



A Basic Communicative Guide for Key Conversational Partners

Maite Fernández-Urquiza, José Luis Pérez Mantero, Beatriz Gallardo Paúls
Universidad de Oviedo – Universidad de Valencia



ABSTRACT

Here we aim to present an elementary communicative protocol oriented to key-conversational partners (Gallardo, 2005; Withworth, Perkins y Lesser, 1997), i.e. family members who regularly communicate with people with linguistic impairment.

During the data collection process for the development of PerLA corpus (Gallardo y Sanmartín, 2005; Gallardo y Moreno, 2005; Garayzábal, 2005; Hernández, Serra y Veyrat, 2007; Gallardo, 2009; Rodríguez Muñoz, 2010; Gallardo, Moreno y Pablo, 2011), we have become aware of the need of a basic communicative guideline, easily understandable, to improve the conversational interaction among the key-conversational partners and their relatives.

This guide highlights the importance of conversation as a means of establishing personal and emotional ties, beyond the mere information exchange. It takes the form of a brochure and it is delivered to key-conversational partners by the researcher during a visit to their home for the recording of a spontaneous conversation with their relative with linguistic impairment. The guide provides a series of compensatory communication strategies grouped into six themes: 1) Pronunciation and intonation, 2) Management of silence, 3) Participation in the conversation, 4) Formulation of questions, 5) Checking up of understanding and 6) Management of the interrupts.

It has been shown (Holland, 1991; Kagan, 1995; Lock, Wilkinson y Bryan, 2001; Prutting y Kirchner, 1983; Whitworth; Perkins y Lesser, 1997) that information provided to key conversational partners on the linguistic difficulties of their relatives, as well as on the strategies suitable to overcome them, greatly improves communicative interaction and, therefore, the standard of life of both parties.

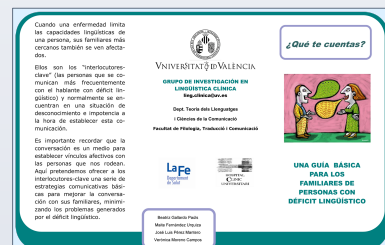
STATE REASONS FOR THE NEED OF A GUIDE

When linguistic and communicative abilities are disturbed by a disease, the relatives of the person with linguistic impairment become also affected. They have to manage communication difficulties on their own, and frequently they do not have the knowledge needed to develop new communicative strategies. This often results in relatives' feelings of helplessness, despair and isolation, which worsen the psychological stress caused by the disease.

As a consequence, communication with the linguistically impaired person is usually diminished. It is important to bear in mind the fact that conversation goes beyond the mere exchange of information: instead, it is a means of establishing personal and emotional ties with people around us, and thus to construct our social and personal identity. As Kagan (1995: 23) points out "When someone does not appear competent, we alter our way of speaking".

With the term *key-conversational partner* (Gallardo 2005, Withworth, Perkins y Lesser 1997) we aim to refer to the relatives of the person with linguistic impairment, whose behaviour in conversation can definitely improve the quality of communication, thus diminishing the negative psychological aftermath of the disease, as it has been previously stated (Holland, 1991; Kagan 1998; Lock, Wilkinson y Bryan, 2001; Penn, Jones y Joffe 1997; Whitworth, Perkins y Lesser 1997). In other words: "When competence is seen as interactively achieved, social attribution of competence might be seen to relate closely to the way in which the trouble is managed by both speakers (...) Thus the view of competence as resting in the relationship may have implications for the social attribution of competence" (Ferguson 1996:57).

Therefore, the main purpose of this guide is to provide a battery of compensatory strategies to key-conversational partners, so they can make use of it to improve their communicative efficacy and accordingly minimize the damage caused to personal relationships by the linguistic impairment.



CONTENTS

Contents in the guideline are organized in the six following sections:

1. Pronunciation and intonation

In this section we offer some basic advices for key-conversational partners to produce clear utterances in order to be easily understood by the person with linguistic impairment. First of all, we point out the need of slowing down the rhythm of speech as well as vocalizing with clarity. This is especially suitable:

- When introducing important and/or unusual topics in conversation.
- In the case they have to repeat a sentence not previously understood by their relative.

We also recommend making use of intonation in an expressive but not paternalistic way, trying to speak calmly and not too loud.

2. Management of silences

In general terms, conversation tends to slow down when one of the participants is affected by any kind of linguistic impairment (Moreno 2006). Therefore, here we suggest key-conversational partners:

- To introduce some pauses in their intervention.
- To build up short sentences, easily understandable by the linguistically impaired person.
- To give their relative the extra time he/she may need to take his/her turn.
- To keep eye contact in order to show they are paying attention and waiting for an answer.
- To respect his/her speech rhythm trying not to rush him/her.

