CHANGING PATTERNS OF REPAIR IN THE CONVERSATIONS OF ONE APHASIC COUPLE: A COMPARISON OVER TIME

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Abstract

This project is part of a wider funded ERSC study 'Long Term Adaptation to Conversation by People with Aphasia and their Partners' (ESRC R000239306). This wider study aimed to investigate the process of adaptation to conversation by seven couples living with aphasia, using data collected at seven regular intervals post-CVA; 3 months, 4.5 months, 6 months, 12 months, 18 months, 24 months and 30 months. This present project used conversational data collected from one of these couples at 4.5 months and 18 months post-CVA.

This project will review current literature in the field of aphasia, focusing in particular on research concerning spontaneous recovery. The method of conversation analysis as a tool for investigating talk-in-interaction will be outlined and discussed. Relevant research using conversation analysis will be discussed, namely studies concerning turn-construction methods and repair. Then the application of conversation analysis to data from speakers with aphasia will be discussed, as will the issue of repair patterns in aphasia.

The analysis section will outline the changing patterns of repair that were found upon detailed analysis of the conversational data. The first pattern of repair concerns self-initiated other-repair and other-initiated repair, and the second pattern is form of self-initiated, same-turn repair.

Finally, a summary of the results shall be presented, and the implications of these results will be discussed. The limitations of this project and areas for future research shall be outlined.
Introduction

Aphasia

Acquired aphasia is a communication disorder that can affect the ability to use and understand spoken and written words and other symbolic activities. This is a chronic condition that can be the result of, commonly, a cerebrovascular accident (CVA), or less commonly, a head injury (Enderby and Emerson, 1996). A CVA, more commonly known as stroke, is an acute focal neurologic dysfunction of vascular origin caused by either intracerebral or subarachnoid hemorrhage, which lead to the infarction of brain tissue (Payne, with Minus, 1997).

The severity and pattern of deficits depends on many integrating factors, including size and anatomical locus of the lesion, and the type of stroke. Geschwind et al (1971) proposed that the site of the lesion correlates with the quality of spontaneous speech production, which lead to a classification system by syndromes (Sarno, 1980). One of these classifications, Wernicke’s aphasia, is characterised by spontaneous, fluently articulated speech with a reduced content, paraphasias and neologisms, poor repetition and impaired comprehension, reading and writing (Payne, with Minus, 1997). Consequently, Wernicke’s-type aphasia is also referred to as fluent aphasia due to the fluent nature of spontaneous output. One feature of fluent aphasia that is often mentioned in research is the impaired ability to monitor their speech and an unawareness of errors they produce (Butterworth, 1979). Conversational turn-taking behaviour has been argued to remain intact in aphasia (Schienberg & Holland, 1980, Ferguson, 1998), although excessively long turns have been reported in fluent aphasia with impaired ability to self-monitor (Edwards and Garman, 1989). More recently,
researchers (e.g. Laakso, 1997) have argued that speakers with fluent aphasia are not as deficient in self-monitoring skills as has been previously suggested.

Various changes occur in the initial stages following a given lesion, including raised cerebral spinal fluid pressure, vascular disruption and diachisis. This initial depression of function is followed by a period of spontaneous recovery. Phenomena such as recovery from diachisis, regenerative and collateral sprouting and long-term potentiation at a physiological level and redundancy, substitution and levels of representation at a structural level will interact to promote physiological repair and restitution (Powell, 1981). There is evidence that patient’s with Wernicke’s-type aphasia will recover function in various language components, including the information content of spontaneous speech and naming, although less recovery is seen in Wernicke’s-type aphasia compared to Broca’s-type aphasia (Kertesz, 1984).

It is generally accepted amongst researchers that various types of aphasia and language components recover differently and therefore some patients will have their primary period of recovery later than others (Kertesz & McCabe, 1977, Bruce, Howard and Gatehouse, 2000). The traditional consensus on the shape of the curve of the period of spontaneous recovery is maximal improvement occurs in the three months post-onset before flattening out and reaching a plateau between six and twelve months post-onset (Basso, 1992, Holland, Greenhouse, Fromm & Swindell, 1989, Kertesz & McCabe, 1977). However, some researchers argue that components of language function can continue to recover after the period of spontaneous recovery has ended, although there have been very few systematic studies of long-term
recovery of language function in aphasia (Penn, 1987, Bruce, Howard and Gatehouse, 2000).

The organisation and function of a patient’s brain in the initial days after a CVA will differ from a few weeks and months post-onset, therefore the deficits observed and interventions required will also differ according to the patient’s phase of spontaneous recovery (Keefe, 1995, Papathanasiou & Whurr, 2000). Researchers argue that speech and language therapy (SLT) intervention is most effective when coinciding with the period of spontaneous recovery (e.g. Kertesz & McCabe, 1977). There is evidence to suggest that patients with chronic aphasia can make therapeutic gains in improving functional communication and adapting their linguistic capacities to the demands of the conversational environment (Penn, 1987). Therefore, the long-term rehabilitation process will differ from the therapeutic approaches employed in the acute stages of recovery and will focus more on adaptation and compensation.

**Conversation Analysis**

Conversation analysis (hereafter CA) is the term used to describe a form of method and analysis, developed within the analysis of common-sense reasoning and practical theorising in everyday activity (ten Have, 1999), used to investigate human interaction. In particular, it investigates ‘talk-in-interaction’, as talk is the primary medium through which social interaction takes place (Damico, Oelschlaeger and Simmons-Mackie, 1999). The original exponent of this approach was Harvey Sacks (1935-1975), who advocated the use of materials from naturally occurring occasions of everyday interaction in order to describe and explore the functions of any recurrent process during talk-in-interaction. CA originally focused on data obtained from non-
disordered speakers; more recently CA has been used to investigate data obtained from speakers with communication disorders.

The methodological approach to CA is summarized in the following four principles (Wilkinson, 1999):

1) *Analysis is participant-driven*. The data should be approached with as few preconceptions as possible. This contrasts with the more common ‘analyst-driven’ approach, when analysts approach the data with hypotheses about what the relevant investigative issues will be. The participants themselves provide evidence of their own interpretations of each other’s talk through subsequent turns in conversation.

2) *Assumption that conversation is orderly*. All aspects of talk-in-interaction exhibit patterns of structurally organised turns. Turns require at least two participants; therefore the focus of CA is on the contributions made by all participants, not just on an individual.

3) *Importance of sequential context*. The type of turn produced by a participant is produced in response to, and shaped by, the previous utterance. This analytic concept has been termed the adjacency principle and shows how sequential turns can be anticipated and fulfilled in conversation.

4) *Wariness of quantification*. Analysts should display caution in analysing conversation phenomena out of their sequential context. Therefore quantitative analysis should be viewed in conjunction with analysis within sequential context.

Whilst it is important not to violate the assumption that analysis is participant-driven, analysis often begins with a systematic study of the construction of turns, pauses,
overlaps and distortions in turn-taking, then continues with looking for sequences, and culminates with noting any phenomena of repair.

**Turn Construction**

Talk is a collaborative and interactive process with participants switching between the talker and listener role to exchange messages on a real-time basis. This idea of exchanging messages between participants has been termed turn taking or turn construction. Turns are constructed out of four different sized unit of talk (Sacks, Schegloff & Jefferson, 1974). These are referred to as ‘turn-constructional units’ (TCU), and these different sized units can all be constitute possibly completed turns, upon which completion, transition to the next speaker becomes relevant; in other words, a ‘transition-relevent place’ (TRP). It is important to note that turns are constructed one unit at a time so each unit is followed by a TRP at which the current turn may end (Nofsinger, 1991). The organisation of the TCU is referred to as ‘grammar’ which inhabits articulated talk-in-interaction rather than prototype sentences (Schegloff, 1996). The smallest TCU is constructed of a single lexical item (uh-huh can be considered a completed turn at talk). Other turns are constructed with a phrase that does not constitute a sentence, others are constructed with a clause that contains the necessary components to be classed a sentence but is not a stand-alone sentence, and finally other turns are constructed with a full sentence (Sacks, Schegloff & Jefferson, 1974). One important feature of turn construction and the TCUs is that, from the beginning, they project aspects of their planned shape and type. This projection of the turn-type or turn-shape at turn-beginnings is critical for the organisation of turn-taking in conversation (Schegloff, 1987). Turn-beginnings are often where speakers will repeat or recyle part of their utterance. Whilst the recycling
of turn-beginnings is not uncommon in non-aphasic conversation (Schegloff, 1987) there is sparse literature on the abandoning of turn-beginnings in the field of aphasia or, it would appear, the field of CA and non-aphasic conversations.

Overlaps are simultaneous talk that arises from the normal operation of the conversational turn system (Nofsinger, 1991). Overlaps occur when more than one person talks at once in a conversation and is managed by participants in conversation by a set of practices that compose the overlap resolution device. These set of practices are a component of turn-taking organisation (Schegloff, 2000). Overlap can be a tactic for dominating a conversation or conversely for showing support for a speaker. Furthermore, there are some aspects of turn construction that provide resources for conditional entry into the turn space of another speaker, such as word searches and silences (Lerner, 1996).

**Repair**

Repair is the general technical term that is used to describe the process of fixing conversational problems, or in some cases non-problems, for example revising talk that appears to have no noticeable errors (Nofsinger 1991). The existence of repair mechanisms were described as being part of a model for the organisation of turntaking, in order to deal with turn-taking errors and violations (Sacks, Schegloff & Jefferson, 1974). Therefore turn-taking and repair are integrally related.

Schegloff, Jefferson & Sacks (1977) have distinguished between who initiates the repair, and drew a second distinction between who produces the actual repair. Self-initiation of repair is produced by the speaker of the trouble source, and other-
initiation of repair is produced by someone else other than the speaker of the trouble source. Therefore, self-initiated self-repair refers to a speaker of a trouble source initiating, and completing, repair on their own trouble source. Self-initiated other-repair refers to the speaker of the trouble source initiating repair, upon which another speaker contributes to resolve the trouble source. Conversely, other-initiated repair refers to one speaker marking a trouble source of another speaker as troublesome. Self-initiation and other-initiation of repair are distinct types but are not alternatives to each other. They deal with the same trouble types and are related, and this relatedness is organised. This organisation of repair in conversation favours self-initiated self-repair (Schegloff et al, 1977).

Furthermore, repairs are often completed within the turn in which the trouble-source occurred, and self-initiated same turn repairs are the most common form of repair (Schegloff, 1979). Whilst self-initiated repairs commonly occur within the same turn they were initiated, other-initiated repairs may be accomplished in multiple turns. As speakers’ talk moves away from the problematic turn, it becomes increasingly difficult to design an effective repair (Nofsinger, 1991). Repair sequences have the potential to take over as the ‘interactional business’ of the normal interactional activity (Jefferson, 1987). Whilst repair is usually completed quickly and efficiently so that the resumption of the TCU can occur, repair can be an event that threatens face (Couper-Kuhlen, 1992).

