

Stroke



SOFIA



SOFIA Trial: sharing results

SOLution
Focused brief
therapy In post-
stroke Aphasia
#SOFIA21



Housekeeping

Please mute yourself during talks



The meeting is being recorded –
you may want to turn your camera off



Please use the 'chat' if you want to ask a
question or make a comment



We will keep the chat after the meeting, and
may use quotes – we won't use your name



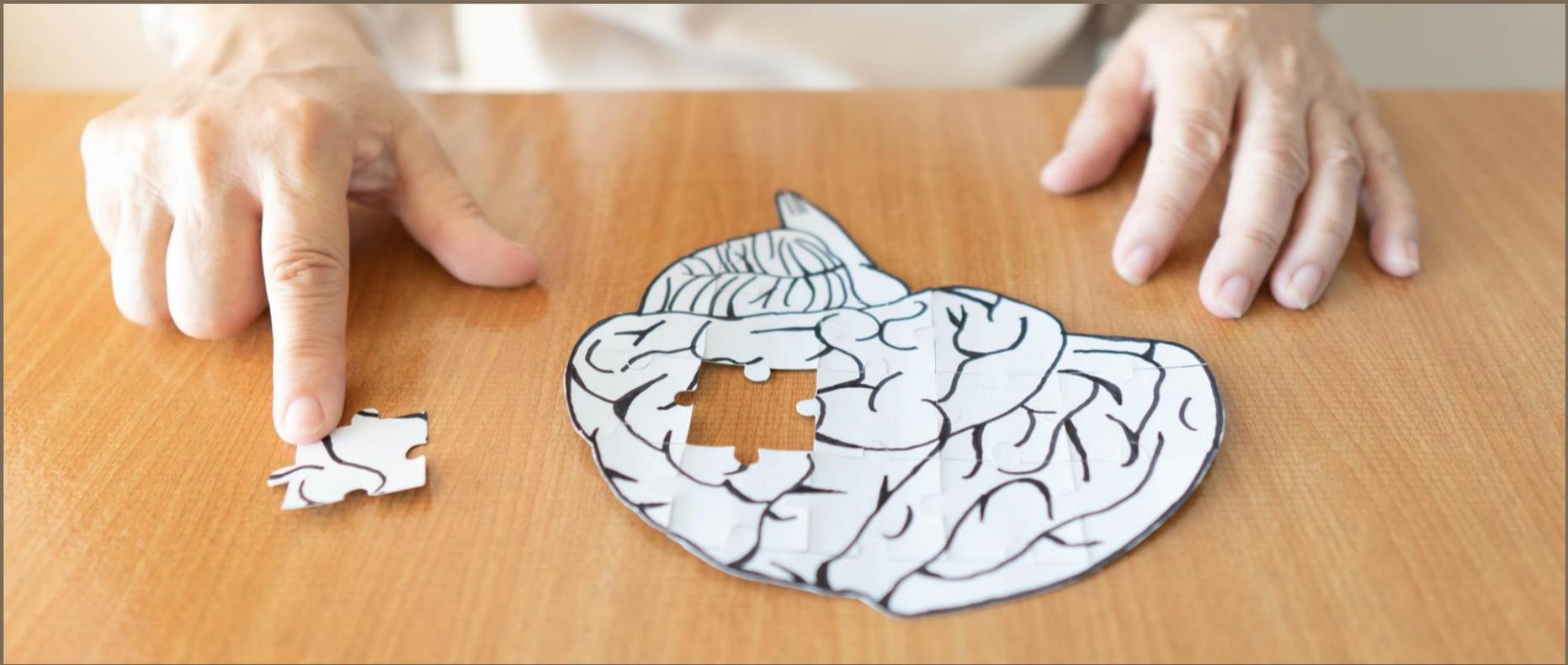
SOlution Focused Brief Therapy In post-stroke Aphasia (SOFIA Trial): a feasibility study

The Stroke Association Jack and Averil [Mansfield]
Bradley Fellowship Award for Stroke Research
Sarah Northcott, Katerina Hilari, Alan Simpson, Shirley Thomas, Shashi Hirani



- 4.00 SFBT, SOFIA & people with aphasia
- 4.20 John's story (video)
- 4.30 SOFIA: what did we find out?
- 4.40 Interview with SOFIA clinicians
- 4.55 Clinical outcomes and reflections
- 5.10 Q&A with panel
- 5.25 Closing





Aphasia

An elderly man with grey hair, wearing a dark flat cap and a grey jacket, is seen from behind, sitting on a dark wooden bench. He is looking out a large window at a blurred city street scene. The lighting is soft, suggesting late afternoon or early morning. The background shows buildings and a street with some traffic, but it is out of focus.

