

Welcome to the SAC Shining Lights: S-LP Schools Podcast. I'm your host, Dr. Lisa Archibald from the University of Western Ontario. As you know, many speech-language pathologists in Canada are employed in schools. Their job is to support children with communication disabilities in accessing the curriculum and achieving their academic and personal potential –it's a challenging job! So many schools, so many students, and not many S-LPs! Across the country, S-LPs are finding unique solutions to providing the best possible services to the students and school teams with whom they work. In this podcast, our guests describe their innovations in school-based speech-language pathology. Thanks for listening as we shine a light on some brilliant projects!

Dr. Lisa Archibald

All right. Welcome everyone to another episode of the SAC Shining Lights, S-LP Schools podcast. I'm thrilled to today to have Sandrine Umunoza join us on the podcast. Sandrine, would you please introduce yourself?

Sandrine Umunoza

Hi. Thank you for the invitation, Lisa, and I'm thrilled to be here today. I am Sandra Umunoza. I am a speech therapist. I live on unseated territory of the Algonquin Anishinaabe First Nations in Gatineau, Quebec just at the border of Ottawa. And I've been practicing speech therapy since 2011. I'm a [University of Ottawa] grad and I am currently today the owner of the Cabinet, which is a private practice clinic in Gatineau.

Dr. Lisa Archibald

Thank you. Thanks very much. So, Sandrine, can you tell us about your work context and your work in schools?

Sandrine Umunoza

Yes, so I have worked in the past in school-based speech therapy. I have done it in Montreal. I've also worked in a rehab center, but something that happened to me out of the blue – which was really interesting – was that in 2013, I was contacted by the Tshakapesh Institute (Institut Tshakapesh) which is based in Sept-Îles, Québec, on the North Shore. So that's just right under the Labrador area, the far east of Québec up the St. Lawrence River.

I was contacted through another clinic I was working with at the time to offer services in First Nations – so the Innu First Nation community of at that time, it was the first time I was going to Nutakuan, which is close to Natashquan, and that's how since 2013 up until today, I've been now working with up to six different communities through the Chaka Institute offering services in schools.

Dr. Lisa Archibald

Wow. So that's so, so exciting. So, can you tell us about how that service delivery is set up, just generally, you know: what are your resources, how often you go, you know, where you have to get to; that kind of thing.

Sandrine Umunoza

So over time, that has changed quite a lot, and we'll go into it a bit more while we continue discussing this topic. But it first started in 2013, – this delivery service was very simple – was once a year, I was asked and tasked to go into one of the six different communities. So once a year – only for one week – to do six assessments. That was it, no matter how big the school was, how no matter how many kids how many students were in the school. So, I had small schools with a total of 76 children from kindergarten to high school, whereas I had others with 100, 200 children. So that was a service delivery, and it was a fly-in, fly-out delivery model. **So, I would fly from ga,** snow all the way to the north shore of

Québec, which is at the opposite side of the province – completely opposite. And I would be there for a week, do the assessments, see the six students that were assigned to me. I didn't know them, they were just assigned to me by the school personnel. I would come back home and then I would write the reports, and then we would do the we would give out the results of the reports through virtual means. So, through teletherapy, for example.

Dr. Lisa Archibald

Wow, so what then, in that context, where you started then; what were some of the major challenges that you were noticing in that, you know, spurring you on to think more about where you were going? But talk about the major challenges that you saw first.

Sandrine Umunoza

The first challenge was that I had no idea what was going on after I was, after I gave the results, I had no idea what repercussions my assessments would have on the students, on the students' academic achievements on the parents, on the families as well. I didn't know there were no S-LPs close by in most of the communities that I would go to. And another challenge was really that I was really wondering why was I assessing these children who were of a different culture, yes, but also who learned Innu as the main language at home or outside of home as well in their community with tests that were mostly French and also tested on monolingual French Québec children often, or French from France children as well. So, those were the two most puzzling and challenging things that I had to face regarding my practice.

Dr. Lisa Archibald

So, at that time Sandrine, were you approaching those assessments that was in a similar way to what you had done with other school? Like you, like you mentioned your standardized tests, your French language tests. Would they have looked somewhat similar to what you'd done with other school children?