As was mentioned earlier, turn-beginnings project the turn-type or turn-shape and the current turn projects some range of possibilities for the next turn (the sequential implicativeness of a turn). Turn beginnings are sequence-structurally important places
in conversation (Sacks, Schegloff & Jefferson, 1974), and as such are subject to multiple sources of overlap and vulnerable to trouble. Moreover, turn-beginnings in topic-initial turns very often have self-repair in them (Schegloff, 1979). The occurrence of repair can change the shape and composition of that sentence, and can have consequences for the sequential implicativeness of current or next turn (Schegloff, 1979). For example, an activity such as searching for a word can become a visible event (Goodwin & Goodwin, 1986), which is self-initiated but leads to collaboration in order to resolve the trouble source. Therefore the form of the sentence in which the word search began, and the subsequent turns, have been affected by the occurrence of repair.

**Conversation Analysis and Aphasia**

The need for assessment of pragmatic communicative capacities in aphasia has been recognised (e.g. Davis & Wilcox, 1985) in order to identify contextual impairments that may require therapeutic intervention. However, there has historically been an absence of procedures using spontaneous speech as an analytical tool in aphasia both in the clinical and research setting (Sarno, 1980). Some researchers (e.g. Wilkinson, 1999) have suggested that analysing spontaneous talk poses unique difficulties due to random and ambiguous nature of naturally occurring talk. These difficulties increase with the presence of aphasia. Furthermore, it has been suggested that conversational procedures have poor reliability (Manochiopinig, Sheard and Reed, 1992).

To this effect, an investigation of the reliability of CA as an assessment tool was undertaken (Perkins, Crisp & Walshaw, 1999). This study compared quantitative and qualitative analyses of collaborative repair in dyadic conversations between eight
different people with aphasia and their relatives, recorded on four different occasions. Their findings included support for qualitative analysis of conversations as a tool for showing change over time and explaining the nature of change, and indicated reliability in this methodology.

Another study that supports CA as a tool for describing the nature of conversational potential and change in an individual with aphasia was by Goodwin (1995). This study details how a man with severe non-fluent aphasia at 13 years post-onset was able to sustain conversational competence through collaboration with co-participants, revealed through the use of CA. Wilkinson (1999) adds support to this argument by highlighting the possible advantage of the CA procedure to uncover patterns in aphasic talk which indicate the methods used and problems encountered by the participants of these conversations.

In recent times, aphasic literature has included many studies where CA has been applied to aphasic data, with greater emphasis on the collaborative nature of conversational interactions (Damico, Oelschlaeger & Simmons-Mackie, 1999; Simmons-Mackie & Kagan, 1999; Wilkinson, 1999; Beeke, Wilkinson & Maxim, 2001; Schegloff, 2003; Wilkinson, Beeke & Maxim, 2003). Furthermore, there has been many single case studies that have applied CA methodology to investigate how individuals or how one aphasic conversational dyad constructs turns at talk (Wilkinson et al, 1998; Booth & Perkins, 1999; Beeke, 2003; Beeke, Wilkinson & Maxim, 2003a; Beeke, Wilkinson & Maxim, 2003b).

Furthermore, the Booth and Perkins (1999) study was a single case study which employed CA methodology to look at change in the conversations of one aphasic
dyad, comparing pre-intervention and post-intervention, to evaluate the outcome of a therapeutic programme. This study illustrated the effective use of CA to inform therapy and to address specific issues for an individual with aphasia and their main conversational partners.

Another study that has used CA methodology to compare data across time is by Lock, Wilkinson and Bryan (2001). This study described how a period of couples-based intervention benefited both the partners and the people with aphasia, and highlighted the positive effects of working with partners as a therapy programme.

Whilst CA methodology has been applied to single case studies, and has been used to show change across time, there are no studies in aphasia literature that have employed CA methodology to investigate how the conversational and interactional behaviours of aphasic couples change over time due to spontaneous recovery. There have been previous studies that have investigated change in chronic patients in relation to spontaneous recovery (e.g. Penn, 1987), but none that has specifically used CA as an investigative tool to highlight change attributable to spontaneous recovery. This present study aims to contribute to addressing this gap in the literature.

**Aphasia and Repair**

Repair has been extensively investigated both in aphasic and non-aphasic conversation. Repair organisation is a particularly salient device within aphasic interaction, as the very nature of aphasia has the potential to produce a variety of trouble sources that may impact on the progressivity of a conversation (Perkins, 2003). Within the field of aphasia, the focus of research has been on whether the repair mechanism in aphasia talk works to avoid frequent, sustained or irretrievable
communicative breakdowns, and how participants collaborate to manage repair in conversation (Lesser & Milroy, 1993). Previous studies have investigated repair in relation to the type of aphasia, fluent or non-fluent.

One such study is described by Laakso (1997). This study specifically looked at self-initiated repair in fluent aphasia. CA methodology was applied to 16 conversational dyads in order to investigate the extent fluent aphasics self-initiate repair after producing word forms, how self-initiated repair proceeds in the trouble-source turn and the interaction with conversational partners during self-initiated repair sequences. Another study (Wilkinson, 1995) used a single case analysis to gain insight into the impact of trouble source and repair in the interaction between an individual with non-fluent aphasia and his therapist.

Other studies have specifically looked at how participants collaborate to manage repair using the ‘hint and guess’ sequence (Lubinski, Duchan & Weitzner-Lin, 1980; Laasko & Klippi, 1999). These studies describe how the individual with aphasia will deal with aphasic problems, such as a word search or self-repairing a paraphasic error (the latter is particularly relevant to individuals with fluent aphasia), by providing a hint towards the target within their turn, which is followed by a guess by the coparticipant in the following turn. This pattern continues over subsequent turns until the target is agreed.

However, there are few studies reported in the literature that specifically look at how repair is collaboratively managed with a single conversational dyad with aphasia, and how this management of repair changes over time as a result of spontaneous recovery.
One such study that goes part way to filling this gap in the literature is described by Wilkinson, Gower, Beeke & Maxim (in press). This study looked at changes in the turn-constructional methods employed by a man with an anomic-type fluent aphasia across time. By using CA to compare conversations at different time periods post-CVA, the study revealed qualitative differences in the way the aphasic speaker adapted his limited linguistic resources to the demands of the conversation in order to lessen the visibility of his impairment and reduce his identity as ‘different’.

Another study (Gower, 2004) that is linked to the previously mentioned research, looked specifically at the changing repair mechanisms within the conversations of one aphasic couple at two points in time within the period of spontaneous recovery. This study found qualitative differences in the patterns of repair employed by the couple. The present study therefore aims to extend the work of Gower (2004) by applying CA methodology to investigate changing repair patterns in the conversation of one aphasic couple during the period of spontaneous recovery.
Methodology

This project is part of a wider ESRC-funded study entitled ‘Long Term Adaptation to Conversation by People with Aphasia and their Partners’ (ESRC R000239306). This wider study aimed to investigate the process of adaptation to conversation by seven couples living with aphasia, using data collected at seven regular intervals post-CVA; 3 months, 4.5 months, 6 months, 12 months, 18 months, 24 months and 30 months. This present project used conversational data collected from one of these couples at 4.5 months and 18 months post-CVA.

Subjects

The subjects in this present study were volunteers for the ESRC R000239306 study, who were recruited from the speech and language therapy (SLT) caseloads from hospitals within NHS trusts that have links to the Department of Human Communication Science at University College London.

Selection Criteria

The ESRC R000239306 study asked SLTs to refer clients who:

- Have had a single CVA within the previous three months and have no history of brain injury
- Have been judged stable enough by their medical staff to return home
- Have no previous history of speech and language problems
- Have no hearing loss which would significantly affect participation in conversation
• Have no history of cognitive disorders or mental illness
• Be monolingual English speakers
• Have a partner who they live with and who is willing to be involved in the data collection.

**Couple Profile**

Keith and Annie were randomly selected to partake in this present study from the seven couples living with aphasia that met the selection criteria for the ERSC R000239306 study. Keith was 69 years old at the start of the data collection. He was previously employed as the managing director of a clinical waste disposal company. He suffered a left CVA 3.5 months prior and was classified as presenting with Wernicke’s aphasia on the Western Aphasia Battery (Kertesz, 1992). There were meant to be seven data sets but unfortunately Keith died after the fifth data set collected at 18 months post-CVA. Annie, his wife, is his main everyday conversational partner.

**Data Collection**

Conversation analysis is the systematic analysis of talk-in-interaction, and as such requires access to the recordings of the talk produced in everyday situations (Hutchby and Wooffit, 1998). For this present study, video recordings were used instead of audio recordings as, whilst conversation analysis was originally developed on the basis of audio recordings only, the use of video is advisable as it provides a wealth of contextual information (ten Have, 1999). Keith and Annie were familiarised with the video equipment and provided with written operating instructions by a researcher.
from the wider ESRC project. They were instructed to record two typical conversations of approximately twenty minutes at home over a period of a week. In order to minimize the effects of the Observer’s Paradox (Labov, 1970) and to obtain samples of naturalistic talk, Keith and Annie were encouraged to identify a regular time when they sit down together to chat, and asked to independently record the type of conversation they would normally have. All recordings for this present project were undertaken in their living room with Keith and Annie sat in armchairs. A total of 43 minutes and 30 seconds was collected at 4.5 months post-onset, and 19 minutes and 40 seconds at 18 months post-onset.

Whilst the recordings serve as the ‘focal data’ (ten Have, 1999), additional data was gathered in the form of interviews with Keith and Annie at each data collection interval. Keith’s language function was assessed using the ‘Western Aphasia Battery’ (Kertesz, 1982) at the first data collection, and the ‘Pyramids and Palm Trees Test’ (Howard and Patterson, 1992) and subtests 47 and 53 from the ‘Psycholinguistic Assessment of Language Processing in Aphasia’ (Kay, Lesser and Coltheart, 1992) at each data collection.²

**Transcription**

It was decided to begin the data transcription at a topic initiation after approximately ten minutes of talk. This was to ensure that Keith and Annie had time to become accustomed to talking whilst the video was recording them. For this present project it

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¹ All names and places have been changed to ensure confidentiality.
² For a summary of the results of formal language tests see appendix 1
was decided to transcribe a sample of a piece of continuous talk that represents normal interaction of roughly ten minutes duration. ³

A total of 10 minutes 40 seconds was transcribed from the recordings made at 4.5 months post-onset (hereafter Data Set 1). It begins at 8 minutes 37 seconds into the recording. A total of 11 minutes 54 seconds was transcribed from the recordings made at 18 months post-onset (hereafter Data Set 2). It begins 6 minutes and 30 seconds into the recording. Whilst comparing two data sets that differ in length is not ideal, it was felt that both data sets yielded examples that were representative of this couple’s talk.

The two data sets were transcribed using the Jeffersonian Conversation Analysis Conventions⁴ and Standard English orthography to capture verbal and non-verbal talk-in-interaction. The exception to this is when a broad phonetic transcription was employed to capture features of aphasic talk, such as neologisms and jargon.

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¹ For full versions of the transcriptions see Appendices 3-4
Preliminary Analysis

One of the most distinctive features of CA methodology is that exemplars are used as the basis on which a generalizable description is built, as opposed to starting with a hypothesis to be tested using a large collection of data (Hutchby and Woofit, 1998). The process of analysing the data for this present project began with looking at the conversations in an unmotivated way (Sacks, 1984) in order to see what patterns emerge, and to see how these patterns compare over the two conversations.