Rates of depression:

- 31% for all stroke survivors (Hackett et al., 2014)
- **62% for those with aphasia** (Kauhanen et al., 2000)

'I just seem to be closing in on myself' (Northcott & Hilari, 2011)



“oh, she’s not a suitable candidate because she can’t communicate”

‘For people with more marked communication difficulty, I don’t think it really is a (mental health) service if I’m being honest.’



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‘For people with more marked communication difficulty, I don’t think it really is a (mental health) service if I’m being honest.’

A close-up photograph of a person's hand gripping a window frame. The hand is in the foreground, with fingers wrapped around the frame. The background is a blurred cityscape seen through the window, with buildings and trees visible under a bright sky. The lighting is soft and natural, suggesting daylight.

What is Solution Focused Brief Therapy?

Hope





Stroke Association
Jack and Averil
(Mansfield) Bradley
Fellowship Award for
Stroke Research

November **2016** to
December **2020**



Living well with aphasia

SOlution **F**ocused brief therapy **I**n
post-stroke **A**phasia



Aim of the research

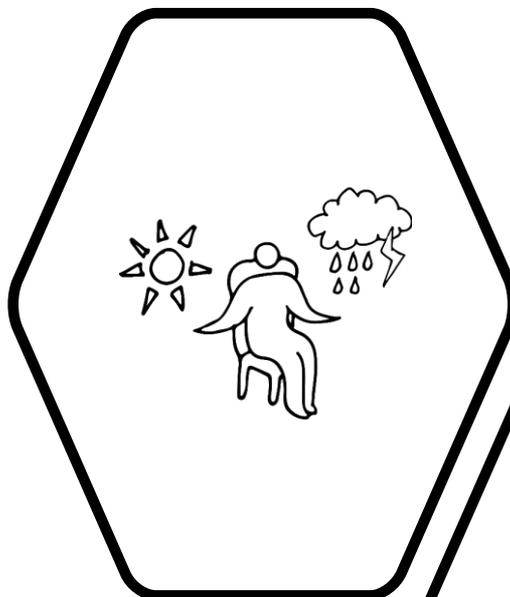
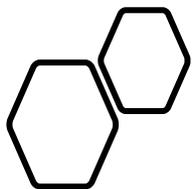
- Can a **psychological therapy** help people with **aphasia**?
- Improve **wellbeing**



Research questions

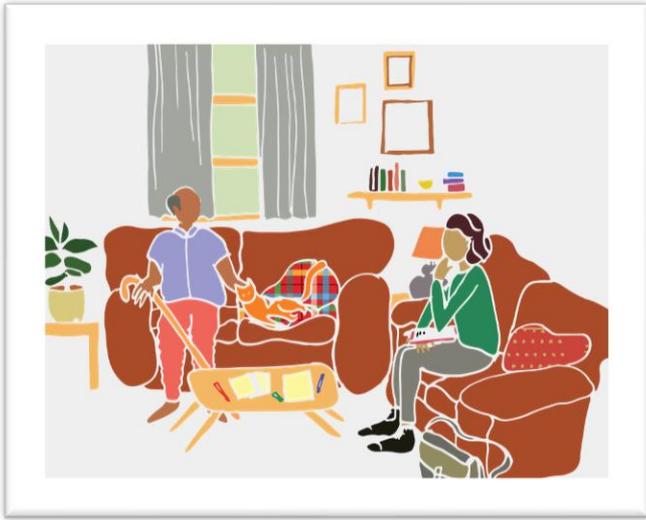
1. **Acceptability** of intervention to participants
2. Feasibility of **recruitment and retention**
3. Acceptability of **research procedures**
4. Feasibility of delivering intervention by **Speech & Language Therapists**

Is it worth doing a large-scale trial?