3. Participation in the conversation

It is convenient to foster the communicative autonomy and the participation of the person with linguistic impairment in conversation (Gallardo y Moreno 2005). In order to achieve that, we recommend relatives:

- Not to reduce conversation to essential information exchanges nor to *yes/no* questions.
- To build up short and collaborative speech turns, with the aim of enhancing the participation of the person with communicative difficulties.
- To foster informal chat, trying to preserve the pleasure of talking for talking's sake, as this will help their relative to keep his/her social abilities active.
- To avoid conversational splits, that is to say: situations where the linguistically impaired person is not included in the conversation maintained in his/her presence among two or more interlocutors.
- To show they are paying attention by means of gestures and body posture, as well as by means of expressions which demonstrate an active listening.

4. Formulation of questions

In this section we suggest key-conversational partners to employ two different strategies depending on the seriousness of their relative's linguistic deficit:

- As frequently as possible, open-ended questions should be used, so he/she can feel free to build up his/her own answer as long and complex as he/she wants.
- On the contrary, if the linguistically impaired person is absolutely unable to answer that sort of questions, it is advisable to ask a bigger number of *yes/no* questions.

5. Checking up of understanding

Here we point out the relevance of testing mutual understanding by means of direct questions or by making comments which reformulate the propositional content of their relative's intervention.

6. Management of interrupts

When conversational exchange is characterized by the presence of a person with linguistic impairment any interruption can be seen as a potential threat to his/her social image (Gallardo 2005 a y b). Thus, key-conversational partners are suggested to take advantage of any break in their relative's discourse to introduce their queries. Nevertheless, if interrupting is not avoidable, conversational partners should bear in mind the convenience of giving back the speech turn to their relative.

REFERENCES

Ferguson, A. (2000). Maximising communication effectiveness. En N. Müller (Ed.), *Pragmatics in speech and language pathology. Studies in clinical applications* (pp. 53-88). Amsterdam/Philadelphia: John Benjamins.

Gallardo, B. (2005a). *Afasia y conversación. Las habilidades comunicativas del interlocutor-clave*. Valencia: Tirant lo Blanch.

Gallardo, B. (2005b). Guía comunicativa para interlocutores-clave en el marco de la conversación afásica. *Estudios de Lingüística de la Universidad de Alicante*, 19, 157-168.

Gallardo, B. y Moreno, V. (2005). Estrategias colaborativas de compensación del déficit lingüístico: La importancia del interlocutor-clave en el Índice de Participación Conversacional. *Pragmalingüística*, 13, 87-113.

Holland, A. (1991). Pragmatic aspects of intervention in aphasia. *Journal of Neurolinguistics*, 6, 197-211.

Kagan, A. (1995). Revealing the competence of aphasic adults through conversation: A challenge to health professionals. *Topics in Stroke Rehabilitation*, 2, 15-28.

Kagan, A. (1998). Supported conversation for adults with aphasia: Methods and resources for training conversational partners. *Aphasiology*, 12(9), 816-830.

Lock, S., Wilkinson, R., y Bryan, K. (2001). *Supporting Partners of People with Aphasia in Relationships and Conversation*. Speechmark Publishing Limited.

Moreno, V. (2006). *Afasia y tempo dialógico: el índice de participación conversacional*. En B. Gallardo, C. Hernández y V. Moreno (Eds.), *Lingüística clínica y neuropsicología cognitiva. Actas del Primer Congreso Nacional de Lingüística Clínica. Vol. 1: Investigación e intervención en patologías del lenguaje* (pp. 87-106). Valencia: Universitat.

Penn, C., Jones, D., y Joffe, V. (1997). Hierarchical discourse therapy: A method for the mild patients. *Aphasiology*, 11(6), 601-613.

Prutting, C., y Kirchner, D. (1983). Applied Pragmatics. En T. Gallagher y C. Prutting (Eds.), *Pragmatic assessment and Intervention Issues in Language*. San Diego: College Hill.

Whitworth, A., Perkins, L., y Lesser, R. (1997). *Conversational Analysis Profile for People with Aphasia (CAPPA)*. London: Whurr Publishing.

Thanks for your kind attention!!

Remarks and comments definitely welcome:

fernandezmaite@uniovi.es
jopenon4@alumni.uv.es
Beatriz.Gallardo@uv.es

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Cuando una enfermedad limita las capacidades lingüísticas de una persona, sus familiares más cercanos también se ven afectados.

Ellos son los "interlocutores-clave" (las personas que se comunican más frecuentemente con el hablante con déficit lingüístico), y normalmente se encuentran en una situación de desconocimiento e impotencia a la hora de establecer esta comunicación.

Es importante recordar que la conversación es un medio para establecer vínculos afectivos con las personas que nos rodean. Aquí pretendemos ofrecer a los interlocutores-clave una serie de estrategias comunicativas básicas para mejorar la conversación con sus familiares, minimizando los problemas generados por el déficit lingüístico.