A comparison of the results of the formal language tests at 4.5 months and 18 months post-CVA revealed some improvement in Keith’s linguistic ability, although his performance on the spoken picture-naming test was better at 4.5 months. This overall improvement in his linguistic skills was to be expected as Keith was still in a period of spontaneous recovery. Therefore it was hypothesized that changes in his linguistic skills would impact on his conversational methods that would lead to qualitative differences between the conversations over time.

One interesting phenomena to emerge from preliminary analysis of the data were patterns of self-initiated other repair in data set 1. This is interesting as there are no patterns of this type of repair in data set 2. Conversely, preliminary analysis revealed no patterns of other-initiated repair in data set 1 whilst examples of this type of repair were noted in data set 2. Another notable feature of Keith’s talk was a qualitative difference in his use of self-initiated repair formats. In data set 1 Keith uses re-doing

\footnote{For transcription symbols please see appendix 2}
or replacing as a reparative method whereas in Data set 2 we see Keith projecting
more to come within an utterance and then abandoning it altogether and starting again.
In order to test the hypothesis that there will be differences between the two
conversations over time, a thorough analysis of the differences in the types of repair
patterns used by Keith and Annie was made.
Analysis

Comparison of the two data sets revealed that the conversation at eighteen months post onset differed from the earlier conversation. One way in which these differences were shown was in the patterns of repair between Keith and Annie. There are marked differences between the two data sets with respect to patterns self-initiated other-repair (hereafter SIOR) and other-initiated repair (hereafter OI repair), namely that there are three occurrences of SIOR in the first data set and none in the second data set. Conversely, there are no examples of OI repair in the first data set compared to 3 examples of OI repair in the second data set. There is also a qualitative difference in the way Keith makes use of a certain type of self-initiated repair, namely abandoning troubled TCUs. These findings were anticipated as anticipated as change in Keith’s turn-constructional methods were to be expected during the period of spontaneous recovery (Wilkinson, Gower, Beeke & Maxim, in press; Gower, 2004).

Analysis of conversation at 4.5 months post-CVA

This section will first discuss three extracts from data set 1, which illustrate examples of SIOR. These extracts demonstrate how Keith initiates repair on particular sources of trouble, namely on the appearance of word-finding difficulties and on aphasic word forms. These examples highlight a difference compared to data set 2, where Keith does not initiate repair on similar trouble sources. Instead, he deals with sources of trouble within his turn using a specific form of self-initiated repair.

Other studies (e.g. Laakso, 1997; Laakso & Klippi, 1999) have noted that word-finding difficulties are almost universally a particular source of trouble experienced by individuals with aphasia, and consequently lead to reparative sequences in the
form of word-searches. Word-searches are characterized by pauses, non-lexical speech perturbations, repetitions or sound stretches, or can be made explicit through metalinguistic comments (Schegloff, 1979). In both aphasic and non-aphasic conversation, word searches are visible events that often initiate a sequence of collaborative repair between co-participants. These conversational event are usually referred to as self-initiated other repair in non-aphasic literature on conversation analysis (Schegloff, Jefferson & Sacks, 1977). This phenomena has been traditionally referred in aphasic literature as the ‘hint and guess’ sequence (Lubinski, Duchan and Weitzner-Lin, 1980; Laakso & Klippi, 1999). An example of a ‘hint and guess’ sequence initiated by Keith is shown in example 1, where he is talking about a recent bout of ill health:

Example 1:

<table>
<thead>
<tr>
<th>01</th>
<th>A</th>
<th>ye see ye don’t know whether you, you, (.) got</th>
</tr>
</thead>
<tbody>
<tr>
<td>02</td>
<td></td>
<td>a (.) bug or something.</td>
</tr>
<tr>
<td>03</td>
<td>K</td>
<td>w- i dunno what it was.=i was terrible though.</td>
</tr>
<tr>
<td>➔ 04</td>
<td></td>
<td>(1.1) all that time until, (1.0) until i went: to,</td>
</tr>
<tr>
<td>➔ 05</td>
<td></td>
<td>about, (0.8) n i went to er: about two o’clock. no,</td>
</tr>
<tr>
<td>➔ 06</td>
<td>A</td>
<td>&gt;that was about&lt; (0.8) half past three when you</td>
</tr>
<tr>
<td></td>
<td></td>
<td>went to sleep.</td>
</tr>
<tr>
<td>➔ 08</td>
<td>K</td>
<td>Yeah:[but, er,]</td>
</tr>
<tr>
<td>➔ 09</td>
<td>A</td>
<td>[then ] you slept solidly after[wards]</td>
</tr>
<tr>
<td>10</td>
<td>K</td>
<td>[thats ] right</td>
</tr>
</tbody>
</table>
Keith initiates a word search in line 04, initially characterized by a pause longer than one second. It has been suggested that there is an interactional ‘metric’ of approximately a one second pause, for which there is a ‘standard maximum tolerance’ (Jefferson, 1989). Therefore this pause could be considered to be a lengthy pause that signifies the initiation of a word-search by Keith, although it is only slightly longer than one second in duration. This initial pause is followed by subsequent pauses and the non-lexical speech perturbation ‘er’ in line 05 and the recycling of part of his utterance (Schegloff, 1987). These word search behaviours are followed by an explicit metalinguistic comment by Keith on his attempts at finding the target word in line 05 (‘no.’) The falling intonation indicates the end of the TCU and of his turn. Annie then provides a resolution to the search (line 06 ‘half past three’).

The repair here is an example of SIOR. Annie is showing an awareness of the preference for self-initiated repair (Schegloff, Jefferson & Sacks, 1977) by not showing any lexical signs of trying to enter Keith’s turn space until invited by the metalinguistic comment ‘no’ by Keith. Keith has provided a hint for the target word, and Annie is able to guess correctly in the next turn. Therefore this word search was treated collaboratively and resolved within the next turn, which differs from suggestions in the literature that the resolution of word finding problems in aphasic conversation is commonly extended over several speaking turns (Lesser & Milroy, 1993; Laakso & Klippi, 1999).

A second example of SIOR in data set 1 occurs when Keith produces an aphasic word form that is typical feature of fluent aphasia; a paraphasia:
Example 2:

01 A well [‘that’s good’]

02 K [i felt ] better already, an then i
got round, an i got round, and, (.) had a new,

04 → (0.9) I come [‘an had a’ ]/ΣA:ϕ/,

04 → 05 A [I think?– ]

06 → 05 A a new /ΣA:ϕ/, was this word?

07 K a shower.

08 → 08 K shower? an I got all that, i had all that, an got all

09 there an >put it there an i felt< pretty good.

This is another example of SIOR. Again, in this example, we see Keith producing a
metalinguistic comment after a trouble source, which is a direct appeal to Annie for
help to resolve the repair initiated by him (Line 09 ‘was this word?’). Interestingly,
Annie comes into Keith’s turn space at line 04, before the production of the
paraphasia. This could be in response to the pause of almost one second attributable to
Keith that precedes Annie’s overlap in line 04, or could be due to the reduced amount
of content in Keith’s turn. However, Annie again acknowledges the preference for
self-repair as she abruptly ends her turn in line 05 whilst Keith attempts to produce
the target word in lines 04 and 06.

In the two examples previously mentioned, Annie offers a candidate resolution not
with rising intonation in the form of a guess, but with falling intonation. The falling
intonation employed by Annie does not allow Keith to accept or reject the resolution
offered by her. It could be suggested that this inhibits Keith from performing the
preferential action of self-repair. In both examples, Keith responds to the resolution proffered by Annie with a contradiction (Example 1, line 08; Example 2, line 08). Annie comes into Keith’s turn space in line 09 (Example 1), possibly because she thinks he has finished his turn with an acceptance of her resolution to the impairment (Line 08, ‘yeah, but er,’). However, this entry into his turn space brings about the end to the reparative sequence. It could be suggested that, without this overlap by Annie, the repair sequence may have been lengthy and over many turns, which has been argued commonly occurs within aphasic conversation (Lesser & Milroy, 1993; Laakso & Klippi, 1999).

Oelschlaeger and Damico (2000) suggest that words offered by a co-participant in a declarative rather than a question format serves to complete the turn of the aphasic speaker and as such, assumes speakership. This is because, unlike the rising intonation of a guess, the declarative does not select the next speaker. In example 1 we see that this is indeed the case; Annie offered a resolution to the word search with a falling intonation, and then carried on with a subsequent turn that overlapped with Keith’s prior turn. However, in example 2, Annie again offers a word in a declarative format, but does not continue speaking.

The next extract is another example of SIOR, which is a lengthy ‘hint and guess’ sequence:

Example 3:

01 K (6 syllables). there’s two little

⁄ 02 /kAːʔ/ what’s it called? (1.5) where you put all
the things there.

(1.0) where in the, (1.3)

> in in< the things you bought yesterday

(1.0) oh that ball thing.

i don’t know i [thought you’d-

[ its GONE AGAIN! ]

no i thought you told me, (.) me you gave me

some erm (/) Ωθκσυ, >what is it you put in

there?<

(1.6) what on that f- food thing.

no here! that you grew (.). you mean some one here

an some on here.

oh I don’t know what- (.). what (.).

I have n’t got

[ we ] yesterday.

the sweet peas, (.). ya mean.

[ yeah! ]

[ yeah! ] (.). where are they going.

In this example, Keith again makes an explicit metalinguistic comment regarding his production of an aphasic word form (line 02, ‘what’s it called?’). This word form may be an example of a neologism, but it is difficult to make this assumption in the absence of contextual information. In all three examples mentioned so far, Keith has shown awareness of his errors and word-finding problem by commenting on the
trouble-source or by directly appealing to Annie to provide resolution to the repair he has initiated. This concurs with the findings of Laakso (1997) that speakers with fluent aphasia are not as deficient in self-monitoring skills as previously thought.

After Keith has produced the error and metalinguistically commented on it, there is a pause of 1.5 seconds. This pause has been attributed to Keith, but it may be more appropriately placed on a separate line. The pause could signify an initiation of a word search, as discussed previously in relation to the standard maximum silence of once second (Jefferson, 1989). Alternatively, this pause could provide a TRP for Annie to commence her turn and respond to Keith’s self-initiation of repair (Nofsinger, 1991).

Annie’s first response to Keith’s hint is to begin to ask a clarifying question (Line 04). This strategy, combined with the many pauses within Annie’s turns, suggest that she is unsure of the target but is recognising that Keith requires collaborative input into the repair sequence. That Annie does not explicitly draw attention to her inability to understand the hints provided by Keith could be evidence for her displaying awareness of repair as a potential threat to face (Couper-Kuhlen, 1992). Annie mirrors Keith’s use of the general meaning noun ‘thing’ (Lines 06, 12) which again could be a strategy employed by Annie to show equality in the repair sequence and to prevent Keith losing face.

Keith produces another aphasic word form, a neologism, in line 10. He shows recognition of his error in the subsequent TCU by asking Annie for clarification (‘what is it you put in there?’). Interestingly, Annie does not respond to Keith’s
production of a neologism with an attempt at the target word. Keith rejects Annie’s attempts at guesses to resolve the word search, which prompts Annie to continue to participate in his search with an alternative guess strategy (Oeschaeger & Damico, 2000). It could be suggested that Annie is attempting to terminate the word search before it is resolved in line 15 (‘oh I don’t know what-’) with an utterance designed to reveal her inability to understand Keith’s hints. A closing strategy is often used when several guesses have been rejected, and can be a method of moving the conversation forward (Oeschaeger & Damico, 2000). However, Keith’s next turn shows that he rejects her attempt to close the repair sequence by coming into her turn space and offering a further hint. This last hint is followed by a guess in the next turn, in the form of a question rather than a declarative, which is accepted by Keith (line 18).

