Communication Partnership Therapy: Evidence for practice

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Part 1

Contextualising adult Aural Rehabilitation services
Severn et al. (2012) identified a range of stress factors experienced as a result of various job roles undertaken by audiologists, including:

- accountability**,
- time demand**,
- administration or equipment,
- audiological management**,
- patient contact, and
- clinical protocol**.

“Employers or owners of private clinicians [sic] were shown to have high stress levels associated with time demand.” (p.8)

(Severn, Searchfield & Huggard, Int. J. Aud., 2012, 51 (1), 3-9.)
Pressures on clinical practice

• Tuohy (1999)
  – Government policy and funding
    • Regulatory role (e.g., OHS scheme – Australia)
    • Emphasis on supply of devices
  – Commercial pressures
    • Increased private workforce / competition
    • Emphasis on supply of devices
    • Industry or profession?
  – Professional standards
    • Standard of practice / professional ethics
    • Internship / CPD (CEU)

and in addition….
  – University (or other) education
    • Depth and breadth of education
Issues in planning and conducting AR

In order to bridge the gap between clinic and everyday life, how do we align.....

• Clients’ perspectives
  – What do they say they want?

with

• Intervention techniques
  – What do we have to offer?

and

• Assessment tools / outcome measures
  – How do we assess the outcomes?
From the point of view of the listener, spoken communication is simultaneously a sensory/perceptual, linguistic and social activity.

Conversation is:
- fundamentally a sensory/perceptual task
- mediated by linguistic structures
- ultimately a social activity
**What (do we do)?**

Current Intervention techniques

**Sensory-perceptual (-Linguistic)**
- Auditory / auditory-visual speech reception
  - Analytic v Synthetic (Jeffers & Barley 1971; Sweetow & Sabes, 2006)

**Linguistic (-Social)**
- Communication strategies (Erber, 2002)
  - Conversation repair (Lind, Hickson & Erber, 2004; Skelt, 2006)

**Social (-Emotional)**
- Environmental / hearing tactics (Kaplan, Bally & Garretson, 1985)
- Psychosocial approaches (Pedley, Giles & Hogan, 2004)
  - Assertiveness (Trychin, 1995)
- Affective counselling (Luterman, 1984, 2008)
Individual v group programs in adult AR

Is an argument of:

CONTENT (i.e., What might we offer?)
PROCESS (i.e., How might we offer it?)

Benefits of group v individual AR

-Largely arguments of process (e.g., group dynamics, cohesion, ecological validity)

Client(s) attending alone or with partner(s)

“Communication Partnership Therapy” – therapy has equal focus on HI adult and communication partner
Part 2

Communication Partnership Therapy (CPT)
Influences on Communication Partnership Therapy (CPT)

- Significant others and social networks
- Impact of HI on communication/relationship with partner
- COSI GHABP IOI-Al(SO)
- Goal-sharing partnership strategy (GPS)
- Conversation partner(s)
- Social Relations
- Assessment, intervention and outcome
- The Real World
- Participating in conversation
- Communication Partnership Therapy
- The AR Clinic
- Conversational intelligibility
- Collaborative effort in conversation
- Conversation repair
- Speaker, message and environment
- Effects of HI on everyday talk
- Talker characteristics and “scaffolding”
Influences on Communication Partnership Therapy (CPT)

- Significant others and social networks
- SOS-HEAR / communication burden
- Impact of HI on communication/relationship with partner

The Real World

- Conversation partner(s)
- Communication Partnership Therapy

Social Relations

- Talker characteristics and "scaffolding"
- Effects of HI on everyday talk

Participating in conversation

- Communication
- Collaborative effort in conversation

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Participating in conversation

- Communication
- Collaborative effort in conversation
Collaboration in conversation

- All conversation requires participants to:
  - work in concert
  - pitch / frame their talk with their understanding of their communication partner in mind
    - “Recipient design” (Scheglof et al., 1977)
  - Acknowledge the previous speaker’s turn
    - Acceptance and presentation (Clark & Schaefer, 1986)
  - Check for (and then fix?) misunderstandings
    - Breakdown and repair

- We cannot separate out the HI adult’s behaviour from their partner’s behaviour in conversation….
Who are the communication partners?
(with thanks to Joe Montano)

Significant others (SOs)
- A person who has a major influence on the behavior and self-esteem of another (e.g., spouse, partner, family member, friend)

Other communication partners (CPs)
- Each event in a person’s life involves a communication partnership in a communication environment
- Include the cooperative relationships necessary for successful communication with multiple individuals within communication environments

“Communication World”
- Complex and dynamic relationships between communication partners
(Manchaiah & Stephens, 2011)
Impact of HI on communication/relationship with partner


• Impact of HI on the spouse (SOS-HEAR) (Scarinci, Worrall & Hickson, 2008, 2009)
  – Effect of HI on communication, everyday activities, relationship, social factors, emotions
  – Spouse’s need to continually adapt to their partner’s HI

• Vested interest of SO / FCP in successful interaction as a reflection of successful relationship (Scarinci, Worrall & Hickson, 2009)

• Communication / Caregiver burden in adult acquired communication disorders (e.g., dementia, aphasia) (Erder et al, 2012)
Talker characteristics and “scaffolding”

- There is a substantial difference between clear and conversational speech (Picheny, Durlach & Braid, 1985, 1986)

- Communicators are able to improve the intelligibility of their speech on demand (Schum, 1996)

- Speakers increase the intensity of their voices proportionally to the increase in distance from the listener, without instruction (Michael, Seigel & Pick, 1995)

- Speakers will alter the clarity of their speech in response to perceived changes in the complexity of the text they are reading (Pedlow & Wales, 1987)

- Talker intelligibility cannot be separated out from message and environment (Gagné, Masterton, et al, 1994)
The influence of acquired HI on participating in conversation

- **Infrequent turns** at talk (Stephens, Jaworski, Lewis & Aslan, 1999)
- **Monologues** (Wilson, Hickson & Worral, 1998)
- More **topic changes** and less **topic elaboration/discussion**
  (Pichora-Fuller, Johnson & Roodeburg, 1998)
- **Shorter turns** with less semantic content (Johnson & Pichora-Fuller, 1994)
- Increased use of **general fillers** and **back-channeling**
  (Pichora-Fuller, Johnson & Roodeburg, 1998)

…and of course…..