Sandrine Umunoza

100%, I had no guidance. I was going in – it was trial and error for the first couple of years – 100%. I just had this nagging feeling that something was wrong, and especially that on my end. Maybe some of you might have heard with my last name I am from immigrant descent; I am also a child from the immigration. My parents are from Rwanda in Africa. And you know, we are exposed to many languages as well. And I knew that something was not adding up. I knew they were asking me questions about little things that had to do with just the pictures I was showing them. That for them [it] didn't make any sense because it – where they lived – they didn't see the same type of either activities or even environments that were on my pictures that I was showing them in the books and the tests that I [was] using.

Dr. Lisa Archibald

Wow, and so in that context, you've been at it for a few years now. How did it all, you know, how did you begin to, to figure out what, how you would make changes or address those challenges?

Sandrine Umunoza

At first, I started by just asking questions. When I would meet with parents, I would really take a moment because, because it was so easy for me to not meet the parents because the schools gave me the names. I came in, sometimes even the consent forms were already signed, right? So, in theory, I don't have to meet the parents. I try [but] due to so many different obstacles, some parents weren't able to make it. Things like they have an appoint a medical appointment, so they were out of the community because for medical appointments, you do have to take the plane out of the city to a major city where there's a hospital, for example. There [were] so many different ways for me to be [unable] to

meet the parents. So, I started by saying that I have to make a point of meeting the parents no matter what.

And that was more of a priority than finishing my test batteries. And so, that was one way that I started trying to understand a bit more how what I was presenting might not – might actually clash – and how I could actually think of doing it a different way. And also being more interested in doing a lot of research on the culture on my own, doing a lot of research on the language as well. Because I'm fortunate enough that there had been some linguists who did a lot of work on the linguistics of that language, the in new language that they do speak. So, [there was] a lot of research as well on my end to be able to try to think differently about how to do this.

And lately, the main thing that we've been trying to do is dynamic assessments as well as working with language assistance from the communities.

Dr. Lisa Archibald

So, let me just [get] a little bit more focus where you were. So, in terms of the information that you were getting from the school, did you ever get a sense of how the choice for those six kids was being made?

Sandrine Umunoza

The context of the schools, because they were in remote areas – so they are still today in remote areas – make it so the teachers and the principals and the resource teachers often felt quite isolated. Which created more of an alarm when things weren't going the right way for children, or they were having a lot of challenges in school. So, one of the things that I realized is that often the way that they approached it was that “this child is not able to function in class, so we'll send him to the speech therapist,” but not only did I have the referral for that child, the psychologist had it [too]. So, that child was over-assessed not only once, but the next year, I would sometimes get the same name. And then after the third year, when I would see the same name of the same student, I would ask, “why did you refer them to me again?” They tell me, “but he's still not functioning in class.” And I tell them about what has been done in between my visits and routine, my yearly visits, and often rollover of personnel lack of resources – lack of human resources – made it so difficult to be able to provide services in between my assessments.

Dr. Lisa Archibald

Right, right. And so, when you met, okay, so can I just ask then, so there were kids who were having multiple difficulties with learning, I guess? And so, presumably, there were lots of other kids who may have had speech and language issues that you weren't even getting as referred or seeing at all.

Sandrine Umunoza

And there was also the fact that due to Innu being a language that was quite spoken in the community – but the school being in French – so the schools that I work with, they have pre-K and kindergarten in Innu, and then from first grade on, it switches to French right away. That's a big, big shock for a lot of the students. It is not unundoable. We all know that multilingualism is absolutely doable.

However, in school settings, there are things that need to be done to make sure and to ensure that the second language is learned as easily and as proficiently as possible. So, that kind of a little bump in the road, which was the fact that there was kind of no bridge over from kindergarten to first grade made it quite difficult for a lot of children.

So, in theory, what happened, to answer your question, is that they did send me often the same children, the ones that were less functioning. But when I would sit down with the teachers to ask them, oh, what is that? What is that student doing that's so different from the rest of your students? They would tell me, “oh, no, they're, they all can't do the same. They all can't do this. They all can't

understand this. They all can't." They don't, they all don't have the quote-unquote that we expect, but that one is less functioning. Doesn't function as much.

