

Available online at www.sciencedirect.com

Procedia Social and Behavioral Sciences 6 (2010) 219–220

Procedia
Social and Behavioral Sciences

Academy of Aphasia 2010

Aphasia Therapy Research: Still a Case of Conceptual Myopia?

Line Haaland-Johansen^{a,*}^a *Bredtvet Resource Centre*

Background

Clinicians in aphasia therapy are under increasing pressure to account for what they do. Clinicians and researchers have a responsibility to communicate the complexity of the field of aphasia therapy, using terms that are broadly agreed upon and understood, and also giving a balanced picture of the variety of therapies (Byng & Duchan, 2005; Petheram & Parr, 1998). Evidence-based practice (EBP) being the newest paradigm, SLTs are facing new tools and new challenges in their endeavour to measure the outcome of therapy. “Technical drift”, the tendency for clinical studies to become purely technical, cure-oriented efforts with limited interest in conceptual issues, was described in aphasia therapy research already two decades ago (Keams and Thompson, 1991). Today, this phenomenon still is a plausible threat to quality in aphasia therapy research, possibly causing “conceptual myopia” (op. cit.).

Research objective

Aphasia therapy is multifaceted. Even so, the majority of outcome measures employed in efficacy research to a large degree can be categorized as dealing with diminution of impairment (Douglas, Brown & Barry, 2004). A main goal for this study is to give voice to significant underlying perspectives within the field of aphasia therapy, presenting a conceptual framework for the field based on different perspectives of communication (Haaland-Johansen, 2007). The framework was construed to show that a framework based on communication may serve as an ample tool – both for portraying contemporary directions in therapy and for indicating relevant areas for therapy research.

Method

The method used constructing the conceptual framework was a template analysis of data. The data material consisted of strategically chosen publications (N=19) from the field of aphasia therapy, based on a theoretical understanding of the totality of the field and on empirical field knowledge. The publications were treated as “cases”, using a collective case study approach.

A thematic analysis was performed, using the above proposed conceptual framework to analyze the content of case series (N=51) and single case designs (N=242) within the Psychological database for Brain Impairment Treatment Efficacy (PsyncBITETM) (McDonald, Tate, Togher, Perdices, Moseley, Winder, Schultz, & Smith, 2006).

Conclusions

Analyzing published studies within the field of aphasia therapy, concentrating on the “what-question” (the focus) of therapy, it is possible to identify five different adequate underlying ontological views of language and

* Corresponding author.

E-mail address: line.haaland-johansen@statped.no.

communication: production, transaction, interaction, self presentation, and adaptation, based on different models of communication. It can be concluded that a framework based on perspectives of communication can give voice to important trends in contemporary aphasia therapy. Raised awareness concerning the ontology of the field of aphasia therapy is imperative for enhanced quality in clinical research. Furthermore, a large percentage of the published studies in PsycBITE™, could be categorized as primarily having a monologue focus, implicitly relying on an individually-oriented production model of communication. The possible threats of reductionism, technical drift and conceptual myopia within the field of aphasia therapy research remain, and should not be underestimated.

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