These examples have shown that at this stage of recovery, there is a strong pattern of Keith self-initiating repair on his errors through the use of metalinguistic comments, which invite Annie to collaborate in, and ultimately resolve the repair sequence. Whilst there are three clear examples of this pattern of SIOR, there are no examples of OI repair. There are examples in data set 1 where Keith has produced an error and neither he nor Annie initiate repair. For example:

Example 4:

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>K</td>
<td>=it does. (little that,) (. ) but it’s a bit /≈Σ≡/ its a bit</td>
</tr>
<tr>
<td>02</td>
<td>/≈Σ≡/ very /ΣA⟩d/. ( . ) for us. =</td>
<td></td>
</tr>
<tr>
<td>03</td>
<td>A</td>
<td>“yeah.°</td>
</tr>
<tr>
<td>04</td>
<td></td>
<td>(1.0)</td>
</tr>
</tbody>
</table>
Keith produces a paraphasia in Line 02. Whilst it is not unusual for speakers with fluent aphasia to not initiate repair on trouble sources, indeed, it has been suggested that fluent aphasic speakers only initiate repair on about one third of their aphasic word forms (Laakso, 1997), it is noticeable that Annie does not initiate repair on this or any other error or trouble source in data set 1. Perkins (2003) argues that, where there are an above average number of trouble sources due to the presence of aphasia, one option for the co-participant is to allow them to pass in order to avoid potentially face-threatening repair work. However, the absence of collaborative work on his contributions can limit the ability of the aphasic speaker to contribute to the conversation.

By comparing the SIOR sequences from data set 1 with the repair sequences in data set 2, it is possible to see that there is a stark difference in the patterns of repair across the two data sets. In data set 2, there are three clear examples of OI repair from Annie, whilst there are no examples of SIOR. However, there are three examples of Keith abandoning an utterance that had initially projected more to come, when he encounters a word-finding difficulty. This abandoning of an utterance that contains a trouble source is a form of self-initiated, same-turn repair (Schegloff, 1979, which is the most common form of repair in non-aphasic conversation.

**Analysis of conversation at 18 months post-CVA**

In this section three examples of OI repair from data set 2 will be discussed and compared with the patterns of repair noted in data set 1. As discussed in the introduction, self-repair predominates over other-repair. Other-repair overwhelmingly produces self-corrections in non-aphasic conversation (Schegloff, Jefferson & Sacks,
In the three examples of OI repair, we see that this type of repair pattern can lead to lengthy and complex repair sequences, which do not always yield self-repair from Keith.

As was discussed in the analysis of data set 1, co-participants in aphasic conversations have the option to not initiate repair work, to not address misunderstandings or failures of understandings (Perkins, 2003). It was argued that this was a strategy that Annie was employing in data set 1, as there were no examples of OI repair. In example 5, we see Annie initiating repair on a failure of understanding:

Example 5:

```
01 K b BACK to ordinary. ordinary things  new topic
02 th er er as:: we are, (. ) er going
03 i er: i erm, (2.2) its ju that, (. )
04 there's nothing, (1.0)s um i think
05 im having too too too much.
06 (1.8)
07 A too much what.
08 K e in his er::, (. ) i think he's e oh
09 START again. (1.0) he came along there
10 an se h how's you erm, (. ) er are you
11 [going (1.6) BETTER. ]
12 [((holds hand out flat))]  
13 A who is this talking.
14 (1.4)
15 K his. ye- this morning!
16 A y'mean, (. )edith. the nurse.
```


The extract begins with Keith beginning a new topic in the topic-shift position (Schegloff, 1979). These classes of sentences often have self-repair in them. We see in this extract that Keith’s initial turn is comprised of word-finding behaviours (lines 2, 3), characterised by pauses, non-lexical forms (e.g. ‘er’, ‘erm’) and stretches of the pronunciation of sounds (e.g. ‘as:::’). As suggested by Schegloff (1979), Keith’s first sentence in this topic-shift position does contain a form of self-repair, namely the abandoning of utterances. This will be discussed in greater detail later in this section.

Whilst the first sentence in a topic-shift position often contains self-initiated repair, the next-turn commonly involves the initiation of repair by another speaker (Schegloff, 1979). After a long pause of 1.8 seconds, Annie initiates repair by asking a question (line 07, ‘too much what’). This initiation of repair by Annie is in stark contrast to the repair patterns described in the analysis of data set 1. The other-initiated repair is followed by an attempt by Keith to respond to the initiation of repair by clarifying his meaning, which leads to him making metalinguistic comment on his word-finding behaviours (line 09, ‘start again’). Keith’s uses this method of using expressions that make the word search explicit in both data sets. In this example, this metalinguistic phrase is also a form of self-initiated repair.

Following Keith’s second attempt at making his meaning clear to Annie, she responds in Line 13 by initiating repair rather than offering a guess. This is interesting in comparison with repair sequences in data set 1, where we saw Annie responding to Keith’s hint with a word search strategy, such as a guess, alternative guess, completion or closing strategy (Oeschlaeger & Damico, 2000).
If we compare example 5 with the next example, we see that sentences in the topic-shift position continue to yield trouble-sources and opportunities for self and other repair:

Example 6:

```
01 K    thats fair enough that perfectly
02     good. (1.0) ri::ght. (1.6) OH! in new topic
03     the in the::. er, (.) yesterday.
04     when we went to the lun the er, (.) th
05     the other day, (2.0) an we went to the
06     to the er, (2.7) the various th erm,
    ➤ 07 A   >wh well erm< are we talking about
    ➤ 08     welsh (2 syllables)?(.) or meeting? or
    ➤ 09     (2 syllables).
    ➤ 10 K    YES! today
    ➤ 11 A    today.=
    ➤ 12 K    = we went in there,
    ➤ 13 A    yes.
    ➤ 14 K    an you said [OH LOOK! ](1.0) she’ve
    ➤ 15     (((pointing)))
    ➤ 16     b she’s erm, (.) they’ve got erm,
    ➤ 17     he’s on- he’s, (.) wh wh wh grown up
    ➤ 18     there now that= 
    ➤ 19 A   = those beans?
    ➤ 20      (1.0)
    ➤ 21 A   no. ["what"] are you [talking] about.°
    ➤ 22 K     [no! ]   [today. ]
    ➤ 23     we went along there. ↓/ppp:::::/ went
    ➤ 24     into the, (.) to the nur::se,
```
This example of an OI repair sequence is longer and more complex than example 5. This could be because, whereas in example 5 Annie does not attempt a guess at the target in order to resolve the repair, in example 6 Annie’s initial repair initiation is immediately followed by a guess, a pause and alternative guess (Lines 7, 8). Repair is organised to prefer quick resolution in order to minimise disruption to the current interactional business. As aphasic trouble sources are often not resolved quickly, the participants in aphasic conversation must collaborate to complete repair as quickly as possible whilst taking the linguistic abilities of the aphasic speaker into account (Perkins, 2003). It could be tentatively suggested that the example of collaborative repair seen in example 5 was negotiated more successfully, via the use of clarification questions, to achieve a quicker resolution compared to example 6.

There is a second instance of other-initiated repair in lines 19 and 21. In line 19 Annie offers a guess with rising intonation, which invites Keith to speak in the next turn in order to accept or reject it. The TRP is marked by a pause on line 20, which is followed by Annie taking the next turn to initiate repair. Keith continues to offer hints
which leads to alternative guesses by Annie, until a guess is expected as the target (line 31). Therefore, in this example, Annie is using a combination of collaborative word search strategies, such as guess and alternative guess, and initiating repair in order to deal with Keith’s word-finding difficulties. However, Keith is not a passive participant in this repair sequence. Again, we see Keith employing a form of self-initiated repair within the first sentence in the topic-shift position, namely the explicit abandoning of utterances that include a trouble-source.

The final example of OI repair occurs within the previous example:

Example 7:

01  A    yes,
02  K    an while we’re coming back we said
03          look at look at that er, (.).in there t
04          erm place.before, (.). er being,(.)
05          (claringed).
06  A    cl cleaned?
07  K    exactly!=

This extract shows the only example of other-initiated, other-repair to occur in either data set. Annie initiates repair on the paraphasia produced by Keith by offering a guess to the target form, which Keith accepts in the next turn (line 06). Whilst it is difficult to draw conclusions from only one example, it is interesting to note that Annie does not initiate repair on any of the paraphasia or neologisms produced by Keith in data set 1. Indeed, there were quantitatively more aphasic word forms produced in data set 1 compared to data set 2, which could have been expected to yield a greater frequency of other-initiated repair (Please refer to Appendices 3-4 for
the full transcripts of both data sets). Other-initiated repair is dispreferred in next turn, as there is a preference for keeping the next turn free. One method for adhering to this preference of conversation is by the self-initiation of repair by the speaker of the trouble-source in the current turn (Schegloff, 1979). Keith’s instances of self-initiated same-turn repair will now be discussed in relation to examples from data set 1.

As mentioned in the discussion of examples 5 and 6, Keith employs a specific form of self-initiated same-turn repair when word-finding difficulties occur. This form of self-initiated repair will be referred to as abandoning in this present study. Abandoning involves the abandonment of the first, and possibly subsequent, word search and the initiation of an alternative TCU by the speaker of the trouble-source. Abandonings are often ordered as a series of abandoned word searches and the re-starting of new utterances. The following examples have been taken from data set 2 to show how this pattern exists within Keith and Annie’s repair sequences. There are no examples of abandoning of utterances and re-starting of new ones in data set 1. The first example is a clear illustration of this phenomena:

Example 8:

```
01  K b BACK to ordinary. ordinary things new topic
02 th er er as:: we are, (. ) er going
03 ➔ i er: i erm, (2.2) its ju that, ( .)
04 ➔ there's nothing, (1.0)s um i think
05 im having too too too much.
```

As was mentioned in an earlier discussion of this example, Keith’s first sentences at the topic-shift position indicate word-finding difficulties, as is evident from the
pauses, non-lexical forms (e.g. 'er', 'erm') and stretches of the pronunciation of sounds (e.g. 'as:::'). Keith demonstrates an awareness of his word-finding difficulties via the abandoning of the TCU at line 03. After a long pause of 2.2 seconds, Keith starts again with a completely different utterance. This new utterance does not contain any of the same vocabulary as the previous utterance and is semantically different ('its ju that'). Keith then abandons this second word search in line 04 and repeats the same patter, namely starting a completely new sentence after abandoning the previous sentence and then pausing.