Dr. Lisa Archibald

And when you met with those parents did they have concerns or did they sign the form because the school recommended it? Or – you know – what were those conversations like?

Sandrine Umunoza

Yes, they signed the forms because the school recommended them because it is quite – it is something that they want – for every parent want their child to succeed and to feel that they're able to succeed in a school setting. However, they didn't really understand what they were signing all the time in terms of the different professions and sometimes, they would tell me that they – when I would explain why I'm here – that what language and communication I'm trying to assess, they would agree with learning that learning might be difficult. Of course, they would agree with that. But when I would talk about the language part in terms of Innu, how is it in their mother tongue? They weren't that concerned.

Dr. Lisa Archibald

All right. Well, so can we talk about now your journey then? So, you know, what the, the learning that you undertook, you talked about, you know, your need to learn more and how you began to shape the service from, from where you started.

Sandrine Umunoza

So, as I've mentioned briefly I had to do a lot of digging. I learned about the culture, I learned about the language. I've also spent time learning about the communities that I would go in that I would visit. So those communities all had very, very different realities. They were all, a lot of them were quite remote, some more than others. But it was really different realities.

So, taking time to participate when I was invited to some of the events around that was also a form of learning and then learning to meet people and to create those bonds of when I would come back more and more that I would be able to have people that can tell me, you know, that I'm coming back and could also be a key person for me to ask if I had questions about what's going on in the community. Because I realized that my work at speech therapy in the school could be affected by what's going on outside in the community as well. If there were big other crisis other crises that were more important, maybe my speech therapy maybe was in good moment to contact the parents, for example. So, that was part of the research that I did.

Dr. Lisa Archibald

Sorry then, Sandrine, before you go on from that. Who did you get that information from? Like, do you read that stuff or is there a as someone that you can contact, I mean, how do you find that information?

Sandrine Umunoza

The information? I think some of the main things that I had to read for me were at least the Truth and Reconciliation report commission report. That's for me from the National Center for Truth and Reconciliation. I think for me, that was one of the first things to read because we don't have enough knowledge about what are the reality different realities that indigenous and First Nations people, and in Innu, are living through. That would be one that I definitely had to read.

Another tool that helped me a lot was a, report by the National Collaborating Center for AAL Health. And that's that was written by Alison Gerlach – and I'm sorry – I am not sure about the pronunciation of her last name. And it's titled [Exploring Socially Responsive Approaches to Children's Rehabilitation with Indigenous Communities, Families and Children](#) – which we will share with the audience afterwards –

which talked about really us in our profession. So, speech therapists, occupational therapists, physios, and it was really written by a committee on Aboriginal Health. So, it's really their perspective. And there's a kind of a dialogue going on about rehab in indigenous really indigenous communities. So those were really two important documents for me to read. But also – interestingly enough – something happened during, since 2013 actually about couple years ago we had – as we all know in 2020 – we had the unfortunate event in the States actually with George Floyd. And in the midst of me working in First Nations community, and with my background as a black woman in speech therapy, this really came in and moved me. And I think it moved the whole world.

It also moved other of my colleagues in Quebec. So, [some] other of my colleagues in speech therapy and audiology kind of got together in July 2020 to create a group that wanted to examine – I would say the impacts of systemic racism in the fields of speech-language pathology and audiology in Québec. We realized there were no such report and no such analysis or no documentation to talk about how as a whole our field can become – not only not be racist, but also become anti-racist. And so first we had to talk about, well, how do we contribute to systemic racism in our field? Because it doesn't necessarily have to do with our own position personally. It has to do with the structures and the systems that are in place in the health and education fields that can affect, in this case, racialized people, including indigenous people.

Dr. Lisa Archibald

Interesting. So all of that was, was changing your own approach to practice and your own thinking. And probably in, you know, leading you informing the way to approach conversations with those that you were working with in that community, in those communities. So, can you tell me about those conversations? So who were the people that you were able to connect with in the communities themselves?