Study Design

- **Wait-list feasibility Randomised Controlled Trial**
- **Inclusion criteria:** aphasia; ≥ 6 months post stroke; >18 years old
- **Primary patient-reported outcome:** Warwick Edinburgh Mental Wellbeing Scale (WEMWBS)
- **In-depth interviews** conducted post therapy, transcribed verbatim, analysed using Framework



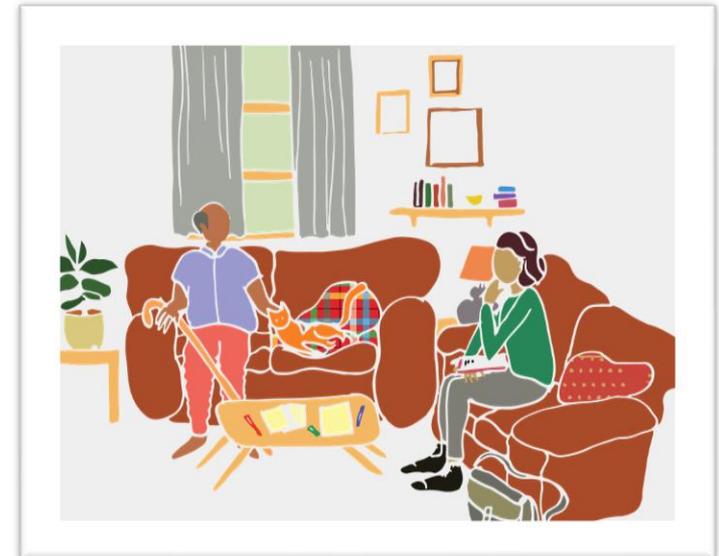
17 people



6 months

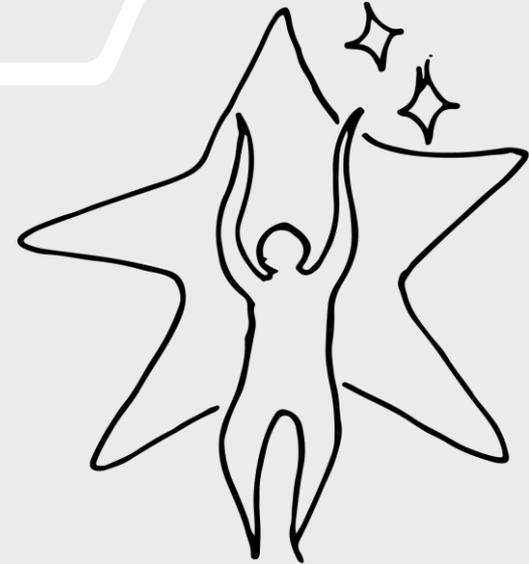
15 people

6 therapy sessions
over 3 months



Participants n=32

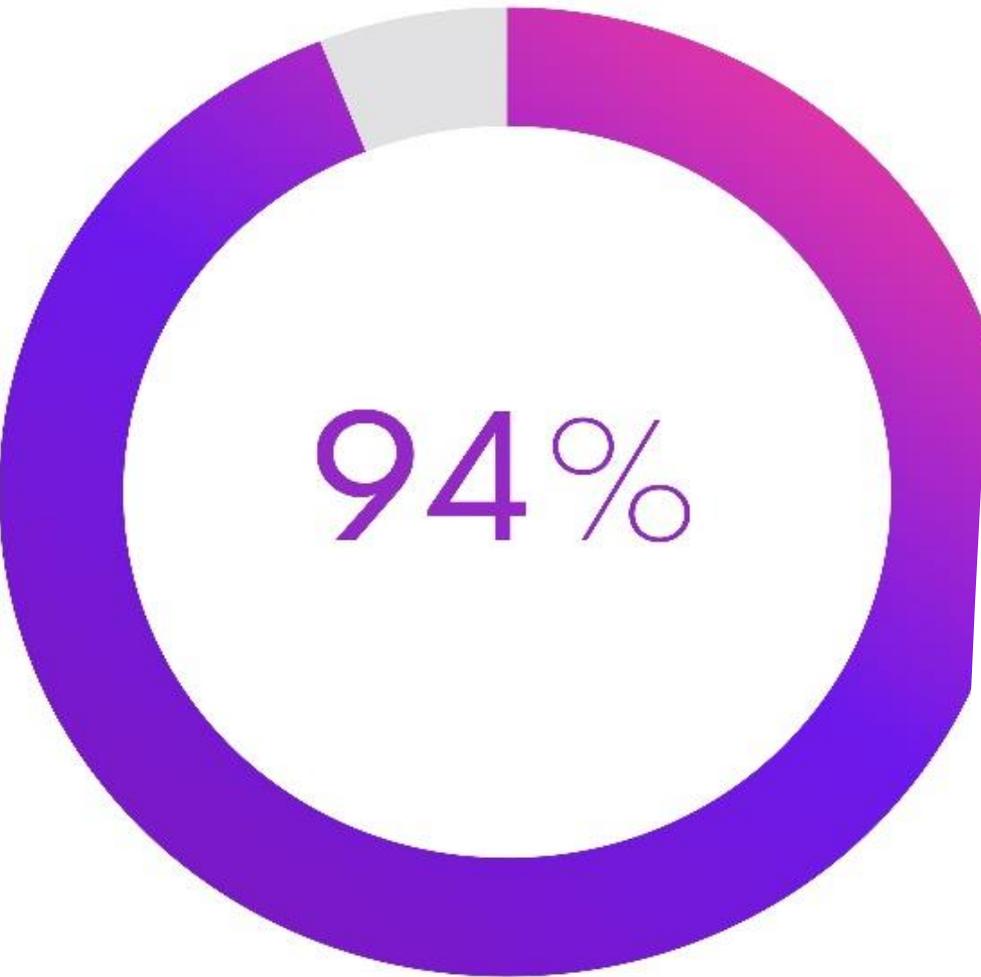
- Average age: 67.2 years
- Average time post stroke: 33.9 months (6 months- 12 years)
- 50%  ; 50% 
- Majority white (69%) & living with partner (53%)
- 56% mild-moderate aphasia; **44% severe aphasia**



How acceptable
was the therapy?



How much therapy did people receive?



Proportion of participants who received at least 2 sessions:
30/32 (94%)

- N=29 completed 6 sessions (90.6%)
- N=1 completed 5 sessions 3.1%
- N=2 withdrew (reasons: not feeling well, not the right time)



Session Rating Scale

Listened

9.4/10

How important

8.9/10

What we did

9.0/10

Overall

8.8/10



SOFIA
Aphasia
Advisory
Group





John Smejka, Adult courage award winner 2016

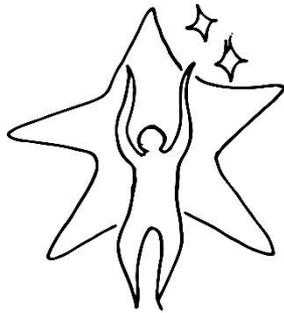


Interviews with people with
aphasia (30 interviews)

How did they find the therapy???

What people liked

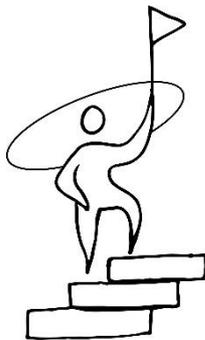
Exploring **hopes** for the **future**



Sharing **feelings** & experiences



Relationship with
therapist



