 minutes once a week).

Justice and colleagues have proposed this is because of the spacing effect. Learning, which must embed to long term memory (such as many language skills), is more efficient when learning opportunities are spaced out over time, compared with massing the learning opportunities together (Vlach & Sandhofer, 2012).

*Story continues over page >>*

These findings have important implications for providing pull-out language intervention to school-aged clients (Justice, 2018):

- When it comes to pull-out language intervention for children with developmental language disorder: more time spent on language targets is not necessarily better, as there seems to be a point of diminishing returns.
- Use the “spacing effect” to increase the child’s efficiency of learning.

These results are good news for those who are seeking to maximise gains from limited resources. To my knowledge, there is no literature comparing relative efficacy of dosage for oral language group intervention, but it is logical that the same principles apply.

Note the application of dosage to practice in language intervention is complex! See Baker (2012) for a more in-depth discussion.

If you’d like talk about this, feel free to email me anytime!

Ngā mihi nui,  
**Jayne**

Please email [editor@speechtherapy.org.nz](mailto:editor@speechtherapy.org.nz) for full list of references.

## Poet living with aphasia remembers the victims of the Christchurch attack

**Michele Cunningham**

Tim Crowther, born in Yorkshire, was an award-winning creative director. He spent 35 years with advertising agencies in many countries including England, Australia, Japan and China. Tim and his Japanese wife, Akiko, a grand master Japanese calligrapher, opened the Yu Yu Gallery in Prague in 2002. They moved to New Zealand in 2005 and started the Yu Yu Gallery and School in Nelson the following year.

Tim and Akiko’s lives changed forever when Tim had a very large left middle cerebral artery (MCA) stroke in 2010. This left him with significant right-sided weakness and nonfluent aphasia. Initially, he was unable to speak or write at all. They had to close their gallery at this time. After a long period of rehabilitation at Nelson Hospital, Tim returned home to live with Akiko.

He regained some use of language and is now able to communicate in short telegraphic phrases with lots of gesture and facial expression. Tim’s disabilities have not prevented him from doing the things that are important to him. He has started painting again, using his non-dominant hand, and recently he and Akiko have begun creating and exhibiting art together again.

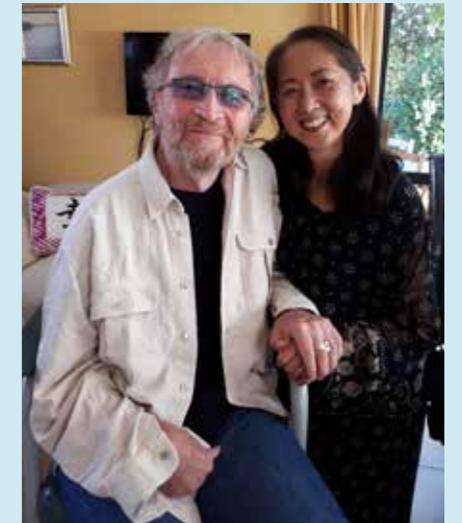
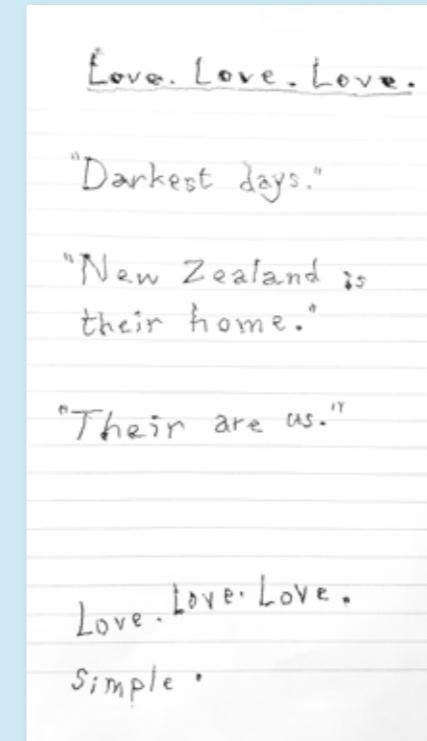
Among his many talents, Tim enjoys writing poetry. Initially, his aphasia made it very difficult for him to return to writing poetry. However, his ability to write has improved significantly in the last year or so, and now he is writing poetry every day.

He says it takes him between half a day and a day to complete a poem. He writes in exercise books with his left hand. He has joined a local writers’ group where he listens to guest speakers and shares his poetry. Tim is also a regular attendee at the monthly community communication group for people with aphasia, which I run in conjunction with the local Stroke Foundation field officer.

Like all of us, Tim was devastated to hear about the terrible Christchurch attack on 15 March. In response, he wrote the poem *Love Love Love* which he shared with the communication group at the first session following the attack. He explained that the middle three lines are quotes from Prime Minister Jacinda Ardern, while the additions at the beginning and end are his own.