Sandrine Umunoza

So, in the communities I was able to connect with people and, and, and it would really differ from a community to another, but people who either worked with children worked in the health field health centers or, or at the school. Just through – like I said – just talking to parents and telling them and being quite honest about the fact that I would love to have someone to whom I can, with whom I can work with that speaking, that understand the Innu culture so that I could co-construct my vision of speech therapy with them in the, for that community. And just by saying that kind of, kind of just talking about it and, and just discussing and kind of sharing my, my, my unease at certain things and, and my reflections. I would be approached by people or be actually directed towards people who told me I would be interested to work with you.

And when they would tell me this, we would simply go to the principal and to tell them that it would be great if I could work with that person to help me every time I come and visit, not only for my assessments, but I also started increasing the [number] of visits that I would do per year, staying longer periods of time, two to three weeks even sometimes. And I could start not only training that person that often it were, it was new ladies.

So those ladies, those women, those mothers, sometimes they were grandmothers as well to about what language and communication was for me. And then, them telling me what it meant for them and then constructing together, how can I assess children with that vision and how can we also offer services while I'm away? Because I did realize that I don't live there. I need someone who lives there, and I needed to find key people. And that's really through conversations and through really sharing with the school team, with the parents, with the people that I knew in the community through my visits, that I was able to find those people who became language assistants for most of them.

Dr. Lisa Archibald

As I'm listening to you there, Sandrine, it's making me feel like you know, that you needed to seek that out. Do you think the community expected to need to train you? Do you mean, or do you think it was you needing to come in and say, no, this is what I'm going to need to be effective here, can

Sandrine Umunoza

I don't think so. And I think actually I surprised quite a few of those people that I worked with. I remember this one time – funny anecdote – I was working with a child, and then I had this Innu woman who was with me as a language assistant. And I was actually, you know, what we do in, in our field, we do vocabulary and we language and we bombarded them with vocabulary and we're so intense and we, we simulation, this is what simulation is, that's how we learn it. This is, this is how we do it. And at the end of the session, I asked her, “so tell me what, what are you thinking? Tell me what's the first thing that's coming to your mind right now?” And she told me, “you're too intense. You overstimulate the child.”

And I was like, “oh, really? That's interesting, because you know what, it's the only way I know how.” So, you know what, with you, we'll find a way to work it out and to find a way that it comes close to something that's more natural for the child and for you, because you're the one who's going to have to do it while I'm gone. And so, what do you think? And she told me, and I said, “I need you because I cannot know how else to do it because I've learned it one way,” and that's only one vision of what communication should be.

Dr. Lisa Archibald

Yes. Super interesting. And that inviting that feedback and perspective and making that you're using that co-constructing of the vision. I really like the words you're using there. I'm wondering about whether there was – your co-construction – did it look different in every community? Did you have a sense of why it might look in one way in one community or another? Could you talk about some differences maybe?

Sandrine Umunoza

100% yes. So the, if ever you take a map and you look at where the north shore of Quebec is, you'll see that that area is quite large, quite big which is called Knock and French. And the, the different villages and communities I was going into, I was visiting, had very different reality in terms of language as well. For example, the one that were closer to the south, closer to big cities – I'll, have to kind of stop here and just remind people, for those who don't know – that Indigenous languages are critically on the verge of disappearing in Canada. So, the language is not is also on the verge of disappearing, [they're] critically diminishing in terms of the [number] of speakers. So that's what I want to say first. So, because of that, what we see is that the, the more south the villages were in the communities were the less children were speaking the language.

There was more of a French use that was happening so they could understand, but they would use it less and more. I would go – the more remote I was, and the more north I was – the more the children would speak it. So, I always had the questions on bilingualism; what do we do?

The child is not repeating – talking to me in French – “what do I do if I'm speaking Innu?” Because I would tell them, for me, I want to help revitalize the language. I want to be a helper in this. I don't want to be impeding this. So yes, the branch is going to be taught in school, but I would remind them that I'm here to help to make sure that the language of their hearts, the language of their communities, the language – in which they share every moment with their children, with their community – that I'm going to try to reinforce it.