Noticing **achievements**



Companionship & Connection

Christy: one day I'll walk in the garden again

- **Connection:** *'oh we had a nice time... we got on like a house on fire'*
- **Hopes:** *'I was telling her that one of these days I'm going to walk out there as well, in the garden'*
- **Achievements:** *'we talk a lot about how I am progressing, how I manage my walking'*
- **Sharing distress:** *'[therapist] was here listening and taking part and joining in to all my conversations... oh yes, she was very good, helping me through the cold times'*

ess

'I mean I'd wake up now and sometimes and I smile, you know, because I'm glad to wake up whereas... I didn't want to wake up'

Mood & Identity



Communication



'It helped me, for example, I start talk [on the phone] to my, my, my son [who lives abroad].. Oh two years, two, two years I don't, couldn't do it, but [therapist] is there, I try to make it... my son is very happy now'

Relationships



pation



Types of

'It make you somebody, hey... oh, it good, good, good, good, and so, it give me courage, courage, courage... Now, now I am myself'

'There is somebody come talk, and talking to you so you're still alive, you know, still alive.'

'Changed' n=11
Therapy highly valued, made a meaningful difference



'Connected' n=10
Therapy valued primarily for connection with therapist; few seeking to make change



'Complemental' n=4
Therapy one part of person's upward trajectory



'I'm always going up... it's going up, up, er, up, up, up.'

