Social Communication Training for Adults with Traumatic Brain Injury

And Quality of Life Improvements

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Implications of Social Communications Post TBI

The impairments in social communication is reported to be the most debilitating aspect of TBI 10-15 years after the injury was sustained according to Dahlberg et al. (2007). The impairments cause difficulties with forming and maintaining meaningful relationships with others and over time may cause the patient to isolate themselves. With high communication demands in many employment settings, it may be difficult to keep a job due to communication disorder. This can have many negative impacts on an individual emotionally and economically, as well as further isolate the individual.

Components of Social Communication Skills Training

Therapy groups should be utilized; training patients in a social setting from the beginning (Dahlberg et al., 2007) (Appleton et al., 2011)

- Interdisciplinary sessions involve a social worker and/or a psychologist working along side the speech language pathologist (Dahlberg et al., 2007)
- Setting communication goals with the patients that are fitting for specific deficits (Dahlberg et al., 2007)
- Utilize scaffolding to reach goals; each session the patient will have set objectives to get them closer to their goals (Dahlberg et al., 2007)
- Repetition and structure of activities to reduce the need for complex cognitive abilities
- Implement cognitive behavior therapy (CBT) to alleviate anxiety that may accompany social situations
- Provide examples of positive social interactions
- Role play activities to help the patient practice skills (Dahlberg et al., 2007) (Appleton et al., 2011)

Examples of goals for specific communication skills training

Dahlberg et al., 2007

Cognitive - Remain calm, engaged, and centered in conversations.
- Utilize working memory skills in conversation

Interpersonal - Plan and practice strategies for interacting with others
- Conversation initiation and awareness training

Language - Topic maintenance and proper turn-taking
- Using setting/appropriate language

Speech - Use appropriate rate of speech; not too fast or too slow
- Use a suitable volume of speech

Sources


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Outcomes of Treatment

Placing patients in consistent therapy groups provided them with a support system of individuals like themselves to interact with. Patients found this to be a positive outcome of treatment (Dahlberg et al., 2007). These therapy strategies allowed the patients to practice their communication skills in a safe environment. Treatment showed increased communication participation as the greatest success (Dahlberg et al., 2007). Other successful outcomes of treatment included an increased internal relationships, external relationships, expression clarity, and social style. Though not statistically significant, quality of life was reportedly improved in patients who completed the training (Dahlberg et al., 2007). Patients were also reportedly able to relay information more effectively and improved connected speech (Appleton et al., 2011). The single case study which completed these skills were implemented, the individual was able to successfully obtain a job. The individual was able to do so after the TBI and subsequent compensatory needs in an employment setting (Tursna & Flora, 2002). In patient self reporting at the end of training most reported an improved quality of life and an appreciation for the opportunity to engage with others like themselves.

Conclusions

The strategies provided have been shown to effectively improve the social communication abilities of an individual after TBI has been sustained. These results cannot be guaranteed because of the extremely heterogeneous of symptoms and disorders that may result from TBI. The social communication deficits that result from TBI occur because of different cognitive impairments and communication disorders limiting effective and meaningful interactions with others. Specific speech, articulation, and language disorders should be treated individually to maximize an individual’s communication abilities. These abilities can then be improved upon in the social aspect as needed. Teaching social communication skills after a TBI has been sustained is imperative in providing the best quality of life. This will help to form and maintain relationships, attain employment, and improve the overall quality and satisfaction of life.