Opportunities to enhance functional communication learning: the views of people with aphasia and healthcare professionals

CIARA SHIGGINS & DR. SIMON HORTON
Research questions

- What **conditions** exist during routine rehabilitation sessions for enhancing functional communication for aphasia learning?

- What is the **nature** of these conditions, how do they **arise** and how can they be **produced**?

- What are the **barriers** to and **facilitators** of the uptake of opportunities to enhance functional communication learning for aphasia during day-to-day clinical practice?
Interview and observational data

Photo removed for confidentiality and anonymity
Rapport:
‘It is all about getting a good rapport with them’ (HCP 6)

Staff training:
‘So it would be useful I think If we had had some formal training at the beginning, particularly for people who haven’t worked with stroke patients before’ (HCP 20)

Rehabilitation procedures:
‘There’s occasions where we may not have seen the OT or the speech programmes before going out and we do need time ourselves to look at notes in the house’ (HCP 17)
Findings: People with Aphasia interviews

Attitudes:
‘Yes I think so I mean most of it as far as I was concerned anyway
Em you just had to deal with it em
There wasn’t great responsibilities to other people, Just you to deal with it yourself
And get on with it
And eh just what makes you get on and do it
Eh which I am going to (sigh) (laugh)’ (PWA 8)

Rehabilitation materials:
‘It is a lot easier and I think a lot more effective to try and actually have something you are supposed to be doing rather of several things that are you know either see or it or we or whatever
We are just allowed to just em (audibly exhale) to decide how we do it’ (PWA 8)
Em and I don’t relish working with people with aphasia, I think I’m always kinda anxious about having conversation with somebody with aphasia... Em because it is upsetting if you can’t understand somebody and you want to be able to help them..... Then as a nurse, that’s what we do, We make people feel better’ (HCP 21)

‘It can be a bit anxiety provoking’ (HCP 20)

‘Fill you with a little bit of fear’ (HCP 10)
Shared experiences: emotional impact

‘I try to avoid anything if I can you know. If I thought I can’t explain a word or anything about it then I’d rather leave it you know, I don’t want to look at me as if I am being stupid or there is something wrong with me you know’ (PWA 4)

‘Er em eh just hope to keep going. Just starting to think about holidays, not just immediately but later on’ (PWA 8)
‘I personally don’t like using any computer programs I feel like they impact on communication because rather than talking to each other you are sitting there side by side and you’ve got this screen in front of you and I feel like a lot of things on the screen. A lot of programmes on the computer could be done in person especially when it is just pointing’ (HCP 17)
‘They were just pressing them. They weren’t explaining the words you know. Or doing therapy and that. I didn’t really do much of that at all. (PWA 4)
Conclusion

- Opportunities to produce stimulating environments for functional communication practice can be realised during routine rehabilitation, but there are barriers and facilitators identified by HCPs and PWA.

- This study provides some insights into how to address barriers to the uptake of opportunities to enhance functional communication learning.

- Produce more efficient and effective rehabilitation.
Thank you for your attention

Please contact me on:

c.shiggins@uea.ac.uk

@ShigginsC