So of course, that what happened with the language assistance is that some of them would feel a bit confused about it, where others would feel quite easy, that it was quite easy for them to do the sessions in Innu.

And a lot of them would tend to go to French, tell me, "I should go into French because the parents are going to ask me why am I speaking Innu?" And I had to validate, without forcing, that whatever language in your heart you think is important for that child and for their identity and culture, you speak that language. And that's all I would say. And let it rest. And eventually they would come and tell me, "you know what, you were right." I think speaking Innu for me was, was hard at first because of the ideas they have about what school should be. School should be in the French language, not in the Innu language. And I was trying to kind of deconstruct that idea mm-hmm and reconstruct something new for them so that they could be the voice in their communities about how important Innu is, even in the school.

Dr. Lisa Archibald

Yes then, you admit, you started off much earlier about those system-wide factors that's leading to these ideas that are then hard to break down. For sure. Well, so you've used the term language assistance and tell me about where that work has gone with [that] language assistance. What does that look like now?

Sandrine Umunoza

So right now, obviously COVID didn't help <laugh>, but before COVID, I had about two language assistance for school mostly, which was quite great feat, <laugh>, I would say. Agreed. and now we're about at one language, one language assistant for school. COVID happened, and everything is always harder after COVID, however, to have at least one in each school who knows what they're doing, who's been paired with either one person in my team, one of the speech therapists [on] my team to make sure that we are always there to answer their questions. And, and weekly or biweekly, we always have remote sessions, and then about three to four times a year minimum, we go and visit and give them one-on-one coaching or we accompany them, or sometimes they coach us on something new.

[It] has been really the highlight, I would say, of the last couple of the last three years. And that was really done through having the confidence of the principals who've seen me for so long. They would know that I would come back every time. So, I kind of had this trust of the principals in the schools. And that helped me kind of create those new projects and those new positions in the schools with the principals, and they would talk to each other, the schools, even though they're different communities, they would talk to each other, "hey, I have this, I have this." And eventually they would feel, "oh, I'm interested. How come we don't have this? Can we have this?" And this is really how the snowball effect happened. And, and I'm quite happy and quite proud and quite humbled by the work we do with them.

Dr. Lisa Archibald

Yeah, and I think that trust and the, you know, that, that they can count on you to be coming back and having that continuity must make such a huge contribution there. So what does it look like now you, before you would go up and if you went on a visit, you have six referrals, you know, how, how does, how do kids come to you now? What, you know, how many kids in the schools are you seeing? You know, what, what does it look like?

Sandrine Umunoza

So, from those observations, I was able to talk with the Tshakapesh Institute, and we really had this open dialogue about how things were done. And sometimes they're just done because they're just done that way. But through dialogue and through talking with the principals as well, and the school teams,

now there's more of a ratio per how many children and how many students are in the school in terms of the amount of assessments. So that's the first thing that changed. So it wouldn't be six everywhere. Some could have 12, some could have 18, some could have six. Which is also why in my clinic, I have a team of speech therapists that do help me because it can become quite a lot. Not only are assessments important, they are important in a certain sense, as we know, to, to be able to decide what goals and objectives we're going to work on.

But we were really worried about what is being done. So while the language assistant system was being put in place, we've also started visiting in schools in the RTI model of response intervention model in schools that we're trying to put in place. So, we were trying to make sure that we would enforce the base in the schools [and] in the classrooms. So, what we really did is, as we would come over on a regular basis, some teachers would start knowing us. They would start calling upon us to offer them ideas of how to teach differently in a context of second language or in the context of plural of multilingualism. And that's how we started doing activities in classrooms and bringing very general and universal ways of teaching or helping the teachers teach in a way that corresponds to what the language levels of the children, which is 100% normal for them to have and not see it as deficient.

We're seeing [it] as a language impediment, but seeing it as a reality with which we have to learn to live with, and to teach [it] and to make sure that our profession, our skills, our knowledge [in] speech can also translate in the classrooms.

That was the main things. And a lot of the teachers are non-indigenous. So, that was also why it was quite challenging for them when the children came from kindergarten in first grade, second grade, and they're learning French at the same time as learning to read and write. So, that was quite challenging for them. So, the service model has changed quite a lot in the sense as the response to intervention is really something that has started as well and the language assistance has been also helping by going into classrooms and sometimes also doing some activities in the classrooms as well.