- Increased likelihood of (certain types of) **breakdown and repair**
  (Lind, Hickson & Erber, 2004, 2006)
In summary…..

In the real world…..

• HI influences the conduct of everyday conversation

• HI impacts on partners as well as on HI adults
  – relationships as well as communication

• Partners have a vested interest in resolving communication difficulties

• Partners are able to change their communication patterns to meet their HI partner’s needs

• *Partners play an intrinsic role in the resolution of everyday conversation difficulties*……
Influences on Communication Partnership Therapy (CPT)

Impact of HI on communication/relationship with partner

Assessment, intervention and outcome

Goal-sharing partnership strategy (GPS)

Social Relations

Communication Partnership Therapy

COSI
GHABP
IOI-Al(SO)

Communication

Collaborative effort in conversation

Conversational intelligibility

Conversation repair

Speaker, message and environment

The AR Clinic

Assessment, intervention and outcome

Goal-sharing partnership strategy (GPS)
Speaker, Message and Environment

• Hearing and environmental tactics
  – Reduced HA use and increased coping strategies (Andersson, 1998)
  – Self-report of coping strategies remained below pre-intervention levels 2 years post Tx (Andersson et al., 1995, 1997)
  – Improvements in situations in which they are likely to be able to exercise some control over their environment (Lindberg et al., 1993)
  – Marginal Increase in HA use and reduced self-perceived handicap scores (HMS) (Ward & Gowers, 1981)
    • definition of tactics varies from other studies**
Repair sequences in HI conversation

- Two general forms of repair influenced by HI (Lind, 2006; Lind et al 2004, 2006)
  - OISR (other initiated self repair)
    - Most commonly recognised repair sequence
    - In literature, theatre, TV – comedy and drama
  - 3PR (3rd position repair)
    - Less frequent but potentially more critical to perceptions of conversational success
    - Greater pressure to monitor conversation success on conversation partner
Assessing needs / Measuring outcomes

• Questioning / interview strategy
  – Goal-sharing partnership strategy (GPS) (Preminger & Lind, 2012)

• Direct observation of changes in interaction

• Self- and other-reports as outcomes
  – COSI (Dillon, James & Ginis, 1994) (POSI??)
  – GHABP – residual difficulties (Gatehouse, 1999)
GPS - A step-by-step questionnaire
(with thanks to Jill Preminger)

1. To PHL & CP: What communication situations work well for the both of you? (Where do you have successful communication?)
2. To PHL: What problems do you each experience because of your hearing loss?
3. To CP: What problems do you each experience because of your partner’s hearing loss?
4. To PHL & CP: What problems do you both experience because of hearing loss?
5. To PHL & CP: Can the both of you name a situation where you hope you can improve your communication (Shared goals)?
How might the GPS inform our rehabilitation?

Using the GPS, clinicians may assess clients’ needs by:

- Engaging both client and communication partner(s) in planning intervention
- Asking questions of everyday communication
- Setting goals from a psycho-social perspective
- Taking heed of the communication partner’s views of conversation difficulties
- Using a more intricate view of communication partners in everyday conversation
- Focusing on issues in client (and communication partner) motivation
- Gathering information on successful communication

Measuring change in repair behaviour following intervention (= Cochlear Implantation)

Golab and Lind (2009)
In summary….

In the clinic…..

• Partners’ intelligibility plays a role as important as the HI adults’ use of tactics in resolving communication problems

• Both partners can change their talk in response to a wide range of conversational influences

• We can observe conversational behaviours influenced by adult HI AND measure their change

• Communication partners can be usefully engaged to play an important role in lessening the everyday effects of the HI…….
Part 3

What does CPT look like?
Communication Partnership therapy -
A new model

Communication Partnership Therapy
- Aim – focus on relationship between HI and communication
  - Engaging the communication partner alongside the HI adult
  - Detailed questioning strategy (GPS)
  - Communication focussed assessment
  - Informational counselling v strategy practice
  - Self- and other-report as outcome measures

- Many clients / partners attend for a single session
- Outcome – focus on relationship between HI and communication
  - The reason they attended the clinic in the first place
Communication Partnership Therapy

- Presumes therapy / intervention will address *both people’s communicative needs* arising as a consequences of HI

- Therapy goals: *improve intelligibility / reduce communication breakdown*

- Implies focus *on strategies and tactics* undertaken by *both partners*

- Implies *both partners have roles to play* in lessening the impact of HI on communication

- *Outcome measures address FCP’s perspective* as well as the PHI’s perspective

- Implies *changes in everyday communication* as outcome
The 800 pound gorilla in the room….

- We have as yet *only limited ability* to directly assess the outcome of our intervention by reference to *changes in conversational ability*, function, success or other measures.

- We have some initial evidence that changes in conversation behaviour may be measured by *pre-/post-intervention comparisons*......

- However, we remain unclear what relationship exists *between various AR techniques and everyday conversation*.

- This potentially places intervention in AR at odds with the reason for people attending .........
Thank you

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