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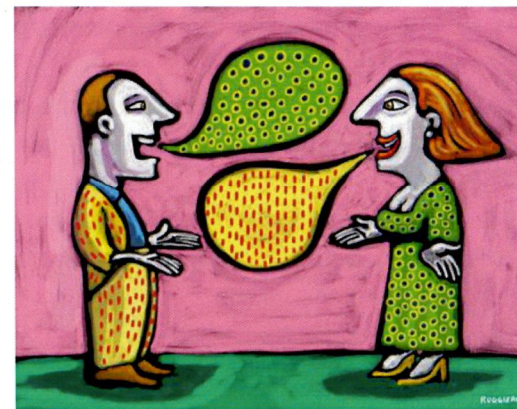
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UNIVERSITARI

Beatriz Gallardo Paúls
Maite Fernández Urquiza
José Luis Pérez Mantero
Verónica Moreno Campos

¿Qué te cuentas?



**UNA GUÍA BÁSICA
PARA LOS
FAMILIARES DE
PERSONAS CON
DÉFICIT LINGÜÍSTICO**

ESTRATEGIAS COMUNICATIVAS

1. Pronunciación y entonación

Para asegurarse de que su familiar le comprende, le sugerimos:

- Hablar con lentitud, vocalizando con claridad, especialmente:
- Al introducir temas importantes y/o no habituales;
- Cuando repita alguna frase que no haya sido comprendida previamente por su familiar.
- Utilizar la entonación de modo expresivo.
- No elevar demasiado la voz ni hablar a su interlocutor con tono infantil.

2. Silencios

En general, la conversación se enlentece cuando uno de los hablantes tiene cualquier tipo de déficit, por ello, le recomendamos:

- Introducir pausas dentro de su intervención.
- No emplear oraciones demasiado largas que puedan ser difíciles de comprender para la persona con déficit lingüístico.
- Dar a su familiar el tiempo que necesite para responder.
- Demostrar con la mirada que está a la espera de su respuesta.
- Respetar su ritmo de habla y tratar de no apremiarle.

3. Participación en la conversación

Es conveniente fomentar la participación del hablante con dificultades comunicativas; para ello, le aconsejamos:

- No limitar su conversación a intercambios de información imprescindibles, ni a preguntas de "sí o no".
- Potenciar la charla relajada e intrascendente: trate de conservar el placer de hablar por hablar. Esto ayudará a su familiar a mantener las habilidades sociales.

Demostrar que usted está prestando atención animará a su familiar a participar en la conversación. Para ello, puede:

- Utilizar la postura corporal, los gestos y la mirada: colóquese cara a cara, asienta con la cabeza, mantenga el contacto visual...
- Usar expresiones que demuestren una escucha activa: "ya", "ajá", "sí", "uhm"...

4. ¿Cómo formular preguntas?

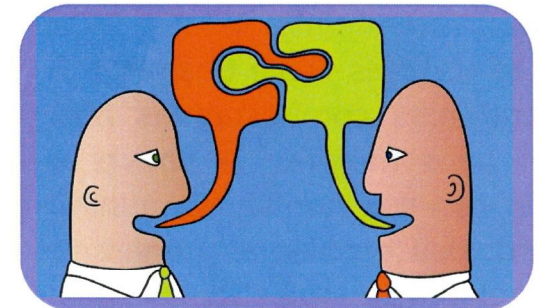
- Si las capacidades lingüísticas de su familiar lo permiten, resulta preferible formular preguntas abiertas, que potencien una respuesta libre, del tipo "¿Qué te pasa?", "¿Qué te ha parecido la película?".
- Por el contrario, si el déficit lingüístico es muy acusado, realizar un mayor número de preguntas concretas que puedan responderse con *sí / no*, puede servir para centrar los temas de conversación ("¿Quieres un zumo?", "¿Salimos un rato?").

5. Verificar la comprensión por ambas partes

- Para comprobar que su interlocutor le entiende, puede utilizar preguntas directas del tipo: "¿Sabes lo que quiero decir?", "¿Me entiendes?".
- Para asegurarse de que usted está comprendiendo lo que su familiar quiere decir, emplee preguntas del tipo: "¿Te refieres a...?", "¿Quieres decir que...?".

6. Interrupciones

- Si necesita solicitar una aclaración a su familiar, le sugerimos que aproveche alguna pausa: evite interrumpirlo en la medida de lo posible; puede avisarle con gestos o con la mirada de que necesita esa interrupción.
- Interrumpir no significa robar el turno de palabra: es conveniente que la persona con déficit lingüístico continúe hablando después de su intervención.



Más información: Beatriz Gallardo Paúls (2005), *Afasia y conversación. Las habilidades comunicativas del interlocutor-clave*, Valencia: Tirant Lo Blanch.