Look Who’s TALKING

2011 Speech-Language Pathology Alumni Association Newsletter University of Toronto

LET’S TALK ABOUT

T H E  K I N G ’ S  S P E E C H

By Heather Farrell, 1TO

The King’s Speech, directed by Tom Hooper, recently brought much popular attention to stuttering, fluency therapy, and speech-language pathology. I interviewed two experts on stuttering about their perspectives on the film: Dr. Bob Kroll (BK), Speech-Language Pathologist, and executive director of the Speech and Stuttering Institute (SSI) in Toronto who has worked professionally with people who stutter for over thirty years, and Mr. Simon Thang (ST), a Toronto lawyer and former client of SSI.

What did you think of the film’s portrayal of a person who stutters?

BK: I’ve met many people who stutter but I’ve never met two people who stutter in exactly the same way. King George’s stuttering was portrayed as silent blocking, where he couldn’t get the word out, rather than more overt stuttering. He also had specific sound and word fears. Many of our clients have these components to their stuttering, so the portrayal was valid and realistic.

ST: The portrayal was very understanding and compassionate. It demonstrated a nuanced and accurate understanding of people who stutter and their challenges, including their crippling anxiety. The public typically doesn’t see the human dimensions of stuttering. Rather, stutters are often portrayed in media for comic effect, as in A Fish Called Wanda, and Porky Pig.

What impact do you think the film may have had on the public’s perception of people who stutter?

BK: Since the movie has come out I’ve been invited to go on many TV and radio shows about stuttering. It’s great because speech problems haven’t received the attention that a lot of other issues have. Speech-Language Pathologists can fall short in terms of public education because we’re so busy treating everybody!

ST: I think the depiction of King George as a person who stutters and ultimately triumphs over his challenges will have a positive impact on how the public views stuttering. It will make more people aware of treatment options and shows that stutters are not deviants who suffer from some character or personality flaw.

What were your reactions to the treatment methods portrayed in the movie?

BK: King George VI’s treatment took place in the 1940s so some of it was a little exaggerated. We don’t roll people around on the floor anymore but historically, there have been a lot of techniques that focus on bodily relaxation. Stuttering was traditionally viewed as a disorder related to anxiety and tension. Now we know stuttering has more of a neurological and motor speech basis. But even today, more traditional therapists will do some work on relaxation. There’s even been some work on using medication to address stuttering by relieving anxiety.

ST: I think a big part of Lionel Logue’s success was his ability to build a relationship of trust with the King. Lionel Logue was objective and unflappable; he was not intimidated by the King. He demonstrated great professionalism and confidentiality, not even telling his wife he was working with the King. He was also very compassionate. Lionel Logue was able to make King George feel comfortable, drawing him out a bit, without doing a lot of probing. And of course, the fact that Lionel Logue was so dedicated made him a good therapist. Some of my clients have asked me to go to their weddings or bar mitzvahs because they have to give a speech. Whenever I can, I go to support them.

What do you think made Lionel Logue effective?

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ST: I think a big part of Lionel Logue’s success was his ability to build a relationship of trust with the King. Lionel Logue’s use of concrete techniques, such as blending one sound into the next, rather than making

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DISTINGUISHED SERVICE AWARD

DR. CATRIONA STEELE

In November 2010, the Alumni Association awarded the 2010 Distinguished Service Award to Dr. Catriona Steele at the annual Awards Breakfast. Dr. Steele was recognized for her outstanding contributions to the field of Speech-Language Pathology. The Alumni Association is pleased to share some inspiring highlights from Dr. Steele’s acceptance speech with our readers:

“I would like to start by thanking the Alumni Association and my nominators for this great honour. I would like to speak to the students who are here about two different kinds of opportunities in my career that I believe have contributed to me standing here today.

The first opportunity was volunteering in professional associations. In 1991, my first boss (Barbara Meissner-Fishbein) put my name forward to lead a task force for CASLPA, exploring the role of support personnel in speech-language pathology and audiology. I was a new grad, but honored to have this opportunity. On the committee, I worked with several leading Canadians in our field. They came from all spheres of practice – but they all shared a passion for making a difference both in the profession and for the patients we serve. As a volunteer with CASLPA I also served on the publications committee, on dysphagia task forces, and as president-elect and president. In 1997, I was a signatory to the mutual recognition agreement with ASHA, becoming the first CASLPA member to receive ASHA certification through that reciprocity agreement. Through these opportunities I developed friendships with other leaders, which I cherish to this day. When my term as CASLPA president ended, I focused my volunteer efforts on dysphagia, becoming involved with ASHA’s Special Interest Division 13. The relationships I have built through that opportunity have enriched my professional and personal life enormously. I encourage every one of you to seek volunteer opportunities in the profession.