Another clear example of abandoning occurs in the next example:

Example 9:

```
01 K = well >we can well we can< well SEE
02 what he comes up. (1.0) an h he got
```

Turn beginnings are an important initial resource for the projection of the turn-shape or turn-type (Schegloff, 1987). We can see in this example that Keith is projecting the shape of the initial turn from his turn-beginning. He then recycles the turn-beginning, before abandoning the utterance completely and starting again. Whilst the recycling of turn-beginnings is not uncommon in non-aphasic conversation (Schegloff, 1987) there is sparse literature on the abandoning of turn-beginnings in the field of aphasia or, it would appear, the field of CA and non-aphasic conversations.
The final example from data set 2 lends support to the robustness of this pattern of self-initiated same-turn repair occurring as a turn constructional method employed by Keith:

Example 10:

```
  01  K          [ well. thats ]
→  02  how erm, as soon as he says, (. ) lets
  03  see, (. ) what you want
```

Turn-beginnings are vulnerable to impairment by overlap, and are often the site of identical repeats to deal with the overlap before carrying on with the projection turn-shape or turn-type (Schegloff, 1987). However, whilst this example does indeed contain an overlap at the beginning of Keith's turn, he opts to abandon the TCU rather than repeat it a carry on with the projected turn. We can see in line 02 that he was projecting more to come within the turn but then abandons it after 'erm'. Therefore, it could be suggested that the overlap initiated a trouble-source, which Keith repaired by abandoning and starting again. In both the example 9 and example 10, Keith was able to re-organise his turn within the same turn, which avoids a SIOR or OI repair sequence over multiple turns. He is able to maintain the interactional business of his turn.

These examples of abandoning by Keith have shown there is a pattern of self-initiated, same-turn repair employed by him in data set 2. In addition, the examples of OI repair contrast with the absence of OI repair in data set 1.
Summary and Discussion

This project, as part of a wider ESRC-funded study entitled ‘Long Term Adaptation to Conversation by People with Aphasia and their Partners’ (ESRC R000239306), has used conversational data collected from one of the couples participating in the wider project study (Keith and Annie) to investigate how patterns of repair within their conversations change over time.

Annie was trained to use a video recorder in order to capture representative examples of their normal interactions in their own home whilst on their own at regular intervals post-CVA suffered by Keith, at 3.5 months, 4.5 months, 6 months, 12 months and 18 months. It was intended to undertake 7 data collections but sadly Keith died after the data collection at 18 months. Data sets collected at 4.5 months and 18 months were analysed for this present study.

Formal language testing revealed a general improvement in Keith’s linguistic abilities, although his performance on the spoken picture-naming test was better at 4.5 months. Following on from the hypothesis in current research which suggests that the duration of spontaneous recovery extends beyond the 6-month period post-onset as previously suggested, it was initially hypothesised that conversation analysis would reveal differences in conversational phenomena as the time post-onset of aphasia increases. In particular, this present study focused on patterns of repair in Keith and Annie’s conversation. The first repair pattern under investigation was self-initiated, other-repair and other-initiated repair. The second pattern concerned a form of self-
initiated repair in which utterances containing a trouble-source are abandoned and completely restarted.

**Changing repair patterns over time**

A detailed analysis of data sets 1 and 2 have shown that there are differences in the repair patterns across the two data sets. The first finding was the presence of self-initiated, other-repair in data set 1, compared to the absence of this type of repair pattern in data set 2. Conversely, examples of other-initiated repair were noted and analysed in data set 2, but no examples of this type of repair were found in data set 1. Another difference between the two data sets exists in the absence of a specific form of self-initiated, same-turn repair in data set 1 compared to clear examples of this type of repair found in data set 2. This type of repair was referred to as abandoning by this present study. This finding is interesting as, not only does it strengthen support for the argument of changing repair patterns over time, there is scant mention of this type of repair in both aphasic and non-aphasic literature.

The hypothesis that the repair patterns would change over time was anticipated as an emerging body of research suggests that components of language function can continue to recover after the period of spontaneous recovery has ended, although there have been very few systematic studies of long-term recovery of language function in aphasia, (Bruce, Howard and Gatehouse, 2000). The results of this study can, in a small way, contribute to the argument that changes and adaptation to conversation can continue in chronic aphasia (Penn, 1987).
Another qualitative finding, which was similar across both data sets, was that the presence of self-initiated, self-repair in data set 1, and of self-initiated, same-turn repair in data set 2, supports the argument proposed by Laasko (1997) that fluent aphasic speakers are self-monitoring their errors to a greater extent than was originally thought.

The examples of self-initiated, same-turn repair show a quick resolution of a trouble-source. This type of repair also contributes to the forward progression of talk, which is preferable to repair sequences taking over as the interactional business (Schegloff, Jefferson & Sacks, 1977). That this form of repair occurs in data set 2 and is, by comparison, absent in data set 1, could tentatively suggest that Keith has developed a strategy for dealing with aspects of his aphasia, for example his word-finding difficulties. This repair strategy allows him to continue with his turn, albeit with a completely different TCU to the turn-beginning.

**Therapeutic Implications**

One important implication of this present study is the support it lends to the benefits of using CA methodology in order to detect change over time. Furthermore, the successful method of capturing naturally occurring conversations between aphasic couples, in the absence of researchers, has implications for functional assessment outside the clinic. Whilst it may not be practical to lend video-recorders to clients, if clients with aphasia already have access to such equipment, this form of assessment in a different, naturalistic setting will positively impact on an individualised and well-informed intervention programme.
Whilst the results of the formal language tests did not show a marked improvement; indeed, results of the spoken-picture naming test revealed a negative change, the results of the conversation analysis indicated a rather more dramatic and positive change in Keith’s conversational abilities. CA’s ability to highlight issues and competences that were not identified by formal language testing means a greater number of important issues can be tackled in intervention (Lesser & Perkins, 1999).

**Limitations and areas for further research**

One limitation of this present study is that it is a single case study, and therefore cannot be readily generalised to the wider population. However, it supports the previous work by Gower (2004) and Wilkinson, Gower, Beeke & Maxim (in press). Both these studies apply conversation analysis to case studies, and found change in turn-constructional methods over time. However, future research may wish to apply CA methodology to more conversational dyads, and to conversations between individuals with aphasia and different people (e.g. therapist, friends, work colleagues etc.).

Another limitation is the absence of analysis of non-verbal behaviours, such as gesture, from this present study. Including such behaviours would have proven to be advantageous in analysis of collaborative repair, as gaze and gesture are often used by speakers to negotiate repair in conversation. Further research could include these behaviours when comparing repair patterns over time.

**Word count: 8966**
Acknowledgements

I would like to extend my thanks and gratitude to Dr Ray Wilkinson for his supervision and guidance for this project and for showing patience in the face of ever-changing plans! I would also like to thank Suzanne Beeke for providing feedback on one of my transcriptions in Dr Wilkinson's absence. Thanks also go to the researchers from the wider ERSC project for collecting the data included in this project, and to Keith and Annie, for allowing their conversations to be used for analysis.

Thank you to my family for supporting me through the completion of this study, and to my Father for printing and binding my project. Above all, heartfelt thanks, gratitude and apologies to David Colebrook, for weathering the storm and keeping the fear out of his eyes.
References


Appendix 1
**Summary of results from formal language assessments**

**Western Aphasia Battery**
Conducted 3 months post-CVA. Classification = Wernicke’s

<table>
<thead>
<tr>
<th>Subtest</th>
<th>Score</th>
<th>Aphasia Quotient</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spontaneous speech:</td>
<td></td>
<td>16</td>
</tr>
<tr>
<td>Information content</td>
<td>8/10</td>
<td></td>
</tr>
<tr>
<td>Fluency</td>
<td>8/10</td>
<td></td>
</tr>
<tr>
<td><strong>Comprehension:</strong></td>
<td></td>
<td>6.1</td>
</tr>
<tr>
<td>Yes/no questions</td>
<td>54/60</td>
<td></td>
</tr>
<tr>
<td>Auditory word recognition</td>
<td>43/60</td>
<td></td>
</tr>
<tr>
<td>Sequential commands</td>
<td>25/80</td>
<td></td>
</tr>
<tr>
<td><strong>Repetition:</strong></td>
<td>52/100</td>
<td>5.2</td>
</tr>
<tr>
<td><strong>Naming:</strong></td>
<td></td>
<td>3.6</td>
</tr>
<tr>
<td>Object naming</td>
<td>27/60</td>
<td></td>
</tr>
<tr>
<td>Word fluency</td>
<td>0/20</td>
<td></td>
</tr>
<tr>
<td>Sentence completion</td>
<td>5/10</td>
<td></td>
</tr>
<tr>
<td>Responsive speech</td>
<td>4/10</td>
<td></td>
</tr>
<tr>
<td><strong>Total:</strong></td>
<td></td>
<td><strong>61.8</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Subtests</th>
<th>4.5 Months post-CVA</th>
<th>18 Months post-CVA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pyramids and Palm Trees</td>
<td>20/26</td>
<td>21/26</td>
</tr>
<tr>
<td>PALPA 47 spoken word-pie matching</td>
<td>11/20</td>
<td>15/20</td>
</tr>
<tr>
<td>PALPA 53 spoken picture naming</td>
<td>15/20</td>
<td>12/20</td>
</tr>
</tbody>
</table>
Transcription Symbols

The following symbols can either be found on the keyboard, or accessed as follows:-
choose insert menu: choose symbol to access ‘symbol’ window. To access an IPA
font enter insert menu, choose symbol to access the window, and then click on font
arrow to select the IPA font of your choice.

[ ] a large left-hand bracket links an ongoing utterance with an overlapping
utterance or non-verbal action at the point where the overlap/simultaneous
non-verbal action begins.

] a large right-hand bracket marks where overlapping utterances/simultaneous
non-verbal actions stop overlapping.

eg. 01 PR how have you been since I last saw [you]
02 AM [not] so [good]
    [((AM shakes head))]

= an equals sign marks where there is no interval between adjacent utterances

eg. 01 DG did he really say that?=
02 FB =yes

(.) a full stop in single brackets indicates an interval of tenth of a second or less in
the stream of talk

oh: a colon indicates an extension of the sound or syllable it follows (more colons
prolong the stretch)

. a full stop indicates a stopping fall in tone, not necessarily the end of a
sentence

, a comma indicates a continuing intonation

? a question mark indicates a rising inflection, not necessarily a question

! an exclamation mark indicates an animated tone, not necessarily an
exclamation

but- a single dash indicates a halting, abrupt cut off to a word or part of a word

↑↓ marked rising and falling shifts in intonation are indicated by upward and
downward pointing arrows immediately prior to the rise or fall

stress underlining indicates emphasis

°no° degree signs indicate a passage of talk which is quieter than surrounding talk

TALK capital letters indicate talk delivered at a louder volume than surrounding talk
h, heh indicates discernable aspiration or laughter (the more hs the longer the hah aspiration/laughter)

fu(h)n an h in single brackets marks discernable aspiration or laughter within a word in an utterance

°h discernable inhalation (the more hs the longer the inhalation)

>talk< lesser than/greater than signs indicate sections of an utterance delivered at a greater speed than the surrounding talk

[yes text in double brackets represents a gloss or description of some non-verbal \((\text{mods})\) aspect of the talk, and is linked to the relevant section of talk with large brackets (see above)

(1 syllable)
(dog) single brackets containing either a word, phrase, or syllable count (if utterance is very unclear) mark where target item(s) is/are in doubt

/\O\overset{\text{D}}{\text{O}}\text{/ transcribe paraphasias and jargon between slashes, using an IPA font. Check with your supervisor about which vowel transcription system to use.