Dr. Lisa Archibald

Right. Have you been able to use some of that, you were mentioning before about the need to sort of bridge from in new preschool to French grade one. Have you been able to, to get some of that bridging activities going on to support that change?

Sandrine Umunoza

Yes. So through the language assistance, through training. Training well, I would say training, I would say also giving workshops on bilingualism and multilingualism and, and, and kind of helping fosters the idea of, it's important to, if we have in new t-shirts, it's important to have them in grade one and two to make sure that the, the transition is as smooth as possible mm-hmm. So that's when it's possible that we have no control over that, unfortunately, and then the last project that we started is working on trans-language. So, we have two schools with whom we are starting working on trans-language. Which the moment we do not have an, the moment the teacher not indigenous, the first grade in which the teacher is not indigenous. So, we have a school in which we have indigenous teachers up to grade two. So, we started in Grade Three having the Innu language teacher co-teach with the teacher in Grade Three some aspects of grammar, for example, or literature literacy. So, really going into kind of explicit learning from the minority language to understand the majority language in the classrooms as well. So that's one of the new projects that's also starting.

Dr. Lisa Archibald

And so, this plurality in the language, that's trans-language. Just tell me about that term. What does that term mean, "trans-language"?

Sandrine Umunoza

So, trans language is an approach that has been around. If you do research in scientific literature, you will find a lot of writing on it. But lately, it has taken a bit more of a pool, I would say, in our field and education field as well. The idea behind it is that if there's a majority and a and minority language, and the children who are from the minority, – I would say language – and the community should be able to continue using their own language, their mother tongue, to create that bridge between the new concepts that they're learning in the majority language, which in our cases, [is French. So, it's about continuing to foster and understand and go into the metacognitive skills of the children to understand what they're learning in the majority language or the mainstream language that in which they're educated.

So, it's allowing a bit of code switching in classes, it's allowing some activities to show the differences between the languages, and sometimes, the similarities between the languages, but explicitly telling them that both languages are valid in school. Both languages are also good to hear or good to use and validating. That is really important because the moment we do an activity, even if it's just creating sentences with different visuals, the moment we do it, we did it in the Innu language [where] we did our first trial in classrooms, you could see the children who would understand all of a sudden what they were doing when they were writing sentences in French, which [they] didn't understand at first what they were doing. They thought they were just copying, but now they [understand] that they were actually writing a sentence, for example. That meant something.

Dr. Lisa Archibald

Oh, I just love that Sandrine. That's just wonderful to hear. Tell me now about your more direct work with the language assistance within your sort of tier you talked about dynamic assessment, but you just mentioned it briefly. How do you set up those assessments, get some intervention happening? You mentioned, perhaps weekly follow-up in connections when you're at in your office. How does that look for that level of service?

Sandrine Umunoza

So, there is now in terms of the students who are chosen, what happens, because we do interventions in classrooms, we often know the, the children by name. We often know the students by name. And if, if the, now that we've been there for now, it's been almost 10 years now, my 10th year of, of practice in the different, in these communities. So they know how to solicitate us to validate the list, if ever they're not sure. So already there, there's something that's really interesting and, and really that, that's more meaningful in terms of the assessments that we have to do, and we also try to bring forth the idea that sometimes we might need not to assess yet if the child has not received any simulation in the Innu language first.

So really response to intervention, even in speech therapy. So really looking at the response of the intervention before doing the full assessment, which comes into one of [these] trends of dynamic assessment is something that we're going to also try to encourage as well. So that's when our language assistants are solicited. Because what we'll do is, if we have a child who has issues is who has issues with language according to, or learning according to our school teams, we might at first do one or two activities with our language assistance and ask them how do they feel that they communicate. So they're telling us how do, how does, how is the communication is the child? And we are really using very contextual and meaningful ways of asking that question. Right. We're not asking them about morphine and whatnot.