The second thing I encourage you to pursue is going to conferences. At conferences, I had opportunities to meet people who were already established leaders in the field. They were open-minded enough to speak and listen to me, and encourage the questions I asked. It is thanks to these people that I returned to pursue my Ph.D. I encourage you to attend conferences but don’t just sit there alone- be brave enough to introduce yourself to a speaker in your area of interest; ask a question; get to know members of the audience. This has opened doors for me, and I hope some of you will have similar experiences.”

Dr. Steele went on to thank those who have influenced her career: “I would like to acknowledge the entire faculty– particularly Dr. Paula Square, Dr. Pascal van Lieshout, and Dr. Carla Johnson. I also owe special thanks to my patients for all they have taught me. Finally, I would like to acknowledge the students whom I have taught, who inspire and challenge me. It has been my privilege to work with such wonderful people. I thank you all for this special recognition today.”

For more information on this award, see below.

Distinguished Service Award: Nominate your peers!

In an effort to recognize University of Toronto Department of Speech-Language Pathology alumni who have made outstanding contributions to the fields of communication disorders and swallowing, the Alumni Association selects one recipient annually who excels in at least two of the following areas of achievement:

Academic
- Exceptional contribution to research, teaching, and/or student training

Clinical Services
- Viewed by colleagues as a mentor or resource due to professional and clinical expertise
- Implementation or involvement in innovative programs for the benefit of clients

Promotion of the Profession
- Volunteer involvement with the college and/or professional associations
- Professional representation on committees and/or health-related boards
- Involvement in innovative speech-language pathology program development (e.g., in hospital, school board, preschool centre, rehabilitation centres, private practice, etc.)
- Promotion of speech-language pathology to health professional, community groups, clients, students etc.

Nominations should include a brief letter outlining evidence of excellence in two of the above areas of achievement as well as a completed nomination form.

Nomination forms will be made available on the SLP alumni website at http://www.slp.utoronto.ca/community/alumni.htm.

Please submit your nomination to the alumni executive faculty representative by September 15th, 2011.

KING'S SPEECH CONTINUED FROM PREVIOUS PAGE

vague suggestions like "calm down," also made him a good therapist.

Were there any problems with the film?

BK: There was an implication that King George’s stuttering was related to emotional baggage from his upbringing and this doesn’t fit with what we know currently about stuttering.

What did you think of the end of the film when King George VI gives his famous speech?

BK: I thought it was very realistic. King George was far from fluent but he was much better. He wasn’t cured but he was able to get through the speech. Many of our clients get through a very important event and suddenly feel a lot more confident.

ST: I thought it was an inspiring scene. It was quite moving to follow the King through his struggles and to finally see him "find his voice."

Special thanks to Dr. Kim Bradley for her contributions at the initial stages of this project.
LONG TERM GOAL FOR THE CLASS OF 2012: Within 2 years, the Class of 2012 will develop from naïve student clinicians into competent Speech-Language Pathologists.

UNIT 1 GOAL: In 4 months, the Class of 2012 will demonstrate knowledge of Speech Anatomy, Speech Acoustics and Physiology, Audiology, Child Language I, and Principles of Clinical Practice with a minimum of 70% accuracy in a classroom setting while simultaneously befriending 44 classmates and adjusting to the role of being a new graduate student.

TREATMENT OUTCOMES: The Class of 2012 successfully completed Unit 1 courses with more than 70% accuracy and were super-stepped to Unit 2. September to December was quite the whirlwind! The SLPeeps (as they call themselves) quickly became a tight knit group of 45 friends as evidenced by offers of encouragement, support, and notes for missed classes. They also participated in frequent study parties, an Operation Smile auction, potlucks, and a holiday gift exchange. As students became acclimated to their new roles as graduate students, secondary behaviors such as moderate to severe coffee addictions and compulsive Utoronto-email-checking were frequently observed.

UNIT 2 GOAL: In 2 months, the Class of 2012 will demonstrate knowledge of Child Language II, Fluency, and Articulation and Related Disorders with a minimum of 70% accuracy in a classroom setting while simultaneously sweating the placement process and retaining a minimum of 2 social-relationships outside of room 420.

