

## The supporting conversation partner in disordered communication

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### **Abstract:**

The overall aim of the thesis was to examine some aspects of conversation partners (CP) of people with communication disorder caused by stroke-induced aphasia or Parkinson's disease (PwCD). Central questions were (i) can conversation partners learn to adapt their communicative behaviour in conversation to the specific needs of the persons with communication impairment and (ii) are there any associations between characteristics of the participants in conversation and the ability to be a supportive communication partner? Factors that might influence the quantitative measurement of communicative behaviour were also examined.

The reliability of a global rating scale (MIC) for assessment of ability to support a PwCD in conversation was analysed. Four assessors rated 45 video recordings of natural interaction, and reliability and agreement were investigated. Data from 35 different dyads consisting of a person with a communication disorder following stroke-induced aphasia or Parkinson's disease and his or her CP, either a significant other or an enrolled nurse, were collected. Performance on tasks exploring certain executive functions of the conversation partners and theory of mind (ToM) were collected along with demographic data, measures of severity of language difficulties and video recordings of natural interaction. Possible associations of the results with ability to support communication were explored. The effects of an interaction-focused communication partner training programme (CPT) were investigated with significant others of persons with stroke-induced aphasia (n=6) and enrolled nurses working with people with neurogenic communication disorders (n=5). The outcome was evaluated through blinded assessors' ratings of communicative support in video-recorded natural conversations, without knowledge about when the recordings were obtained. Reports on participants' perceived functional communication were also collected before and after intervention, as well as at follow-up.

The reliability of the MIC rating scale was mostly satisfactory and factors influencing the ratings were highlighted. There was a tendency for moderate correlation between certain aspects of executive function and MIC results for the significant others. For the enrolled nurses there was a tendency of a strong correlation with ToM. No associations between MIC and severity of language difficulty were found. Results from the CPT of enrolled nurses were predominantly positive on all outcome measures. The results of training of significant others were more ambiguous with some participants showing small improvements on ratings by blind assessors.

Rating scales for quantitative assessment of ability to support communication can be reliably applied but are susceptible to factors outside the actual assessment. Factors inherent in the CP and not in the PwCD seem to influence the ability of CPs to support disordered communication in conversation. CPT is a successful way for some CPs to learn the use of supporting strategies in natural everyday conversation with PwCDs, but might not be effective for everyone. CPT may also have an impact on the perceived functional communication of PwCDs. Thus, everyday conversations of people with communication disorders can be affected through conversation partner training.

**Keywords:** conversational interaction, supported communication, aphasia, Parkinson's disease, conversation partners, communication partner training, cognitive factors, assessment

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- II. Eriksson, K., Hartelius, L., & Saldert, C. What makes a good conversation partner in disordered communication? Exploration of possible participant characteristics, 2015. Submitted.
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