We're not going into our speech therapy jargon. We're really keeping it quite functional. Is he able to ask questions? Is he able to find his words? Is he able to communicate when he's frustrated when he's in

emotional state? And then when we have the parents, we ask the same questions before we go for the full assessment later on. So what we do now is the first time of the year, even though we do have the list of child of children or students to be assessed, we do not necessarily jump on the assessment right away. We first make sure that it he or she the child or they have been seen, heard or worked, have they have worked with someone who also is and speak Innu is from the Innu language, and that we also have the kind of confirmation from the parents that they are also worried everything. And then that's when we'll go on and offer simulation in certain cases to do the assessments or come back later on to do dynamic assessments on more than one visit.

Dr. Lisa Archibald

When you say offer simulation, are you saying they're sending –

Sandrine Umunoza

Language simulation?

Dr. Lisa Archibald

The stimulation – the language simulation – from your language assistance. I guess if you've been working with them for a while, those conversations must make them really quite knowledgeable about what they're seeing when they're looking across kids.

Sandrine Umunoza

Yes. So nowadays they're able to tell us as they do, as we come and visit, they'll be able to tell us, Ooh, there's this child and this child that I've seen in this classroom that I'm really worried about. So now it's way more meaningful as well to hear them bring us the children that they're worried about and comparing them to the ones that the teachers are worried about. Because sometimes they match, sometimes they don't. And then we have really interesting conversations about, again, what language is and our role and communication and what kind of interventions, class-based interventions versus tier two interventions, right? So before getting into more specialized interventions we do also make sure that from time to time when we come and visit, let's say our language simulation assistant, so our language assistant is with, has this roster of children that there's their following.

We will sit down, we will sit in also and just kind of take notes as we get used to hearing the language, also pay attention, sometimes record and go over – I'm not sure about the sentence. Tell me what you heard, and kind of deconstructing exactly what kind of sentence was said or what they understood and whatnot. So that they're al also always given feedback. And we also take time also to look at new material. They're in person as well and as we leave, and when we're gone and when we're back in our office, depending on, each person is very and they have different personalities and also different experiences prior to become language assistants and also, different personal characteristics that make it, that some we follow every week. Every week we have a virtual session with them in which we just go over the list of children and, and students that they're seeing, or whether they've been doing or doing a, a therapy with them. But virtually and though, and others that are, we see every month and others that it's on call, they, they, they call us. They simply call us when they need to see us. So it really depends each language assistant; it really depends.

Dr. Lisa Archibald

And so, then the language stimulation is your therapy. And that might look like in different – what would the, what would that look like? <Laugh>

Sandrine Umunoza

A lot of play with, mostly with a lot of objects, with a lot of manipulative toys. We will focus on the younger children to make sure that obviously that the whole concept is well known in speech therapy. And then, the use of some games that either that are made sometimes by the school – sometimes the language assistant – she has an idea for a game and she will make it herself. She'll make Bingo, but with animals that are more meaningful for her and for the children and for her community. And sometimes it's going to be some games also that we bring that we can find a way, we will choose some elements that make more sense for the child from the game. So, I would say that if we'd be a little bird coming to see a session by our language assistant, it would look like a regular therapy session that we would do.

Dr. Lisa Archibald

Yeah, so some of them would be general vocabulary, building, maybe length of utterance building, and some you might be able to drill down onto some, design a game that's actually got some more specific linguistic targets as a part of that range that we see in the work that we do.

Sandrine Umunoza

Yeah, and however, there is some things that the Innu language, it really stays quite story and descriptive based mm-hmm. So, going into the knickknacks of certain things might not always be of certain morphings or language components might not be adequate all the time. So, because I want to work, for example, on the question who understanding the question, who, it might be that we work in a way where the who question is targeted, but we also work on the other questions because it might be too, too fabricated for that language assistant to just do the question, who it might, she might have, well, this is not actually, I might not feel comfortable with that, so that's when we might create something that's a bit more natural, something that looks more like contextually based. And these are things that we're still kind of working out and still learning as we get feedback, obviously. But I would say that communication the communication goals and the language goals are often are often put into more natural play-based settings more so than what we see sometimes that are very structured, structured and goal-oriented setting. Very, very specific goal-oriented settings. But we do ask the language assistant to pay attention to certain things and if not, we pay attention to it when we come and see the session.