UNIT 3 GOAL: Within 2 months, the Class of 2012 will apply and demonstrate knowledge gained from Units 1 and 2 with a minimum of 99.99% accuracy in their developmental language placement. Students will please their clinical educators in any way possible and cultivate resourcefulness.

TREATMENT PLAN: Student clinicians will refer to class notes, assignments, and textbooks from Units 1 and 2 when needed during their placement. The students will be punctual, respectful, and professional, increasing the likelihood of a good working relationship with their C.E.’s. The student clinicians will carry bubbles and stickers at all times and possess a large repertoire of funny faces in order to win over the hearts of the children they work with. The prognosis for success is high.

The Speech-Language Pathology Alumni Association is constantly striving to improve student life at the Graduate Department of Speech-Language Pathology, University of Toronto. Your help is invaluable in helping us reach our goals. If you wish to participate in improving the student experience you can do so by completing the pledge form below. You can mail or fax the form to the address listed, or use the following link:

https://www.donations.utoronto.ca/medicine/medicine.aspx

Yes! I would like to support the Speech-Language Pathology Alumni Association at the University of Toronto.

GIFT INFORMATION

I have enclosed a gift of $__________, to be directed to:

☐ Speech-Language Pathology Annual Fund 0560002755
☐ Margaret Stoicheff Bursary 0560006980
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PAYMENT METHOD

☑ Cheque (made payable to the University of Toronto)

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Dear Fellow Alumni,

My final ten-week internship in Nairobi, Kenya has been a life-changing experience. I spent my time at Nairobi Hospital and Aga Khan University Hospital, both of which are private hospitals within the city of Nairobi. The Speech and Language Therapy departments consisted of a single room within the Physiotherapy department and the equivalent of one full-time speech-language pathologist worked within each office. I also spent time at Kenyatta, a public hospital, various schools, orphanages, and children’s centres.

There is a huge need in Kenya for support, services, advocacy, and speech-language pathologists. For instance, there are about three million people in Nairobi and four speech and language therapists (five including myself). There are only six speech-language pathologists in the whole country of Kenya!

During my time in Nairobi I was constantly challenged by the diversity of my caseload. There were also very limited resources and I learned to be creative through informal assessment and therapy planning. In terms of the caseload, I was able to get my feet wet in every area while I was in Kenya: voice, aphasia, apraxia, TBI, specific language impairment, stuttering, autism, dysphagia (although there is no such thing as VFSS here!), articulation, cleft palate, laryngectomees & more. The constant switching between populations was challenging at first, but it was a challenge I gladly accepted and thrived on. I can honestly say that upon graduating as a speech-language pathologist, I feel I have a solid baseline for any patient that was to walk through my door. My experience overseas strengthened many of my clinical skills, but more importantly it increased my confidence as a professional and why I chose this line of work.

My time in Nairobi, Kenya was truly a life-changing experience. There were a lot of challenges, but they gave me the opportunity to grow and learn. I am extremely grateful for the opportunity I had and hope to relive those experiences again in the not-too-distant future.

Sincerely,

Lindi Van Strien (1T0), M.H.Sc., R.SLP, S-LP(C)
Join me as we take a peek inside the little-explored world of a first time sole clinical educator and her brave student intern! Laurie Graham, speech-language pathologist at Toronto Rehab, Bickle Centre, and Katie Vikken, intrepid year 2 M.H.Sc. student, agreed to speak candidly about their experience and share some valuable words of wisdom.

By Lisa McQueen, 9T9

Student and Clinical Educator Feature

Laurie: “Covering 4 units of 100+ complex patients could be easily overwhelming for a student…I decided I needed to introduce her to one service element at a time...we held off on some topics, which was challenging, but ultimately really useful.”

Katie: “I was a bit intimidated by the scope of the placement. I wondered if I could keep up, if I had the background knowledge, if I would be toiling late into the night?”

Laurie: “I see a student as a future colleague… my goal is to appreciate and encourage her as a unique clinician...I really enjoy mentoring and seeing her consolidate her learning as she incorporates feedback into the next session.”

Katie: “Watching Laurie talk to clients and their families, has been inspiring and entertaining; Laurie is the queen of analogies. I learned that aspiration pneumonia risk is like a quadratic equation…”

Laurie: (on the benefit of being a sole CE vs. sharing a student) "I appreciated having only two schedules to consult - mine and Katie's. We were able to meet in the morning and work out when we would be together or apart. It was flexible and responsive to referrals I would get during the day."

