

Module 2

Communication

Compiled by past and current
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Workshop overview

Aim

This workshop provides information about the range of communication problems that may result following a traumatic brain injury (TBI), as well as strategies for dealing with some of these deficits.

Rationale

Communication is a complex function, often adversely affected following a brain injury. The ability to communicate effectively is highly valued, which means problems with communication can seriously limit a person's life. Through lack of understanding, workers or carers may treat a person with a communication deficit inappropriately (eg. by treating them as having an intellectual impairment). It is important, therefore, to have a basic understanding of how communication can be affected following brain injury, as well as strategies to facilitate better communication.

Outcomes

At the end of this session, participants should be able to:

- explain different forms of communication and how we use them
- identify communication problems that result from damage to the communication areas of the brain
- identify communication/cognitive problems that result from a TBI
- recognise social communication deficits that may result from frontal lobe damage
- identify possible strategies for dealing with communication problems resulting from TBI

Evaluation

Some presenters may wish to evaluate the effectiveness of their training. For example, if the modules are provided as part of a training day, the organisers may want to evaluate the success of the program and the usefulness of this approach to the provision of the training.

A generic evaluation form has been provided in **How do I use this resource?**

This form is an example of how you may want to evaluate your training. It can be modified before you print it out, to make it specific to your training.

The evaluation can be completed at the conclusion of each module or at the completion of the training program (eg. several modules). The form can be distributed and collected by the presenter/s on the day, or returned by mail/email for feedback to a designated person to collate the responses for later feedback, to assist planning or to provide a training report (eg. as a Quality Assurance project).

The use of the evaluation tool will be specific to the type of training organised.

Summary outline

approximately 2 hours

Content	Resources	Suggested Timing
Introduction	OH 2.1 and HO 2.1 Blank overhead	5 minutes
Icebreaker	Taboo cards Minties or other chewy lollies Rainbow reading passage	15 minutes
What is communication?	OH 2.2	15 minutes
Types of communication disorders	OH 2.3, 2.4, 2.5, 2.6 HO 2.2 DVD	40 minutes
Cognitive problems and communication	OH 2.7a and b HO 2.3 DVD	10 minutes
Social communication deficits	OH 2.8 HO 2.4	10 minutes
Strategies/tips for talking	OH 2.9a and b HO 2.5	20 minutes
Conclusion	OH 2.1 HO 2.1 Blank overhead, from introduction Evaluation form, if used	5 minutes



Key strategies and concepts

This workshop has been designed to start with background information provided by the presenter via a brief lecture and various learning activities. Next, participants are shown a DVD of people with a TBI, exhibiting types of behaviours that occur in TBI communication deficits. Participants are then asked to identify the behaviours and classify the likely type of deficits, based on the background information they received earlier. The workshop then suggests some strategies for responding effectively to particular types of deficits.

Working in small groups encourages participants to share their own experiences and exchange information. This will increase the relevance of the material presented, as well as helping participants gain new skills.

The module has been written for delivery by a qualified speech pathologist. The presenter's own experience of working with people with TBI will add depth to the learning activities and enhance participants' experience of the workshop.

The handouts and overhead transparencies can be used as additional resources and as tools for structuring the workshop. The individual case examples are used to focus on observable behaviours that indicate communication problems (eg. interrupting conversations or slurred speech). The presenter then explores strategies for responding and relating effectively when communicating with clients with a TBI.

Refer to the DVD menu for the individual case examples.

Workshop outline

Resources	Content
OH 2.1 and HO 2.1 Workshop outline Blank overhead	Introduction (5 minutes) Welcome everyone, introduce yourself and ask participants to introduce themselves if necessary. Refer to OH 2.1 and explain the focus of the workshop. Ask participants to state their expectations of the workshop and list these on a blank overhead, for use at the end of the session.
Taboo cards Minties Reading passage <i>The Rainbow Passage</i>	Icebreaker (15 minutes) This activity familiarises participants with some symptoms of communication disorders, by simulating communication difficulties. Presenter note: <i>This activity allows participants to experience what it is like to have a communication problem. You will be referring to this experience later in the workshop when you describe different types of communication problem. Ask participants to guess which term matches the activity they participate in.</i> <ul style="list-style-type: none">• Dysphasia – taboo cards (difficulty finding the right words)• Dysarthria – chewing 2 Minties and reading <i>The Rainbow Passage</i>• Dyspraxia – tongue twister “mixed biscuits” to be said 5 times in 4 seconds• Non-verbal - play a game of charades and describe your favourite food without speaking.• Pragmatic – discuss your weekend plans with your conversational partner who is not to maintain eye contact
OH 2.2: Why communicate?	What is communication? (15 minutes) Communication is information shared through the exchange of both verbal and non-verbal messages in a purposeful way. Brainstorm reasons why we communicate and make a list. Then use overhead to complete/extend list (optional).

Workshop outline *continued*

Resources	Content
HO 2.2	Types of communication disorders (40 minutes) Presenter note: Show the DVD section for each disorder and ask participants to brainstorm the person's communication difficulties before showing the overhead definitions.
OH 2.3: Dysphasia	1. Dysphasia Show DVD: Christine (DVD approx. 2 mins) Brainstorm what her communication difficulties are. Refer to overhead for definition.
OH 2.4: Dysarthria	2. Dysarthria Show DVD: David (DVD approx. 2 mins) Brainstorm what his communication difficulties are. Refer to overhead for definition.
OH 2.5: Dyspraxia	3. Dyspraxia Show DVD: Sonny (DVD approx. 2 mins) Brainstorm what are the communication difficulties. Refer to overhead for definition.
OH 2.6: Non-verbal communication	4. Non-verbal communication Show DVD: Daniel (DVD approx. 2 mins) When people have severe language and/or speech problems they may have difficulty expressing themselves verbally. Brainstorm alternative means of communication. Refer to overhead for definition. 5. Pragmatics Show DVD David again (DVD approx. 2 mins) and brainstorm ideas about his social communication skills or refer to difficulties identified in the earlier dysarthria exercise.
HO 2.3: OH 2.7a and b Cognitive problems	Cognitive problems and communication (10 minutes) Show DVD: James (DVD approx. 2 mins) Brainstorm what his communication difficulties are. Give a general explanation about the relationship between cognitive problems and communication following TBI.

Workshop outline *continued*

Resources	Content
HO 2.4 and OH 2.8: Social communication impairments	Social communication impairments (<i>10 minutes</i>) Discuss James' social communication. Brainstorm what sort of things people do that make it difficult to sustain or carry on a conversation with them? What makes you feel uncomfortable during a conversation? Display OH 2.8 and explain that these difficulties are often a result of TBI.
HO 2.5 and OH 2.9a and b: Tips for talking	Strategies/tips for talking (<i>20 minutes</i>) Provide general strategies to help the person with a TBI communicate more effectively. Ask participants to break up into three small groups. Give each group five minutes to brainstorm a key communication problem: word finding, dysarthria, or dyspraxia. Ask groups to refer to the clients on the DVD and generate strategies for each communication problem. After five minutes, small groups report back to the whole group. You may need to expand/ elaborate some of these strategies.
Blank overhead from introduction to session OH 2.1 and HO 2.1: Workshop outline	Conclusion (<i>5 minutes</i>) Display the blank overhead from introduction, listing participants' expectations of the workshop. Ask the group to reflect on their expectations and discuss whether these have been achieved. Display OH 2.1 to summarise the workshop and ask if anyone has any further questions. Distribute evaluation form, if utilised. Thank everyone for their participation.