Tim has also shared other work, including the poem *Left Handed* which he wrote for another stroke survivor who he could empathise with, as she was also unable to use her dominant hand.

Tim is an inspiring example of what can be achieved despite significant disability with the right attitude and support. His story also shows how recovery can continue long after a stroke for some people. •



**Left:**  
Tim’s poem in response to the Christchurch massacre.

**Above:**  
Tim Crowther with his wife, Akiko.

# Child Well-being Research Symposium

## 6 to 7 June 2019, University of Canterbury

Amy Scott and Susannah Stevens

Researchers, educators, practitioners and students from all over New Zealand gathered at the University of Canterbury (UC) for the inaugural Child Well-being Research Symposium.

Co-hosted by the **Child Well-being Research Institute** and **A Better Start National Science Challenge – Successful Learning theme**, this year's symposium brought together a multidisciplinary line-up of experts in a diverse range of areas associated with children's health and well-being. Presentation topics included positive ways to enhance literacy success, a research-based insight into diet and nutrition for children with developmental disabilities, benefits of sleep treatments, internet addiction and child development, a bigger picture look at child health, a neurological insight into early brain development and experience, and more.

A highlight of the two-day symposium was keynote speaker, Professor Laura Justice from the Ohio State University. Her engaging and informative keynote presentation took the audience on a virtual tour of a university campus, stopping at four key departments related to wiring children's brains for success.

In addition to the exciting presentations, an interactive poster session on the first day allowed researchers and students to present related findings and participate in discussions with conference participants. Two expert panel sessions over the two days provided additional insights into facilitating children's literacy success, their well-being and their learning. On the final day, conference attendees were treated to a cultural performance by a kapa haka group from local school Te Kura Kaupapa Māori o Te Whānau Tahī. Sustainability measures were supported by attendees, who praised the use of paperless programmes and low-waste catering, in a bid to reduce the environmental impact of the event.

The symposium was also the perfect opportunity to launch the final summary report of the first three years of A Better Start's Successful Learning theme, showcasing the four key projects and the

range of successful outcomes from this large, community-based research project. The report can be found on the Successful Learning theme's website. UC hosts the Successful Learning theme as one of 11 National Science Challenges, which has just completed its first three years of funding.

UC has a number of leading researchers and doctoral students involved with the study, and together with their research collaborators from the University of Otago, University of Auckland, Auckland University of Technology, Massey University, and their community partners in New Zealand, as well as their Australian research collaborators at Flinders and Griffith universities, they are involved in a series of interrelated projects to advance our knowledge of children's learning success and healthy well-being. The symposium showcased several research projects embedded in the challenge. ●

**Recordings of the two keynote presentations and copies of the presentation slides from both days can be found on the Child Well-being Research Institute website. If you would like to know more about our work and be kept informed of future events, visit the Child Well-being Research Institute Facebook page and sign up for our newsletter.**

## Area updates

### Wellington/Nelson

- Nelson Hospital's adult team recently attended (and enjoyed!) a Voicecraft® refresher course.
- Rosemary Emery shared her team's research into supporting teachers' language input adaptation in the classroom (e.g., more comments, fewer questions) and saw students' language scores improve on the KLST-2. Lovely to hear about the impact of our profession and interesting how much time was needed to get these great results!
- Wairarapa Hospital team is thrilled with the added locum and the reduction in their outpatient waitlist.
- As a group we are discussing foetal alcohol spectrum disorder (FASD), telehealth, literacy, and acuity measures to think about how complexity impacts workload.
- TVNZ did a local news piece highlighting the value of AAC and the long waitlists for publicly funded assessments. Search for *Calls for better access to assistive technology for disabled people*, aired April 15.

Shannon Hennig

### Canterbury/Westland

- Thanks to everyone who came along for our breakfast meeting or zoomed in later in the day, these meetings are always a positive source of connection and relationship building.
- Our speech-language therapists at Canterbury District Health Board are starting to plan for their move to Hagley hospital, due to open in November. This is a new acute building with most wards. No plan for speech-language therapists has been created yet. There will be a paper-light focus with electronic notes.
- Chloe Watson from SHOUT has moved into the Canterbury region.
- We continue to grieve, support, process and reflect on the terrible tragedies that occurred in Christchurch on 15 March. The different roles and responsibilities that we as speech-language therapists have undertaken with our clients, patients, whānau, students and colleagues following the terror attacks has only heightened to us the importance and significance of our roles within our communities. We hope that you have been reflecting on this too.

