

# Communication Research Registry Newsletter

**EDITION 1 MARCH 2014**



Thank you for being a member of the Registry.  
Your support of research is greatly appreciated.

# Communication Research Registry Newsletter



## Research updates

The Registry has assisted thirteen research projects in 2013, including eleven aphasia research projects, one combined aphasia and apraxia of speech project and one hearing project. The following pages of the newsletter contain summaries for many of these projects. Some projects are still underway. The results of these projects will be in next year's newsletter.

### What is.....

#### Aphasia?

Aphasia is a language disorder caused by damage to the language processing centres of the brain. An individual with aphasia may have difficulty understanding, talking, reading and/or writing but their intelligence is not affected. The most common causes of aphasia are stroke and traumatic brain injury.

#### Apraxia of speech?

Apraxia of speech (AOS) is a motor speech disorder. It is caused by damage to parts of the brain that are related to speaking. A person with AOS can find it hard to put sounds together in words.



### Registry questionnaire in 2014

In 2014, a questionnaire will be sent to members of the Communication Research Registry. The questionnaire will ask for feedback about the Registry. It will also ask members about communication issues that concern them. The results from the questionnaire will help to improve the Communication Research Registry and to identify priority areas for research.

It will be your choice to complete the questionnaire.



# Hearing aid guides and hearing aid management

Andrea Caposecco

Project researchers: Professor Louise Hickson, Dr Carly Meyer and  
Andrea Caposecco (PhD candidate).  
*The University of Queensland*

## What was this research about?

In this study a hearing aid user guide was developed based on 'best practice' guidelines. For example:

- The diagrams were large and clear.
- The type size was large.
- Common words were used.
- The information was in a logical order.

We sought to determine if this user guide was better than a typical user guide. We wanted to know if older adults were better able to perform hearing aid management and trouble shooting tasks using it. We also wanted to know what they thought of it.

## What did this research involve?

There were 89 older adults in the study. None had experience using a hearing aid. Participants (people in the study) were randomly assigned to two groups. One group received a typical user guide. The second group received the user guide we developed, based on 'best practice' guidelines. Both were for the same hearing aid and both contained the same information. Participants were required to perform seven tasks with the hearing aid using their assigned user guide. Two tasks were relatively simple. For example: changing the battery. Five tasks were more complex. For example: putting the aid on the ear. After performing the tasks, participants were asked a series of questions about the user guide they received. Finally, they were shown the guide they had not used and asked to select which they liked the best.

## Where are we now?

Testing is finished and we are doing the statistics.

## **What are the results?**

There were no differences in task performance for the two simple tasks. However, participants with the 'best practice' user guide did significantly better on the complex tasks. Participants who used the 'best practice' user guide were:

- More likely to perform each task correctly.
- Took less time to complete each task.

Participants with the 'best practice' user guide were also better at troubleshooting. They were more likely to find the correct section in the user guide and to provide the correct answer.

When shown both user guides, 90% of participants preferred the 'best practice' guide. The main reasons for this were as follows:

- Larger diagrams and text size.
- Easier to use.
- Clearer.

## **Where to next?**

We will write two articles on the study. These will be published in Audiology journals.

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# Development of the SOS-Aphasia: measuring the impact of aphasia on family members

Meghann Grawburg

Project researchers: Meghann Grawburg (PhD student,), Dr Tami Howe, Dr Nerina Scarinci, Professor Linda Worrall.  
*University of Canterbury, The University of Queensland.*

## What was this research about?

This study looked at making a survey to measure the impact of aphasia on family members. The aim of the survey will be to help families to better cope with aphasia. This study was done in Australia and New Zealand.

## What did the research involve?

People with aphasia and their family members participated in this study. Sixty people with aphasia completed a language test and answered questions about their stroke, and their family. One hundred and four family members completed a series of questionnaires about their lives, health, and well-being.

## Where are we now?

We have finished collecting data for this study.

## What are the results?

We developed the “Significant other scale for family members of people with aphasia” also called the SOS-Aphasia. The SOS-Aphasia includes twenty-four questions about how family members may have been affected by aphasia. The questions on the SOS-Aphasia ask family members about their:

- Health & daily life (e.g., work, recreation, health).
- Attitude & personal changes (e.g., appreciation).
- Helping others (e.g., helping with speech therapy).
- Communication & emotions (e.g., worried, communicating with the person with aphasia in a new way).
- Outside influences & interactions (e.g., friendships).

Family members can say that a change has affected them in a positive, neutral, or negative way:

<b>-3</b> A complete problem	<b>-2</b> A moderate- substantial problem	<b>-1</b> A mild problem	<b>0</b> No change because of aphasia	<b>+1</b> A mild positive change	<b>+2</b> A moderate- substantial positive change	<b>+3</b> A complete positive change
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### Where to next?

We will write an article about the SOS-Aphasia and speak about the SOS-Aphasia at conferences.

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Meghann submitted her PhD thesis in October 2013. She had her oral examination in January 2014. It has been recommended that she be awarded her PhD. Congratulations Dr Meghann!!

# Which works best – intensive or non-intensive aphasia therapy?

Jade Dignam

Project researchers: Jade Dignam (PhD student), Dr Amy Rodriguez, A/Professor David Copland.  
*The University of Queensland*

## What was this research about?

This study is about Aphasia LIFT, a comprehensive therapy program for people with aphasia. LIFT stands for Language Impairment and Effecting Therapy.