'Discordant' n=5
Participants wanted to focus on language



'So like speaking, reading and writing, that's really, really crux... um, how I feel, you know, I don't care about that.'



Research questions

1. Acceptability of intervention to participants

2. Feasibility of **recruitment and retention**

3. Acceptability of **research procedures**

4. Feasibility of delivering intervention by **Speech & Language Therapists**

Is it worth doing a large-scale trial?



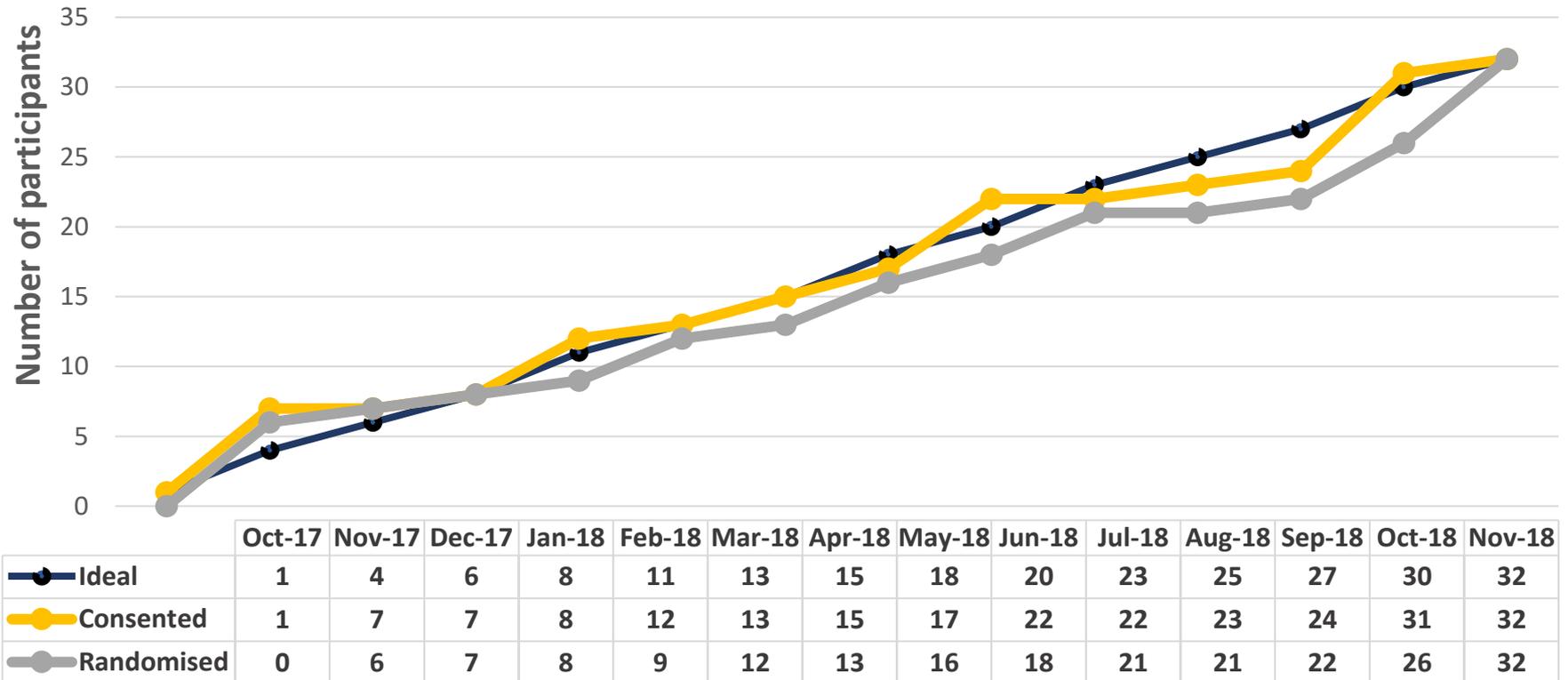
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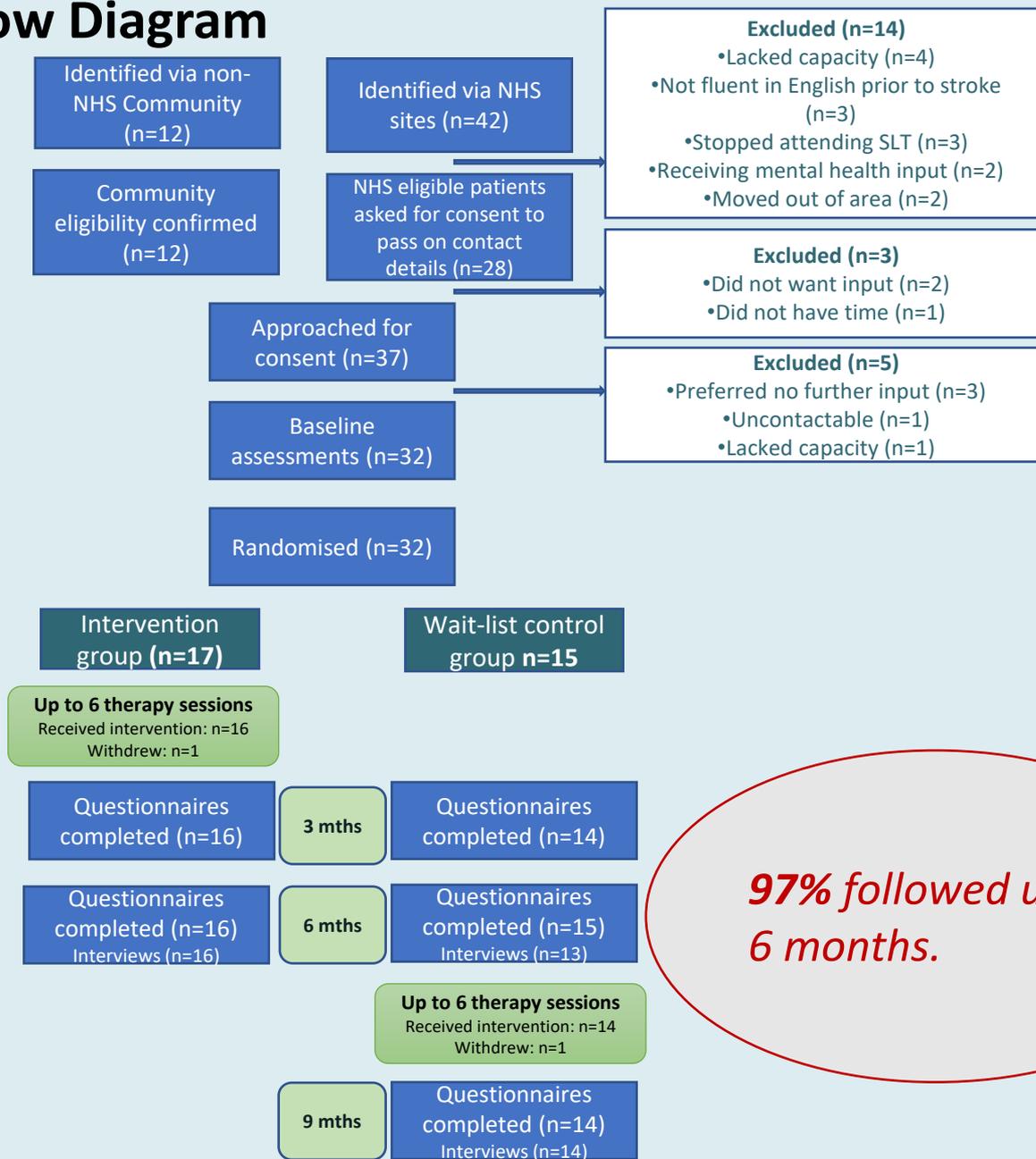
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RQ2: Feasibility of recruitment