Dr. Lisa Archibald

Yes, so we're going to start to wind up now with Sandrine. What's next for you guys in your service provision there? Well, what are your next goals?

Sandrine Umunoza

Well we would like to be able to, to, to continue working with the language assistance. And one of the next goals that we've worked that we're working on with the Tshakapesh Institute who contract us for the different communities is to get the language assistance to actually meet to actually be able to share on their different experiences because we think it's rich. We think that's something that's a bit lacking and it's hard to do because of the remote locations but to kind of always have that intentionality of, you know, there is something that can be constructed. Yes, through us sharing with them, but also through them sharing amongst each other, their different experiences and the different ideas and, and, and practices that they each have according to their different realities. So that would be one of the next steps that would be really important for us.

Dr. Lisa Archibald

Sounds really exciting.

Sandrine Umunoza

You know, I think so. I think they've been asking for it as well. They've been asking us "oh, what does she do in her community and in her school?" So, I think it's really interesting. It's going to be really interesting when it happens, so we're working on that project. We're also working on continuing response to intervention model in the school to encourage it due to the high roller of teachers sometimes and COVID and the remote location. It's, it's, it's not easy. However, you know, every little bit counts. So that's definitely something that we're going to continue pushing to try to reduce the amount of, I call them assessments that are done, but like that are done in a way that is I'm looking for my, for my word right now, but

I'll restart. We're trying to work on assessments that aren't done on the first time we see the child and do the visits, but assessments that are, because we know the child that we've seen the child in their environments, whether they're at school and at home. So we're trying to reduce the amount of just ha lists of, of child that need to be assessed. Because tier one is so good and tier two is being addressed. Yeah. That we have less and less references and that's happening it is happening, and we're quite happy to see that we ha don't have oh you know, half the classroom that could be assessed. But you know, that, that there's an, a better understanding also of what can be done in the, in a context of language based sorry, of bilingualism and, and multilingualism contexts indigenous communities.

And I would say that another project that we have is also working on, I would call it maybe land-based pedagogy. And also helping them to work on learning, but by using the territory and going outside. Mm-Hmm. So doing speech therapy outside and kind of working with key people who know their land, who can accompany the teachers and the classes outside, we go with them, and we use that on when we come back to do our tier one in classrooms with the teachers to show them how to use that. So that's one of the other project we're working on right now.

Dr. Lisa Archibald

Yes, I – when you were describing about the model that I was reflecting on, where you started – your six kids that you didn't know at all and you arrived to assess how you're getting to know those children really over an extended dynamic period right before you're, you know, getting into those, those more detailed assessments. Well, Sandrine, what, what an amazing journey you're on with developing that work and, and those relationships. Yeah. It's really exciting. Thank you so much for joining us. Well, can you give us a top tip for, for the kind of work that you're doing?

Sandrine Umunoza

Oh, my goodness. I would say patience, [patient] conversations with a lot of silences. Ah, you know, we, we, we talk a lot in, in our western society, you know, culture. So I've learned to have really moments of where I pause and where I just wait. And I have beautiful things that come out when I'm, especially when I'm speaking with people from the community and parents and families. Please

Learn, don't just ask, but go and read. There are so many, so many good tools out there, which we'll share, obviously to all the audiences, at least my top five. And lastly, don't be afraid to question what we do. Let's not be afraid to question how and where the model, the delivery model we learn in school comes from. Because it comes from our westernized view, but it is not the only view that exists. It doesn't mean that all we've learned is not necessary or no, it's still important, but we can learn to co-construct with other communities what speech therapy can be and what communication is.

Dr. Lisa Archibald

Well, Sandrine, so well said. Thank you. It's a gift. I love loved hearing all your conversation and all that you've accomplished. I love that patience and the silence piece. Yeah. It's such, such great advice there.

Sandrine Umunoza

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Thank you so much, Lisa.

Dr. Lisa Archibald

Thank you for joining me today, Sandrine.

Sandrine Umunoza

Thank you.

Dr. Lisa Archibald

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