*Waiho i te toipoto, kua i te toiroa – let us keep close together, not far apart.*

Ruth Ramsay and Kate Cook

### Otago/Southland

- We have experimented with changes of venues, days and times of our meetings this year to enable a wider range of members to attend.
- Talking Mats training took place in Dunedin in May at the Edgar Centre.
- This year, Kathryn Palmer has been the community aphasia advisor for Aphasia New Zealand. She hopes to set up a group like the Gavel Clubs trialled elsewhere – a Kōrero club.
- The Dunedin Aphasia Support Group run by Alison Zani is to be established as a charity.
- 2Bites Siobhan and Sophie (dietitian) moved into new premises. NZ Flavour Creations representative, Margaret Alexander visited in June, with other private speech-language therapists invited to attend. Margaret also updated the hospital team on her visit.
- Thanks to Bridget McArthur for flagging concerns regarding public protection to the NZSTA Board. This related to a possible breach of professional practice boundaries between speech-language therapy and a speech and drama teacher – very pertinent considering our newly acquired registration status.

Meryl Jones

# Māori & cultural development

Renee Taylor [culturaldevelopment@speechtherapy.org.nz](mailto:culturaldevelopment@speechtherapy.org.nz)



Kia ora koutou,

Wow, has it been a full on few months or what?! With bringing Mātua Rukingi Haupapa onboard, then having our first ever NZSTA noho marae in Rotorua, then our joint conference in Brisbane, and next our AGM in Wellington! Things have truly been steaming ahead. It is with a happy heart that I can proudly say that I feel that we, as the NZSTA Board and association, are starting to really walk the talk of becoming a bicultural association. We still have a long way to go, and the journey isn't always easy, but it has been amazing to see how positive things are looking. The future is bright.

I can't express how grateful I am to have Mātua Rukingi on board with the NZSTA – his tautoko is invaluable and we have already learned so much from him. Being invited to Rukingi's marae with his whānau for a noho was truly something special, our board and He Kete Whanaungatanga members connected on a new level through stories and waiata. It would be awesome to be able to replicate this across the motu (country). Tēnā koe, Rukingi.

Another large piece of work was the Brisbane conference. What an amazing experience! Despite only having around 60 or so NZSTA members out of almost 1000 delegates we definitely made our presence felt! The incredible wairua and aroha was embedded throughout each day of the conference, with particular emphasis on the opening ceremony. It made the 18 months of planning all worth it. Mātua Rukingi led our Kiwi cohort like a champ – blasting the pūmoana, strumming the guitar, and belting out the waiata and karakia that united us all. Having the majority of members stand and come forward to

the stage during the opening ceremony to join the waiata truly showcased our united front. We learned, we laughed, we connected, and we grew. We were one and you could really feel it. The feedback from Australia was non-stop. A special thank you to Dr Tane Taylor for his thought-provoking and inspiring guest workshop on equity. A big shout-out to Geneva Hakaraia-Tino for putting together and leading an outstanding consumer panel session. As well as a special mention to all the Kiwi presenters who did us so proud. From new graduate members like Nadia Mantell to seasoned speech-language therapists such as Kate Cook, who even came away with a prize for her work, aroha nui!

This year has been absolutely pivotal for the association and board. We now have the ability to reflect and move forward with our kaupapa and to really take ownership of this journey. What an exciting time.

Ngā manaakitanga,  
**Renee**

# Communications

Amy Oughton [communications@speechtherapy.org.nz](mailto:communications@speechtherapy.org.nz)



*Nāu te rourou, nāku te rourou,  
ka ora ai te iwi.*

*With your basket of knowledge,  
and my basket of knowledge,  
the people will prosper.*

I felt very proud to see this beautiful saying alongside our logo displayed on the two large screens in the main hall of the Brisbane Convention Centre at the NZSTA and Speech Pathology Australia 2019 Conference. Proud to have every delegate see it and feel inspired. It really set a great tone for the beginning of the conference and tied things up nicely at the closing. The conference was full of motivational, inspirational and passionate speakers and plenty of opportunities to network and collaborate with fellow speech-language therapists, researchers and exhibitors.



With one conference down, we now start looking toward the next. Coming up in July we have our AGM, professional development day and private practice workshop. But it doesn't slow down there! In August, the consumer focus group will be meeting in Auckland and Christchurch, led by Geneva Hakaraia-Tino. We will pick up where we left off and begin to develop an action plan and resources. Preparations are already underway for this year's Giving Voice Aotearoa Week of Action: *Press Pause – Give Me Time to Talk*. Please keep a look

out for more information and resources through email, our website and social media. It would be fabulous to get as many members as possible involved in our Giving Voice Aotearoa Week of Action this year and help drive our awareness campaign forward!

Feel free to email me with ideas for awareness-related events in your area.

Take care, and I look forward to talking with some of you in July at the AGM.

**Amy**

*Right:*  
We found Evelyn Terris, past NZSTA President, walking the corridors of the Brisbane Convention Centre at NZSPA 2019.

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