------ a broken underline in bold indicates speaker’s gaze is directed at listener (place on separate line directly below relevant talk). Only note eye gaze if (a) it seems particularly relevant/important to the interaction, or (b) you are particularly interested in analysing it.

\begin{tabular}{ll}
\text{e.g.} & 01 IB did you hear about John? \\
& 02 JM no (.) what? \\
\end{tabular}

\rightarrow an arrow in column 2 alerts the reader as to which line contains the issue discussed in the analysis
Appendix 3
Clare Lawson

Keith and Annie conversation 1
transcript version [no. 4]

Subject with aphasia in conversation with Annie at home

sample date May 2003

transcribed sample length 10 Minutes 40 Second

counter times: start 00:08:37 stop 00:19:17

All initials, names and places are pseudonyms

column 1 2 3 4 5 6

<table>
<thead>
<tr>
<th>line no.</th>
<th>speaker</th>
<th>talk</th>
<th>notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>hh:mm:ss</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>00:08:37</td>
<td>K</td>
<td>but today (1.0) what we /ΩɛɪμIN/ up today, now.</td>
<td></td>
</tr>
<tr>
<td>002</td>
<td>A</td>
<td>w-w- (1.0) we’re just- (.) aiming now for dinner- (0.2) tonight</td>
<td></td>
</tr>
<tr>
<td>004</td>
<td>K</td>
<td>[ yeah ] but how we gonna eat it</td>
<td></td>
</tr>
<tr>
<td>005</td>
<td>A</td>
<td>we eat the way we always do in th-that-</td>
<td></td>
</tr>
<tr>
<td>006</td>
<td>K</td>
<td>[ dining &quot;room&quot; ]</td>
<td></td>
</tr>
<tr>
<td>008</td>
<td>K</td>
<td>[ yeah but what we HAVING? ]</td>
<td></td>
</tr>
<tr>
<td>009</td>
<td>A</td>
<td>ye having, (.) devilled mushrooms, (.) to start</td>
<td></td>
</tr>
<tr>
<td>010</td>
<td>A</td>
<td>(0.2) then roast beef and yorkshire puddings (.) and (.) er (.) s-&gt;purple sprouting brocoli&lt;&lt;, and</td>
<td></td>
</tr>
<tr>
<td>011</td>
<td>A</td>
<td>(.) erm (1.0) &gt;new potatoes&lt;, (1.0) and then</td>
<td></td>
</tr>
<tr>
<td>012</td>
<td>A</td>
<td>strawberries and icecream if you want that</td>
<td></td>
</tr>
<tr>
<td>013</td>
<td>A</td>
<td>after wards</td>
<td></td>
</tr>
<tr>
<td>014</td>
<td>K</td>
<td>[ very good ]</td>
<td></td>
</tr>
<tr>
<td>015</td>
<td>K</td>
<td>very good, [ I’m going to look forward to ] those</td>
<td></td>
</tr>
<tr>
<td>016</td>
<td>A</td>
<td>[ So that should be erm ]</td>
<td></td>
</tr>
<tr>
<td>017</td>
<td>A</td>
<td>(.)</td>
<td></td>
</tr>
<tr>
<td>018</td>
<td>K</td>
<td>a nice: -</td>
<td></td>
</tr>
<tr>
<td>019</td>
<td>K</td>
<td>very ↓good.</td>
<td></td>
</tr>
<tr>
<td>020</td>
<td>A</td>
<td>(.) sounds like a coo(h)kery pro(h)gr- hh</td>
<td></td>
</tr>
<tr>
<td>021</td>
<td>A</td>
<td>ye(h)know &gt;whaddya call it &lt; ma(h)</td>
<td></td>
</tr>
<tr>
<td>022</td>
<td>K</td>
<td>↓yeah</td>
<td></td>
</tr>
<tr>
<td>023</td>
<td>A</td>
<td>MAcsterchef</td>
<td></td>
</tr>
<tr>
<td>024</td>
<td>A</td>
<td>that’s what we [ wanted ] for our, for our,</td>
<td></td>
</tr>
<tr>
<td>025</td>
<td>K</td>
<td>[ ‘h yeah ]</td>
<td></td>
</tr>
<tr>
<td>026</td>
<td>A</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

New Topic
 absolutely (bidding) > which was in <
[ that room: ] today: . =
[ (points) ]
A = yes =
K = it is because it is ( . ) it is there > that you
go< n everything was perfect [ today ]
A [ yes ]
K n that's what matters
what [ matter ] = [ er ] = er
A yes [ yes ]
K (5 syllables) i- i- i don't know whether ( . ) ever
wished any more / τωξηθ / =er= / τΣ/ / τΣ/ (1.0)
mining to mine ( . ) getting all sorts of things its
seems all on ( . ) let's forget about it
A well that's it. i think its all you can do.
A [ you know ]
K [ (4 syllables) ] [ / jed/ or it needs ↑ cold ]
A [ (waves hands side to side ) ]

00:09:48
( . )
A [ that's "right" . ]
K [ that's the truth, ] bit of this n, (0.9) bit of
( odd )
A w- w- well we often have
[ things hot and ] cold. ( . ) erm, s
K [ well i just i just did. ]
K ( . )
K that why i like it
(2.1)
A ye see ye don't know whether you, you, ( . ) got
a ( . ) bug or something.
K w- i dunno what it was. = i was terrible though.
(1.1) all that time until, (1.0) until i went to, about, (0.8) n i went to er: about two o'clock. no,
A > that was about < (0.8) half past three when you
went to sleep.
K Yeah: [ but, er, ]
A [ then ] you slept solidly after wards
K [ that's ] right
i felt different then. = i suddenly felt much, much
better. And then a moment > / Ω ≡ δ Z / it was<
A right. ( . ) and then ye gave me something to
eat. (1.3) very quick [ click ] ( . ) very sim. ( . )
A [ yeah ]
K and i s s i: densely the whole of all my
(2 syllables). OH it was beautiful. ( . ) an an ( . )
an there's two little plants. > an it is < little tiny
K [ things ] their wall.
A [ yeah but s- ]
A yes
an they were tightened in an it was perfect. i think oh yes.
well ['that's good']
i felt better already. an then i got round, an i got round, and, (.) had a new,
(0.9) i come ['an had a'] /ΣA:φ/,
I think?-]

00.10.48

K a new /ΣA:φ/, was this word?
A a shower.
K shower? an i got all that, i had all that, an got all
there an >put it there an i felt< pretty good.
A yeah (0.6) but i think staying in bed is,
("Two syllables")
K but i [ ] didn’t wanna bring too much
Today, >"anyway".< BE A right today. and
/œ/ back tomorrow. i be back to normal ding
K ding ding an i hope da >da da< ↑DA::=
A ="that's it" yes. and we’ll (.) get some]
K [ (six syllables) ]
A exercises done to [morrow. ]
K [that’s right.]
A it was silly trying to do them [today. ]
K [WELL i] didn’t feel
00.11.18

K /dæ/ doing it /tæ/ /tæ/ too much (.) this is all very
A good now. very, very. good. (0.8) an another
thing i want to try, tomorrow, (0.9) is we hadn’t
K ANy, for all this time. (1.0) but i just would like
(2.0) have something (1.0) and we’ll just have,
A (0.6) you and i, (0.8) we’ll have, (.)
erm-a-reasonable er: >thing< and we’ll have,
/>wæ/-/>wæ/-it will be <out of there, there,
K er: [er [1.0] /tɜːm/ /1.0]/wæ/ is that right
K [yes er-]

00:11:48

K no. /jæ/ /jæ/ you talking about the red wine we’re
A having afterward]
K YEAH it’ll be [there. it’ll be PERfect.]
K [I’ll ] open it
in a [few minutes.]
K yeah. yeah. an then when we’ve got- got-
had that /tɜːm/ an then, (.) afterwards we can
always go on some ordinary, (.) [er- er- things.]
K [that right. ]
K /jæ/ not.
A "that’s right"
K [but it ] may be just perfect if it’s
K [right ]
A [yes. ]
K i think that’s perfect.
A: [yes.] well I'll sh- (. ) I'll go an
select a bottle and, (0.7) you'll have to tell me if
it's the right one or n't ot. ]
K: [yeah.] that's pretty pretty
good. that was what I want. o
(1.0)
K: [ch]eero, /b≤IN≡ β≤{N}≡/. bang bang bang,
A: [t- ]
K: [/g≡/] [ts- ]
yeah. o
00:12:18
K: so very good.
(2.7)
A: he's making hot water pastry.
K: he's making exactly those things yes all very
good.
A: but ya have to work SO:; quickly with hot
water pastry.=
K: =well.
(2.6)
A: I mean last time I made em, (. ) th the pork pie
like that s we lived at co- at cli(h)fton?
(1.0)
we lived there in: erm. (0.7) seventy seven didn't
we.
K: yep, [ there you go? ]
A: [ so it's a ] very long time ago
(2.0)
00:12:48
A: I remember making it at school, (2.0) /j≡ n≡/ o
mine turned out alright but some of them they
couldn't c(h)ut it.
K: /≡/ ? / t
A: it goes like lead.
K: that's very good. (1.0) perfect, look at that.
A: yeah
(0.4)
K: /n≡/ i think o the whole thing was ve- very differ-
er- difficult. (. ) to the end.
A: mmm o
(0.5)
K: it is of course, (. ) r- er-
A: he's made all the holes o=
K: yes we've got all of er /sYνl:/, (1.0) / sYνl:/, er
its /nθ? σYνl:/ I mean. the right, (0.8) thing
we've gonna watch. but then, (.) for your erm,
00:13:18
(1.0) things, when it's all ready, (.) by about six
o'clock, (0.9)
A: yes. that's right. ] [ that's right. ] we'll sit o
K: [ today. ] well [ that'd be, ] (1.0)
A: [ down ] o
K [that'd be] /m{γιλικυ, (.)/γιλικυ/. (.)/μυ.)/
173 /Ωτειλο, [\'Ω] /e/?
174 A °h
175 K /Ωλε:μ/ /Ωθειμο/.
176 A wonderful.
177 K yeah.
178 A yes.
179 K the right colour. yes ok, very good. ve:ry good.
180 (0.8) "get all this", (1.0) look at it now its, (.). its new topic
181 coming to rain. look little [(tiles)]
182 A \[starts- \]
183 K (pictorial) it[[s ] down there again.
184 A \[ah\]
185 (2.1)
186 A it’s more like April than May isn’t it th[ough 
187 K \[we::l-\]
188 A °h but this is just what I need for those sweet
189 peas.=
190 K =it does. (little that,) (.). but it’s a bit /~Σε/ its a bit
191 /~Σε/ \very /ΣA:ɪ/. (.). for us.=
192 A =°yeah.°
193 (1.0)
194 K Buts none of the other?(0.8) it’s/Ωθειμο/?σ/
195 A \[but ts-t\]
196 A \[ts-\]
197 K \[so \] said-(1.0)
198 A yeah=
199 K =cut it. (0.7) an then, p(h) [(2 syllables)]
200 A \[but ya \] see its,-
201 (.). ya know that pack’s all opened up over there new topic
202 as well. I feel, (.). er m- much more relieved now.
203 cos at- (.). the front garden, (.). will only take, (.). er
204 a morning t- (.). or an afternoon to dig, (0.7) cos
205 altho:ugh its got a lots of weeds on it, (0.9) its
206 A \[but ts-t\] very soft, (.). cos you’ve dug that
207 se\[veral\] times.
208 K \[mm \] (1.0) but that’s that’s alright now that,=
209 A °yeah°=
210 K =it wasn’t do what you want /~Σ/ what you what you
211 er: (1.0) what you er:: or read,
212 A "that t’s right° 
213 K \[that perfect,\]
214 A \[an \] but its (.). that’s perfec\[t\]
215 A \[an \] then I’ll get erm, (1.6)
216 A i’ll go out an see if the hanging basket are ready.
217 K mmm.
218 (1.0)
K (6 syllables). there's two little
/KA:/?/- what's it called? (1.5) where you put all
the things there.

