



City Research Online

City St George's, University of London

Citation: Behn, N., Cruice, M., Marshall, J. & Togher, L. (2016). A feasibility study investigating the use of project-based treatment to improve communication skills and quality-of-life (QoL) in people with ABI. *Brain Injury*, 30(5-6), pp. 481-817. doi: 10.3109/02699052.2016.1162060

This is the accepted version of the paper.

This version of the publication may differ from the final published version. To cite this item please consult the publisher's version.

Permanent repository link: <https://city-ref-test.eprints-hosting.org/id/eprint/15004/>

Link to published version: <https://doi.org/10.3109/02699052.2016.1162060>

Copyright and Reuse: Copyright and Moral Rights remain with the author(s) and/or copyright holders. Copies of full items can be used for personal research or study, educational, or not-for-profit purposes without prior permission or charge, unless otherwise indicated, provided that the authors, title and full bibliographic details are credited, a hyperlink and/or URL is given for the original metadata page and the content is not changed in any way. For full details of reuse please refer to [City Research Online policy](#).

TITLE

A feasibility study investigating the use of project-based treatment to improve communication skills and quality of life (QOL) in people with ABI

INTRODUCTION/OBJECTIVES

Communication impairments are common following ABI. These impairments have a significant impact on a person's QOL post-injury. Few communication treatments have been able to show improvement post-treatment on communication, and QOL. Project-based treatment is an alternative treatment that could have an impact on both these areas for people who are a long-term post-injury. This treatment is embedded in a context of meaningful activities chosen by people with ABI, whereby, as a group, they work collaboratively to achieve a tangible end product. This paper reports the findings of a quasi-randomised controlled trial that aimed to determine the feasibility of project-based treatment for improving communication skills and QOL for people with ABI.

METHOD

Twenty-one people with ABI ($\bar{x}$ age: 46 years; $\bar{x}$ time post-injury: 12 years), with evidence of a social communication disorder were recruited to participate in the group-based treatment, which comprised 10 sessions over six weeks (20 hours). Participants were recruited in groups, and alternately allocated to either the TREATMENT group (n=12) or WAITLIST control group (n=11). Participants were required to work towards achieving a project that helps others, in a group context that facilitated communicative interaction. Treatment was evaluated by measures of conversation and QOL. Conversations were videotaped of each person with ABI at three time points: pre-treatment, post-treatment, and at follow-up. The conversations were rated blindly on the Measure of Participation of Conversation (MPC), which has two scales (Interaction and Transaction). In addition, participants completed two QOL questionnaires: Quality of Life in Brain Injury Questionnaire (QOLIBRI) and Satisfaction With Life Scale (SWLS). Participants in the WAITLIST group were assessed twice pre-treatment, each separated by six-weeks. Mixed ANOVAs compared the TREATMENT with the WAITLIST group on the measures, and repeated measures ANOVA detected change over time for both groups.

RESULTS:

All people with ABI received the treatment as allocated, with no dropouts. No significant difference between groups was detected at baseline for any measures. Interaction effects revealed a significant difference between the TREATMENT and WAITLIST group post-treatment on the MPC Interaction scale ($p=0.04$), but not the Transaction scale ($p=0.28$), SWLS ($p=0.147$) or QOLIBRI ($p=0.438$). Change over time comparisons revealed a significant difference for the QOLIBRI ($p=0.05$), a trend towards significance for the SWLS ($p=0.06$), but no significant difference for MPC Interaction ($p=0.19$), or Transaction ($p=0.18$).

CONCLUSIONS:

The results of the trial demonstrate that project-based treatment is feasible for people with ABI. Modest improvements in both communication skills post-treatment, and in QOL at follow-up were found. Lack of further change may reflect low participant numbers and the responsiveness to change of measures from a relatively short treatment period. Positive feasibility results and evidence of some communicative and QOL benefit suggest that project-based treatment merits further research for this population.