Katie: “I was surprised just how much I enjoyed working with such a complex client group. I would encourage students going into their placements to be open minded - every population can be rewarding in unexpected ways. Accept opportunities when presented, even if you're terrified!”

Laurie AND Katie: “Make sure you are both aware of the minimum expectations and try to fit them in as soon as possible so you can both relax and enjoy other learning experiences that “pop up” later.” “…focus on the student's learning, especially in the first two weeks was more useful than just “reacting” to the CE's caseload.” “…outlining expectations for each other and for the placement is tremendously helpful as well!”

Thanks Laurie and Katie for sharing your placement experience with us. I'm sure our readers will appreciate your honesty and enthusiasm!

“Like” us on Facebook

Online social networking is becoming an increasingly important and convenient way to keep in touch with friends, family, and colleagues. This is the second year that the Alumni Association has been active on Facebook, with a group dedicated to U of T SLP alumni. Our members have found it an easy way to stay in touch with old classmates and stay in the loop regarding all the good work our volunteers have been doing. It’s easy to join: from your Facebook account, search for the “U of T SLP Alumni” group, and click “join.” It’s that easy to stay in touch! - By Mo Oshalla, 0T9
In 1995 Christiane Kyte emerged as a budding new clinical S-LP. Because of a hard-to-penetrate job market - “similar to now” she suggests, she pieced together a part-time contract at the then known Scarborough Board of Education to add to her research assistant job in Dr. Carla Johnson’s development lab at U of T. It was there she became intrigued with research and subsequently enrolled in a doctoral program in speech-language pathology at U of T to look at the connections between oral language and early literacy.

Christiane became “Dr. Kyte” in 2003 and started to work as a speech-language and literacy research specialist in the Toronto Catholic District School Board (TCDSB). Her mandate included assisting the S-LP department with “knowledge transfer” – that is, translating published research into best practice guidelines for staff. She also had a role in developing new evidence-based initiatives and assisted with program evaluation.

In May 2009, Christiane took over as the new Chief Speech-Language Pathologist at the TCDSB, and is currently responsible for 40 S-LPs who support almost 4000 students each year. “If I spend too long thinking about these responsibilities, I quickly feel overwhelmed” Christiane jokes.

The transition to this administrative role was understandably challenging. “Although my clinical training was two years long and my research training was almost five years long; I had zero administrative training–the learning curve has been very steep... but I am getting there”.

She attributes her early success in this position to the small but mighty group of S-LPs she works with. Though she admits that maintaining the profile of the speech department is difficult in a large school board where “speech and language services are not the main event”, together with the clinical S-LPs, Christiane has been able to lead system-level initiatives, including developing an early identification strategy for all Junior Kindergarten to Grade 1 students.

So as a rare PhD speech-language pathologist in an education-based setting, Christiane is in a unique position to comment on the ease with which knowledge transfer takes place in a busy school board.

“I feel very positively about our profession and our interest in evidence-based practice”, she says, stating that she is confident that clinical S-LPs are good consumers of the existing research. “My experience is that S-LPs attend conferences, (and) read and learn what they can about research”. She puts the onus for making knowledge transfer more accessible onto the people commissioning and conducting the research.

“Research teams and system leaders need to do more to help clinicians translate research into actionable goals for specific contexts,” she says. “I suspect that most S-LPs work in clinical contexts that are multi-disciplinary in nature. It is difficult to take research that is conducted in a pure S-LP context and translate the findings into interventions for a multi-disciplinary context. Multi-disciplinary clinical research is hard to come by for S-LPs.”

She goes on to say that it is the responsibility of system leaders, like herself, to make sure teachers, the public and S-LPs themselves have confidence in the board’s speech and language programs, so she is very supportive of reflective practice, program evaluation and of course, research.

So as a rare PhD speech-language pathologist who has worked primarily within a clinical setting, does she see roles for other doctorate-level S-LPs in non-research settings?

“There is absolutely a role for doctoral-level S-LPs in clinical health or education settings as system leaders. Research training is invaluable for program development, implementation and evaluational development of staff, and strategic planning.”

But at the end of the week Christiane takes off her professional hat and does strategic planning of another sort.

“The weekends”, she says, “are all about the children. You will find me and my iPad at the hockey arena, baseball diamond or gymnastics club watching the fun. My weekend research is focused on ways to engage simultaneously a sporty 7-year-old and a techie 3-year-old. My husband and I also enjoy cooking and entertaining family and friends.

It seems that though Christiane’s formal education was intense it turns out very relevant to her current position – perhaps her most valuable skill was learning to juggle it all!”