A (1.0) where in the, (1.3)
K >in in< the things you bought yesterday
A (1.0) oh that ball thing.
K i don't know i thought you'd-
A [its GONE AGAIN!]
K no i thought you told me, (.) me you gave me
some erm (.) /Ωκςτέλεισθαι, >what is it you put in
there?<
A (1.6) what on that f- food thing.
K no here! that you grew, (.) you mean some one here
A an some on here.
K oh I don't know what- (.) °what° (.)
I have n't got
K we yesterday.
A the sweet peel s, (.) °ya ° mean °.
K yeah!
A ye[ s. ]

00:15:18
K [yeah!] (.) where are they going.
A well, (.) one lots by the (.) swimming pool,=
K =well how deep are they.
A (1.0) well they've bout
K [(2 syllables) they're bout that big. ]
K [well] there you are. that's pretty good,] that's
K [what ] I'm saying. that's [alright. ]
A [yeah.] [ the roots are much
bigger that the pla[ ]nt itself. ]
K [yeah ] but its about that far:s=
A =mmm,
K I was looking round there, (.) then it was all
(\equiv),
A yeah=
K =but no bodies (seem tied it).
A [you couldn't] find [it ]
K [you went- (1.0)] did-] the alan titchmarsh ones
by the (1.4) er swimming pool, (0.7) and the
(astronaut) (0.4) dat we grew last year (0.5) are
down the ef m, [ (1.3) °/s\equiv/di°]
K [mmm.] very good. ] so they ] ARE
260 growing then.
261 A they are growing but I didn't think they were at
262 K [yeah!]

00:15:48
A first.
A (2.0)
K very good.
A but those er geraniums aren't, (.) growing very
267 much at all. h don't think I'm going to buy any
more of that organic, (1.2) er, (. ) compost
because, (. ) last year we didn’t, (. ) we had a
problem, (1.0) with the beans didn’t we. er (. )
°cos we [were, -°]
K [what ] cha mean buy it.=
A =WELL d- n- ( . ) it’s not good for seeds. (. ) it
doesn’t seem to be vef ry good for [seeds.
K [OH::: no- ] (04) no. (. )
A [ya wanna get what you think you’re gonna] get, (. )
K [ye- (. ) know that CHEAP stuff that um- ]
K DO IT. > (but if you keep on going I’d don’t just)
chuck em< absolutely. (0.7) I just,- just,- (. )
A well tennants supplies them [ (as good)]
K [just ] throw
them away!=
A = yeah
K /δγəσ- δγγ/or don’t even wanna ask!=
A =yeah
K useless. (. ) no. [get them ] in properly they
A [°that’s right°]
K know what they’re doing.
K (0.8) that’s the thing to do.
K (5.7)
((K waves arm))
--------- new topic
---------
K (1.5)
A yes. sorry. I was, (. ) yes.
K no your /ετ3:/ watching things=
A = no I WAS n’t! it was jst I- ] (0.9) [no.]
K [YOU ARE! you’re ]
f(ixed) in it.=
K =NO. >er it was just< t, (0.8) ye /dθvs/ often see
K somebody making a pork pie an it just suddenly,-
K well what you watching it. turn it [off] then.
A [ ] no,] (. ) no. I- I-
K just, ( . ) thought for a second I wanted to just see
K what he did [next] so [1 ] I won’t [ (1.0) ]
K [°oh.. (. ) right] [there you go°]
A er: won’t bother anymore.
K (1.2)
A but we are supposed to be natural. not, (. ) just, (. )
K i [know. ] (. ) >but I mean, < (. ) you’re just always
A [°yeah° ]
K sittin in there.
A now come off it I don’t watch telev(h)ision
K °that much°
K (1.2) ( ( K raises eyebrows at A))
A i have today because I’ve had a ]day off. but
K [oh. I see. ]
A: i don’t, (.) usually i leave you in here with

K: [mm]

A: the time an-

K: ye- ye- the-<trouble is> ye- you get something

A: [(4 syllables)]

K: an then, (0.8) watch it.an- er> listen.< an read an
everything over there, >ye haven’t got a< clue what
comes out of here?]

A: "I know"

K: not a word.- well why don ye say so. (.) turn it off.

A: because you’re watching it,=

K: =oh. I see. "right"

A: [more often that not.] oh.

A: if you’re not asleep.

K: (.) well yes a little yes.

A: you were having a good old doze this afternoon.=" new topic

K: =well I felt like (I could also this), (.) this dreadful
things didn’t i.

A: yes. but you’ve just gotta forget that [now. I ]

K: [mmm. right.]

A: mean (0.7) I think we’re hyper sensitive that
anything that’s wrong now. (2.8) ya know we’re
thinking "AHHHHH (. ye know, (.)
[(vibrates hands by head)]

what’s going wrong now. w- with the everything
that’s gone wrong before you. this last two
years. (.) that we’re (1.3) thinking its another
major event an it might just be an upset stomach?

K: w- I [don’t] know what it is but its gone [now, ]

A: [or, ] ["yeah."]

K: "I’m over", an I’ll (change, ) (.) that’s it good.

A: [that’s it. ]

A: "yeah."

(3.1)

A: when I spoke to jim this morning. (.) he was telling new topic
me that, (.) when edna had her first stroke , (1.0) he
didn’t tell her she’d had a stroke, (0.5) she, (.)
just thought she was suffering from vet tigo.

K: [who ]was this?

A: jim, (.) (bentham) was saying about edna.

K: oh!

A: an he- e- e- he said a long while afterwards he said
something about, (.) th when you had your stroke,
(0.6) an she said, (.) WHEN did I have a stroke.

K: (1.8) an he of course he said< I had to tell her
then. (0.7) he said, (1.4) I don’t think she blacked
me eye, (.) I said w(h)as that when you walked with
365 a limp! /j3:/ (. ) but he sounded very good this
366 morning it was not, (. ) sometimes he sounds very
00:18:48 367 weary. but he didn’t t- today.
366 (2.9)
367 K "mmm"
368 A so anyway. tha- that’s good.
369 (3.8)
370 A "h "have we done enough?" new topic
371 ---------------------
372 K ((nods and motions to camera with hand))
373 (2.7)
374 K there [ you go ], (. ) look [ all ] that too much. (. )
375 A [ hhh ] [ OH ]
376 K [ TOO much. ]
378 (1.5)
00:19:17 379 A anyway. (1.2) off we go. (2.0) smile to the camera!
to extend the table enter **table** menu and choose **insert rows**
Appendix 4
Keith and Annie conversation 5

transcript version [no.2]

subject with aphasia in conversation with Annie at home

18 Months post-CVA

transcribed sample length 11 mins 54 secs

counter times: start 6:30:43 stop 18:26:31

All initials, names and places are pseudonyms

column 1  2  3  4  5  6

counter time  line no. speaker talk notes

hh:mm:

6:30:43  1 A  when we first knew her she was so, (.) bubbly
         " wasn't she, (.) yeah"°
         {she was. she was} wonderful person to be, (.)
         with, (.) and {she sh- (1.0) but she going but {now }}
         [yeah.. and i -i-]
         [°yeah°]
         6 K  its all, (.) its all, (.) its all [down.]
         7 A  [i ] don't think she's
         worried about her daughter getting married cos, (.) she
         told me she was so thrilled that she’dramer, “h she’d settled
         down cos she’d been living in turkey.
         (1.0)
         13 K  °mmm° [yeah.]
         14 A  [and ]erm,- she came back and
         met s this fella who’d she’d know
         from school days. (.) and she said
         they th- such a perfect couple.
         >an she said i couldn’t-- "h if i’d
         gone out and picked anybody i couldn’t
         have picked anybody better.
         (1.4)
         20 (1.4)
         22 A  °h so=
         23 K  =oh well.
         (1.4)
         25 A  or whether it’s cos she’s gonna meet
         her husband?
         (1.7)
         27 (1.7)
         28 K  h have to see what she (drums) up.
         29 A  yeah.
         30 K  thats all i can say.
         (1.2)
         32 A  but it is a shame.
         (1.1)
         34 K  but- apart from that, (.) as our main new topic
s- main thing, (.) which has been
round and round and round with me.
A "yeah."
K =going on, (.) its s- SO much isn’t it
how long,(.)[how ]long would you say
["yeah."]
K it was?
A its six weeks yes[testerday. ]
K [sixteen ]weeks!
A SIX. [th-, ]yes.
K [six weeks.]
K we’, re bi- s- w- we’re there. (1.2)
an its its, (.) ya you feel
exhausted.
A yeah ["i know "yes,]
K [all is gonna ]thing up and do
that >but still lets< lets look at it
i always (think) as if he’s getting
BETTER. its its good now
A yes=
K =cos they’re going that so, (.) if
he’s goes up fairly soon, (.) that’s
better and ss n thats fairly good. (.)
an thats been done, (.) yesterday
the last thing they did it was
good, (.)an thats all perfectly [one]
[an ]
A isn’t it a pity they didn’t do that,
(.) properly the first time.
K (2.1)
A y’know when they came an ff (.)put the
tank in (last Friday) why didn’t they
make, (.) nice an neat an tidy. "h they
must’ve known it wouldn’t except that.
(1.0)
K OH! well (3 syllables)oh ye he said to
me, (.) today. (.) i said look i’m
NOT what you-, (.) ive said i’m (.)
i’m not gonna go(1.0)what you put down
here, (.) and showed (down) it was (.)
"h TERRible. (.) oh im >got nothin to
do with it< i i dont like it myself.
(1.0)
A (.) i couldn’t get it. no. or
something [like ]that. y’know what i
A ["mum""]
K mean.
A yeah- it just seems so, (.) de- >i’m
gonna murder this lamp< cos im, (.)
new topic
K [looking round the corner at you.]
[ ((moves lamp)) ]
(1.1)
K oh.
A [ira,] (.) does re(h,heh, h)reorganise
the furniture doesn’t [she.]
but anyway, (1.6) er, (1.1) well, (. . .) I return to y’know. I’ll let him, (. . .) I hope he comes along and does and does it and we shall be wh-, (. . .) y’know=

=“huh (. . .) wh hopefully, (1.0) er, (. . .)

once its all done, (. . .) the weather will improve an we’ll be able to sit out again in the garden.

K [that’s what what ]

A [cos we haven’t been able to sit out]

K [well its terrible horrible innit. ]

A [at all this year. “yeah” ]

K [thats true. (. . .)]

A so p’haps its er, (. . .) an ↓omen.

(. . .)