Fully recruited within pre-specified time window



SOFIA Consort Flow Diagram



97% followed up at 6 months.

RQ3: Acceptability of research procedures & outcome measures

Clinical outcome measures: minimal missing data (<0.01%)

Participant experience of assessment visits

- Liked the research assistants – kind, genuinely caring
- Liked being asked questions about their life by someone concerned

Outcome measures sometimes tiring. It helped:

- Being offered breaks
- Given support and time to comprehend questions

Wait-list design

- Many had no preference about groups
- Some unhappy about six month wait
- Misunderstandings about the allocation process





Research questions

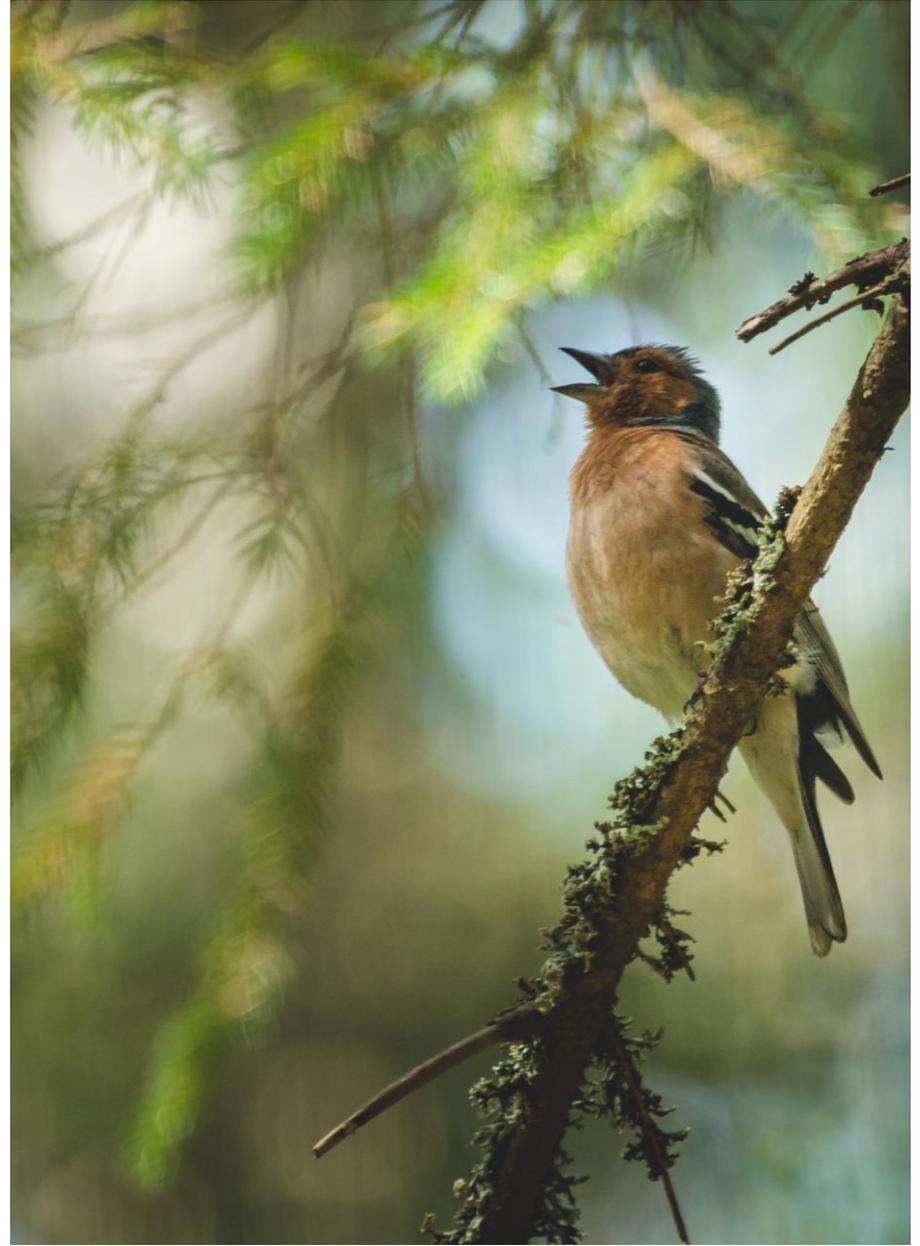
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How did Speech
and Language
Therapists find
it?

- 6 days training (with BRIEF & at City)
- monthly clinical supervision
- real-time support as needed
- peer support





Aspects of SFBT

- Hearing what's important
- Noticing & valuing the person
- Looking for exceptions to the problem
- Working with their skills and resources

Useful questions:

'What are you hoping for?'

'What would you like to feel instead of...'

'What difference will that make?'

'Tell me about times when...'