There are currently two version of Aphasia LIFT:

1. Aphasia LIFT – an intensive therapy program that is run every day for a three week period.
2. NI-LIFT – a ‘less intensive therapy program that is run three day per week for an eight week period.

Both programs have the same type of therapy and amount of therapy (approx 50 therapy hours in total).

The aims of this research are to compare the two programs to find out whether therapy is better given over a short or long period of time.

## What does this research involve?

The Aphasia LIFT program involves individual, group and computer therapy for people with aphasia and education about aphasia. Therapy is focused on the individual’s own goals. Family members and friends are invited to be a part of the program.

Language assessments are completed before and after the therapy program.

## Who has done this research so far?

Seventeen people with aphasia have participated in Aphasia LIFT. Eleven people have participated in NI-LIFT.

**What are the results so far?**

We are still collecting data and plan to analyse the results in 2014. Early results show that participants in both groups (LIFT and NILIFT) have made improvements in at least one (1) area of communication.

**Where to now?**

We will run another NI-LIFT trial in Brisbane and Sydney in January 2014. We will analyse all results in 2014.

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# Communication partner training for friends of people with aphasia

Dr Emma Power

Project researchers: Dr Emma Power, Dr Kyla Brown, Professor Leanne Togher, A/Professor Bronwyn Davidson.  
*The University of Queensland, The University of Sydney, The University of Melbourne.*

## What is this research about?

This project provides training to friends of people with aphasia. The training includes information about aphasia and good communication strategies to use with people who have aphasia. We want to see if the training can improve communication skills of friends of people with aphasia, support friends to feel more confident talking to their friend with aphasia and help friends to stay in touch.

## What does this research involve?

A person with aphasia must invite two friends to do this training program. The program is run in the person with aphasia's home. Before completing the training, the person with aphasia and their friends complete some questionnaires and have a conversation together. They then attend the training together, one hour per week for four weeks.

## Who has done this research so far?

Five people with aphasia and their friends have completed the training so far.

## What are the results so far?

In interviews so far with us the friends have found the training very valuable and feel that the training is helping them to communicate better with their friend with aphasia. Friends have also reported that the training is helping them to better understand what life is like with aphasia for their friend.

### **Where are we now?**

We have completed five training programs.

**We need five more people** with aphasia and their friends to do this study.  
People with aphasia must live in the Melbourne metropolitan area.

### **Where to next?**

We will run the training program with another five people who have aphasia and their friends. We will then analyse the results and write a paper.

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The study is funded by the National Stroke Foundation. It was presented at the 2013 Speech Pathology Australia conference.

Part of the study was run as an honours project. The student, Rebecca Ng Bing Xian graduate with first class honours. Well done Rebecca!!

# Testing and treating speech and language disorders after stroke

A/Professor Kirrie Ballard

*The University of Sydney*

## **What was this research about?**

This project has two parts. Part one is about assessing speech in people post stroke. We are looking at different ways to test speech. This may help to make more accurate diagnoses of speech and language disorders.

Part Two is about treatment for people with aphasia and apraxia of speech post stroke. We are looking to see if a common therapy for aphasia also helps people with apraxia of speech. We are also comparing two different therapies for people with apraxia of speech. The outcomes of this research may help speech pathologists choose the best treatment for their clients.

This project is being done by a group of researchers in Australia and America, led by A/Professor Kirrie Ballard.

## **What does the research involve?**

This research involves two participant groups. Group one includes people with aphasia only. Group two includes people with aphasia *and* apraxia of speech.

For part one of the study, participant's speech and language is assessed in three ways: 1) doing different speaking tasks; 2) a computer game whereby you use your jaw to control the cursor on the screen and; 3) MRI brain scans.

For part two of the study, participants attend intensive therapy four days a week for a four week period.

## **Who has done this research?**

Seventy-five people post stroke have participated in part one of the study. These people have come from Sydney and surrounding suburbs, Brisbane and Melbourne. Eighteen people have participated in part two of the study.

## What are the results?

Part one: We have developed some new assessments. These assessments will help speech pathologists know when a person with aphasia also has apraxia of speech. This will assist with planning treatment for people with aphasia and apraxia and speech. It was also assist researchers who are studying apraxia of speech.

Part two: Our current treatment suggests that when aphasia treatment provides intensive speaking practice, it improves talking in people with aphasia and people with apraxia of speech.

## Where are we now?

We have presented some results to speech pathologists and researchers in Australia at:

1. the 2012 Speech Pathology Australia conference in Hobart,
2. the 2012 SmartStrokes conference in Sydney,
3. Speech Pathology Australia professional development workshops in Sydney, Melbourne, Adelaide, and Perth,

and in America:

1. the 2012 International Motor Speech Conference in California,
2. the 2013 American Speech Language and Hearing Association conference in Chicago,
3. several universities and clinics.

## Where to next?

The study was extended and we also have new funding from the government. In 2014, we will share our results with participants and their families. This will include sending a newsletter, holding an information session at the university and offering to visit stroke support groups.

We will also continue the treatment studies and start new studies on aphasia and apraxia of speech.

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**For more information about this study, please contact:**

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Thank you for your support of  
communication research.

**Wishing you a Happy New Year!**