K well >its its so<. “yes thats a fair (1 syllable)“ ALREADY th the er, (. . .) th the er, (1.3) I IT GOES, (. . .) its STARTing to erm, (. . .) >didnt go< erm, (. . .) er it has been running to now but now its its starting to close it down isn’t it?="

A =yes.yep.

K each one. yes t already. (. . .) still.

lets hope it looks good, (1.0) an i hope it is. thats wonderful]

A [well ]

K it cant 1(hook)ook h any worse than it 1(hook)ooks now=

A =no thats true.] (. . .)really, (. . .)

K [“yeah”]

A when the, (. . .) gazebo was up “h it was fine you couldn’t see it but when, (. . .)

this year>because we haven’t had< the (. . .) “h the gazebo up at all its been [(1.8) very much] (1.6)

[([waves fingers)])]

they’re all.- that honeysuckle an that, (1.2) erm buddleia, (. . .) lovely buddleia.

K mm hmm.

A an that other, (. . .)erm dogwood was it?

K mm [hmm ]

A [(3 syllables).] ermm, (1.) they were just beginning to really cover [that. ]

A [(moves hand)]

(1.1)

A weren’t they.

K well its [all gone] now an thats the
A: [screen it]
K: end of it. **still**, (.)(1.0)
A: ["h""] (1.0)
A: y'know we went, (.)(1.4) this morning to
get the bird seed, (.) erm, (.)(1.0) "h that
place where we had our, (.) erm (1.0)
log horse made.
K: [{}(makes cross with arms)]
(1.0)
K: yes?
A: did y' see the lovely pieces of
screening they've got there?
K: of what.
A: y' er >yeah th ma-< they make
screening, (.) y'know like (laffs)
n n do some lovely
K: yes
A: [shapes an things like ]that,
K: [oh sorry yes yes. ]
A: "h d- i i, (.)(1.0) thought bout,(.) whether
we ought to go an have a look see
what they've got in there. (.)(1.0) "h
but one of them was lovely it was
a little seat >5 syllables< i thought
i wouldnt mind that< heh heh
K: well i'll have to have a look. ]
A: [heh "h"
but >we can't very well say< (.)(1.0) "h
can we have one with a seat on! (1.0)
can we.
K: well i don't know! (.)(2.0) err (.)(1.2) i er i
i think with all that there, (.) to
be, (1.0) all that time.
A: mmm
K: (2.1) well, (.)i i think it ought to
be, (.) erm, (.)(2.1) be very good today.
A: "yeah, " ill tell you summit else that
hasn't come is that quote from, (.)
andrew's.
(2.0)
A: y'know. for the bumper.
(1.2)
K: well, (.)(he, )(he hasn't sent it.
A: ["come." ]
A: >hasn't sent it i better give them a
call later on.< [ask them-]
K: [yeah see ] what they
want to do=
A: =erm, (.)(i wonder] if [they] have it
(1.2)
K: [i HOPE ] [ i ]
A: HOPE its easier um its easier to um,
(1.0) do it ourselves.
A: >all i know er not keen on us
doing it um doing anything ourselves,<
"h (.)(1.0) they'll do it.
its alot of money,

K yes but, (.) i mean if (.) erm,

K STILL [if he does thats even better ]

K [if the insurance is going to ]

K [still, thats why, (.) yes fair ]

A [pay its alright isn't it? if not we'll ]

K [enough but, ] [ok ]

K [leave it. its [not] worth the ]

effort. =

K =right right ok. "that alright then".

A (2.0)

K or let ben have a go at it cos he

K said he would.

K well thats, (.)well lets see what he

K does first. (.) thats it.

A bu-, (.) y'said that the, (.)

A insurance claim wouldn't never be

A closed!

A (2.3)

K oh i see. yes [well then,- ]

A [so cos y'said ] that

K y'never know what, (.) "h while've

K taken every, (.) possible step

K we've can, (.) er y'never know what

K might happen in the future. (.) an

K we want to keep the claim open,

K yes. =

A = er in case of any, (.) further

A developments.

K "h well lets see er wh what they wan to

K do. "h er i, (.) i don know what he

K wants to do. (.) if he thinks well.

K (.) thats reasonable, (1.0) er then i

K say well lets, (.) lets h have it!

K (.)

A y'eah]

K [the] better it is the better it IS!=

A = well thats right. ] [yes.]

K [all] the [all ] the

K time!=

A =i do hope we get a tree, (.)

A because,-

K well a little one.

A yes.

K n n not a great one. i mean y'want

K smart- y'want [small, ]

K [(puts hand out flat)]

A yes one of these little ["ones" ]

K [not one of]

K these, (.) great big, (.) [(growers)]

K no. ]

K but, erm, (.) i would like something

K to drape up that, (1.0) plant by

K erm (1.4) er (1.0) gladys's. like by

13:04

K the side of the tank. >b'tween the
gar-< "h the raised garden. (.) an the
tank. i'd like a tree there.
(1.9)
K well its up to them. (1.0) err
what [y'mean on our side] or this side?
A [well. i i mean ]
(1.3) on, (.) our side. (1.0) by the
raised garden.=
K = well >we can well we can< well SEE
what he comes up. (1.0) an h he got
all those things an he showed it to us
what he got, but now i wan to see what
he'll sell us!
A yes im surprised they haven't sent us
a copy of the the plan.
K well. (.) i hope its fairly soon, (.)
A cos its er- wh we want it-
well, er, Ian erm, rang him Monday
morning and said look, (.) im
desperate for it. an he said he'd get
it in the post. "h bu cos Ian, was
at (Lowerstof) yesterday he hadn't
been, (.) into work, (.) an he s now
hope its there when i get back
today.
K oh. [what you,-]
A [s- so i ]i might give him a ring
another person or some(h)thing "hh erm,
(.) to say to him. erm, (.) that
we're pleased with the work now.(1.5)
y'know w with, erm, (.) [ (5 syllables)]
K [ well. thats ]
how erm, as soon as he says, (.) lets
see, (.)what you want
to put up we'll come an listen to you
thats perfect.
A "mmm [yes:].]
K [do we expect (already go on)
A thats right.
(1.5)
K b BACK to ordinary. ordinary things new topic
th er er as:: we are, (.) er going
i er: i erm, (2.2) its ju that, (.)
there's nothing, (1.0)s um i think
im having too too too much.
(1.8)
A too much what.
K e in his er:: (.) i think he's e oh
START again. (1.0) he came along there
an se h how's you erm, (.) er are you
[going (1.6) BETTER. ]
[(holds hand out flat)]
A who is this talking.
(1.4)
K his. ye- this morning!
A y'mean, (.)edith. the nurse.
K yes! >i thought you were saying is it
ok <an y'said well it it has a, (.)
it has a little bit but nothing
nothing more. [so] its nothing

[no,-] [n ]
happen[ing.]
[i- ] if you remember when i
when he, (. ) put you on those
tables he said they'd gradually
increase.
oh [i see. ]
[he didn't] want to bring it down
too quickley.
oh. p'haps he wants [some more then.]
[ so, (. ) he ]
>probably when he< sees you next week
he'll take prob [get you two tablets
[nmm m ]

well he what he wants to do lets do
it i say.
"that's right er,"
that's fair enough that perfectly
good. (1.0) ri.:ght. (1.6) OH! in
new topic
the in the:: er, (. ) yesterday.
when we went to the lun the er, (. ) th
the other day, (2.0) an we went to the
to the er, (2.7) the various th erm,

>wh well erm< are we talking about
welsh (2 syllables)?(. ) or meeting? or
(2 syllables).

YES! today
today.=
= we went in there,
yes.
an you said [OH LOOK! ] (1.0) she've
[((pointing))]
b she's erm, (. ) they've got erm,
he's on- he's, (. ) wh wh wh grown up
there now that=
those beans?

(1.0)
no. ["what"] are you [talking] about.°

[no! ] [today. ]
we went along there. /ppp.::::/ went
into the, (. ) to the nur::se,
yes,
an while we're coming back we said

look at look at that er, (. ) in there t
erm place.before, (. ) er being, (. )
(claringed).
cl cleaned?

exactly!=
= oh yes! the (sanit's), (. ) garage.

[ wh ]
well tennant motors isn't it.
(1.6)
>bu its<, (.) tennant motors it was
where it all cleaned up. (1.0) is
that what you mean:..
no, [its where we-]
there's the [caravan people] new topic
((pointint)) ]
going [up. ]
[oh yes. ]
(4.0)

makes me laugh the way they put
[wh]
the landrover, (.) on the b(h)ack of
the c(h)ar heh by wh(h)ich [time]
[oh ]back
on itself!
"yeah." (.) well it saves abit of fuel
[doesn't] it.
["mmm"
(1.5)
NO! i was just noting we were going return to
in there, (.) to see him, (1.6) previous topic
tonight, (1.5) [an the ]
d' you mean about the
house.=
yes! thats what (6 syllables) ) its
[that the people have moved in]
beautiful an [new.] but d there's a
[yes.]
house on there, [an-]
but haven't they
got an awful entrance.
(.)
y'know with those old people in the ]
well y'know its(4syllables) very
[bungalows ]
strange, (.) er things: AT ALL.=
=>mind you it looks better than<, (.)
d'you remember it was sat, (.)'h that
poor horse on there. all on his own.
(1.4)
on that [piece of land. ]
[wel that was awful.]
[with all those weeds an ] an thistles,
[but anyway sh she ]
well. it doesn't matter now because
tha tha thats their place.

=but its a very strange thing isn't it]
[m m m]
but it just n er,(.) goes up an up an
up an up an thats the end?
[yes=]
an its horrible ], there's nothing
[yes.]
to make you, (.) say well thats really
425 good, (. ) to [ listen to. ]
426 A [ i wouldn’t be ] very
427 happy bout that having that s, (. )
428 K [ like that. like that. ]
429 K [ no. would you d - exactly! ] then it
430 K [ goes ] shoop!
431 A [ "yeah " ]
432 K but y ’know you’ve [ only got to ] have
433 K [ (3 syllables] ] a little slip.
434 (. )
435 A an thats [ it. ]
436 K [ oh ] it is! =
437 A = "yeah."
438 K it goes like that an then,
439 A m mm
440 K shoosh=
441 A = an then when it rains here it could,
442 (. ) y ’don’t know how - (. ) whether
443 K they’ve disturbed, (1.0) erm, (. )
444 K y ’know roots systems an, (. )
445 K all [ kinds of things. ]
446 K [ well i don’t know. ]
447 A but we(h)’l all [ (sl(h)ow down) ]
448 K [ but wh what’s in ]
449 K the next one, (. ) th thats in the end
450 A (. ) one next to it is the
two. (1.0) who’s the other one. i its
going there wh er er::: who sits up
452 K who has that " one there".
453 K oh thats the garage!
454 A (2.8)
455 A that, (. ) one next to it is the
garage!
456 A (1.5)
457 A huge thing it is. >er i< i should say
458 K its probably as big as ours
459 K (1.5)
460 K "yeah. (1.0) ↓hmmmm."
461 (. )
462 A per(h)haps its a gr(h)anny flat?
463 (. )
464 A well i don know
465 A shut up granny or else we’ll put you
466 K in the [ ] garage
467 K [ "oh yeah."
468 A y(h)eah.
469 A ↓hmmmm
470 A anyway. i i should think now that
471 K we’ve, (. ) done quite a long time.