Implications for clinical practice

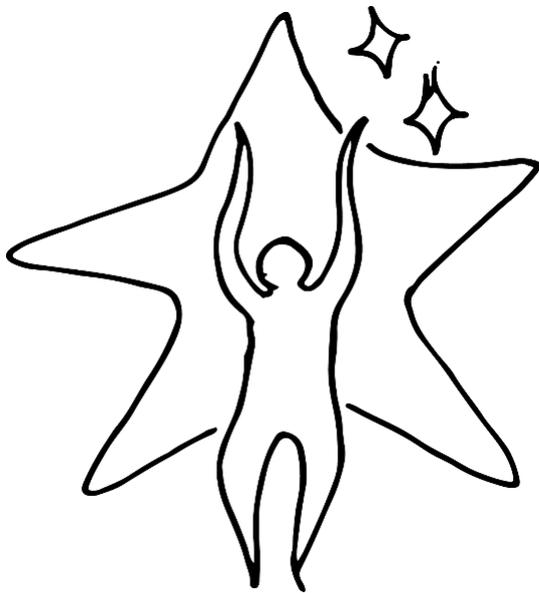
- **Meeting the person**, not a collection of problems
- Focusing therapy on **what matters** to the person
- The **value of listening** – hearing someone's **hopes**, their **achievements**, their **distress**
- **Gaining support for yourself**



Linguistically accessible SFBT?

- **Total communication** – writing key words, gesture, drawing, pictures, objects
- Simplifying therapist language
- **‘Unmasking competence’**
- Giving people **time**
- SFBT as a set of assumptions rather than a set of techniques

Conclusion



- SFBT was **highly acceptable**, even to people with severe aphasia
- Participants valued **exploring hopes, sharing feelings and achievements**, and the **connection** they felt with the therapist
- It was **feasible to recruit and follow up** participants
- It was **feasible for SLTs** to deliver the intervention, with training, supervision and real-time support



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HOME BLOG POSTS TAKE PART? ABOUT SOFIA THE TEAM THE THERAPY USEFUL LINKS Search Search

Welcome to SOFIA research project!

SOFIA



[@sarahnorthcott8](https://www.instagram.com/sarahnorthcott8)

<https://blogs.city.ac.uk/sofia/>

Aphasia Access podcast Episode 64:
<https://www.aphasiaaccess.org/podcasts/>

Northcott S, Simpson A, Thomas S, Barnard RA, Burns K, Hirani SP, Hilari K., (2021) 'Now I am myself': exploring how people with post-stroke aphasia experienced Solution Focused Brief Therapy within the SOFIA Trial. *Qualitative health research*. doi:[10.1177/10497323211020290](https://doi.org/10.1177/10497323211020290)

Northcott, S., Simpson, A., Thomas, S., Hirani, S.P., Flood, C., & Hilari, K. (2019). Solution Focused brief therapy In post-stroke Aphasia (SOFIA Trial): protocol for a feasibility randomised controlled trial. *AMRC Open Research* <https://amrcopenresearch.org/articles/1-11>

Northcott, S., Burns, K., Simpson, A. and Hilari, K. (2015). "Living with aphasia the best way I can": a feasibility study exploring Solution-Focused Brief Therapy for people with aphasia. *Folia Phoniatica et Logopaedica*, 67(3), 156-167. doi: 10.1159/000439217 <http://openaccess.city.ac.uk/12474/>

Coming soon!

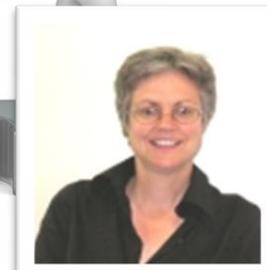
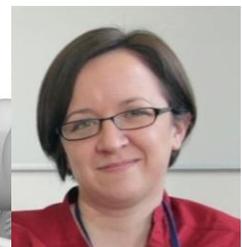
Northcott S, Thomas S, James K, Simpson A, Hirani SP, Barnard RA, Hilari K., Solution Focused brief therapy In post-stroke Aphasia (SOFIA): feasibility and acceptability results of a feasibility randomised wait-list controlled trial. *BMJ Open*. Accepted subject to revisions.

BRIEF

Stroke association



all the participants!





SOFIA study: sharing our findings

#SOFIA21

Thank you for coming!

To find out more about the study
bit.ly/SOFIAblog

Journal article: bit.ly/SOFIAqual

Short video: bit.ly/SOFIAvideo1

