### Summary of La Trobe University CAG Trials with the aim of supporting individuals to live well with chronic aphasia

<table>
<thead>
<tr>
<th>Components</th>
<th>Group</th>
<th>Austin ICAP(^1)</th>
<th>Merri CAG</th>
<th>Sydney CAG</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Group members</strong></td>
<td></td>
<td>People with post-stroke aphasia, range of severities*, min. 6 months post onset*</td>
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<tr>
<td><strong>Staffing</strong></td>
<td></td>
<td>SLP, x 2 SLP students, x 3 volunteers(^4), music therapist</td>
<td>SLP, AHA, (guest speaker), student for 1 session</td>
<td>SLP, SW, Peer(^5), Aide(^5), (guest staff)</td>
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<tr>
<td><strong>Dose, frequency</strong></td>
<td></td>
<td>2 non-consecutive days per week, 4.5 hours per day for 12 weeks (3 x 60 min sessions)(^2)</td>
<td>Total 90 mins weekly/fortnightly for 12 sessions (some fortnightly, some weekly)</td>
<td>Total 2 hours weekly for 12 weeks (2 x 50-min sessions)</td>
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<tr>
<td><strong>Break?</strong></td>
<td></td>
<td>15 mins morning tea, 1 hour lunch</td>
<td>Originally 10 mins between sessions, then removed.</td>
<td>20 mins between sessions</td>
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<tr>
<td><strong>Setting</strong></td>
<td></td>
<td>Rehab centre</td>
<td>Community Health centre</td>
<td>University clinic</td>
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<tr>
<td><strong>Structure</strong></td>
<td></td>
<td>Schedule with opportunity for adjustment via member input; conversation in breaks, before &amp; after</td>
<td></td>
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<tr>
<td><strong>Programming</strong></td>
<td></td>
<td>- Communication Group (communication skills and conversation/activities)(^3)</td>
<td>- Communication skills</td>
<td>- Communication skills</td>
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<tr>
<td></td>
<td></td>
<td>- Participation (technology, music, art; Aphasia Advocacy and Community Connections Group)</td>
<td>- Psychological support (identity: strengths, Personal portfolio)</td>
<td>- Participation (yoga, music, art, iPads)</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>- Stroke/aphasia education</td>
<td>- Stroke/aphasia education</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>- Community engagement, end of group outing</td>
<td>- Peer support</td>
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<tr>
<td></td>
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<td></td>
<td>- Psychological support (identity: strengths, Life Book/narratives)</td>
</tr>
<tr>
<td><strong>Processes (principles applied)</strong></td>
<td></td>
<td>Client-centeredness, Life Participation Approach to Aphasia, group process (cohesiveness), mutual aid</td>
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<tr>
<td><strong>Significant other attendance?</strong></td>
<td></td>
<td>Yes—programmed split Relatives’ Support Group; 4 x 60-min SLP sessions + Break-up day (incl. additional invitees)</td>
<td>Yes—programmed x 2 combined group sessions: - Communication skills - Stroke/aphasia education</td>
<td>Yes—programmed most sessions - &gt; 50% combined with PWA - &lt; 50% split (SW; 1 x SLP; 1 x yoga)</td>
</tr>
<tr>
<td><strong>Direct transition to another program?</strong></td>
<td></td>
<td>No (some members continued meeting after Merri)</td>
<td></td>
<td></td>
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<tr>
<td><strong>Assessment/data collection?</strong></td>
<td></td>
<td>- Daily Google Forms completion (goals review) - Pre, post, follow-up ax phases</td>
<td>Pre, post ax phases</td>
<td>- Group process questionnaire every 4 weeks - Pre, post, follow-up ax phases</td>
</tr>
</tbody>
</table>

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\(^2\) apart from one Public Holiday: 0 hours; and the final session: 2 hours scheduled twice a week, the rest once a week.

\(^3\)Sydney CAG was all people with severe aphasia, minimum 12 months post onset. *Specific training provided*
For more info see IARC 2016 Platform slides: “Community Aphasia Groups: The good...AND the bad and the ugly” (Attard, Lanyon, Togher, Worrall, Rose)

Lanyon et al. Interviews: Overall themes, subthemes

Consequences of group participation

Internal group factors contributing to participation

Contextual factors influencing access and maintenance

Helping & Contributing
+ Supporting
+ Demonstrating ability
- Helplessness
- Passive role

Companionship
+ Establishing bonds
+ Combating isolation
+ Friendship
- Closed culture

Social Activity
+ Inclusion
+ Investment in interaction
+ Pleasurable Interaction
- Exclusion

Belonging
+ Normalised
+ Safety
- Marginalised
- Evaluation

Hierarchy
Size, composition
Ritual, structure
Leading, supporting
Interactional patterns
Communication awareness
Meaningful objectives

Reconceptualising my situation
- Adapting to life with aphasia
- Determination to move forward

Weighing up risks and benefits of group attendance
- Acknowledging and evaluating needs
- Balancing concerns about revealing aphasia

Gaining access to the group
- Being connected to the community
- Overcoming environmental and social barriers

Publications arising from qualitative data collection exploring the lived experiences of people with aphasia in relation to community aphasia groups
Lanyon, L., Worrall, L., & Rose, M. (submitted). Exploring consequences of community aphasia group participation: From 'I know where I belong now' to 'Some people didn't really fit in'. International Journal of Language and Communication Disorders
Lanyon, L., Worrall, L., & Rose, M. (submitted). What really matters to people with aphasia when it comes to group-work. International Journal of Language and Communication Disorders,