

CHAPTER 7

CONCLUSIONS AND RECOMMENDATIONS

“When the ripening period comes

We catapult

Into the waiting world

Like the seed of dry pods”

(Mahola, 1994, p.13)

7.1 Introduction

This chapter contains an overview of the conceptual rationale for the current research. It then provides a summary of the results of the study in relation to the development, refining and administration of two questionnaires and a training session, aimed at increasing the confidence and skill of sales assistants in identifying the barriers to, and facilitators of interactions involving customers with a cognitive-communication disorder following a TBI. Conclusions are provided which advocate the implementation by companies today of training modules empowering their employees with greater understanding of these matters. A detailed critical evaluation, including a consideration of limitations of the study follows. Finally, recommendations are made for future research.

7.2 Overview of rationale for study and summary of results

Conceptual shifts within the rehabilitation context in relation to the individual with a neurogenic-based communication disorder (and in particular with a cognitive-communication problem following a TBI) were extended within the current research to incorporate transformations within the corporate context, with reference to customer service generally, and more specifically to training programs for individuals with a disability. In spite of the shifts identified in the rehabilitation context, advocating the fuller integration of individuals with disabilities into society (with a concomitant reduction of environmental and attitudinal barriers), only a limited number of published communication partner training programs are currently evident, in relation specifically to individuals with a TBI (Togher et al., 2004). This has resulted in the call for more training programs to be offered to these individuals and their partners so that they can manage

communication interactions across a number of different service encounters (Cottrell, 2001; Kagan et al., 2001; Simmons-Mackie et al., in press; Togher et al., 2004).

Similarly, when one examines the legislative changes worldwide, and in relation to the South African corporate environment specifically, in spite of the contemporary call for inclusion of diversity issues, very few companies are reportedly truly inclusive workplaces (Silver & Koopman, 2000), and they continue to be filled with many environmental and attitudinal barriers in relation to individuals with communication disabilities in particular. There is a dearth of training programs dealing with both the inclusion of employees with disability, as well as training regarding customers with disability generally, and a TBI specifically (Cottrell, 2001; Franklins disability awareness in a retail environment training manual, 2001; Silver & Koopman, 2000; Swart, 2001).

A combination of these transformations and gaps within the rehabilitation and corporate contexts comprised a cumulatively compelling rationale for the current study, where the notion of communication partner training was extended from within the traditional therapeutic environment to include the broader realm of everyday society (chapter 3, Figure 3.1). An experimental group of supermarket sales assistants were given a once-off 4 hour long training session aimed at changing their ability to identify barriers to, and facilitators of interaction involving customers with cognitive-communication disorders following a TBI. Data for the development of the training session were obtained during the pre-experimental phase, by undertaking a needs analysis based on input from various stakeholder focus groups. This input, in combination with a review of relevant literature in both the rehabilitation and corporate contexts, resulted in the development and refinement of video scenarios, and of 2 pre-and-post questionnaires to accompany their viewing during the main study. A pilot study was conducted in a different region of the supermarket chain from the main study, with minor revisions being made before implementing the training session.

The main study comprised 3 sessions which took place in the participating supermarket chains' support office in Pretoria over a 1 month period, with 2 week intervals between each session. The pre-and-post questionnaire administration sessions comprised the experimental and control groups combined, while the training session comprised the experimental group only. Here the researcher was assisted by a research assistant with a TBI.

The results overall reflected the impact of training on the experimental group in the following ways:

- Training session evaluations were consistently highly rated, reflecting the active participation that was observed in all participants throughout the training session.
- All results obtained consistently pointed to the improvement within the experimental as compared to the control group on the post-questionnaires as compared with the pre-questionnaires. This illustrated the impact of the training session on participants' confidence and skill in identifying barriers to, and facilitators of interaction with customers with a cognitive-communication disorder following a TBI. Customized components of the training session considered to facilitate this impact included the use of meaningful video material; collaboration with a research assistant with a TBI; and the integration of adult learning principles together with stimulating and relevant material for the participants to consider actively.

Overall, the results of this research support the conclusion that it would be timeous for companies interested in expanding the concept of customer service to include an acknowledgement of, and response, to customers with disability. These comprise boundary shifts in standard business and social practice that take “dedication, a leap of faith and practicing to get them into your repertoire” (Zander & Zander, 2000, p.5). Businesses that are willing to train and empower their employees regarding how to interact with greater understanding and awareness with individuals with a cognitive-communication problem following a TBI, will potentially become model organizations, socially responsible systems committed to reducing some of the societal barriers facing their consumers (Simmons-Mackie et al., in press). The possibility exists for the “intentional ongoing dissolution of the barriers that divide us” (Zander & Zander, 2000, p.194), facilitating potentially deeper participation (Alant 2005a) for both the employee, and the customer with a TBI.

7.3 Evaluation of study including limitations

- The current research comprised an innovative preliminary effort to deal with the apparent paucity of communication partner training programs specifically designed for individuals with a TBI, through extending this concept from within the traditional therapeutic environment to include the broader realm of everyday society.

- The support of a large South African retail company in participating in this research reflects its willingness to be a corporate leader in empowering its staff to provide communicative access when serving customers with communication disorders in particular. This support was evidenced through their commitment to the co-ordination required to select the participants, provide them with sufficient time off work, and the transport necessary for them to attend the relevant sessions of the main study over a 1 month period.
- A service encounter such as a supermarket shopping interaction was considered to be a relevant environment to contextualize the current research, since a significant number of everyday communication exchanges take place in such a setting. The possibility of generalizing this research to other contexts, and across a cross-section of individuals with a range of communication disorders remains.
- Efforts were made to control for, or minimize the Hawthorne effect by informing both groups that there were no correct or incorrect answers to the pre-and-post questionnaires 1 and 2, before they were completed. In addition, the experimental group was only informed of the plan for them to participate in a training session after they had completed the pre-questionnaires 1 and 2. However, all participants were informed that they were participating in a University research project, which may have affected their performance.
- In the formulation of the reliability of the confidence and skill constructs (defined in Table 4.8), an item analysis was performed on both questionnaires, and certain questions removed, in view of the experimental and control group participants giving the preferred answers following their first exposure to video scenarios 1 and 2 (chapter 4, Section 4.3.1.2 (v) a). This comparable result in both groups was considered to reflect the impact of their exposure to relevant and meaningful custom-made video material, in relation to their prior experience and knowledge, before the administration of pre-questionnaires 1 and 2 respectively.
- While pre-and-post questionnaires 1 and 2 were found to address the ability of the participants to identify barriers to, and facilitators of interactions involving customers with a TBI, future research may reveal that the more powerful areas of impact and change might need to be measured by means of further refinement of the questionnaires, to include measuring real-life sustainable translation of this knowledge and impact as well (Alant, 2005a).

- Various sources were used to assist the researcher in compiling the training session in order to make it theoretically sound and authentic. Authenticity was ensured by conducting a needs analysis during the pre-experimental phases in order to obtain input from 2 focus groups comprising customers with a TBI (Table 4.2); 1 focus group with sales assistants in a separate region from that of the supermarket participating in the main study (Table 4.3); as well as experts working with individuals with TBI both locally and internationally (Table 4.4). A sound theoretical base was constructed by means of reviewing relevant literature in both the rehabilitation and corporate contexts, as well as communicating personally not only with experts in the field of neurogenic communication disorders (*Appendix 1A; 1C and 1D*); but also with several local corporate consultants (*Appendix 1B*). This combined input expanded the initial focus of the study from the ICF (WHO, 2001) framework into the training session format used in the main study (*Appendix 21*), which focused on training a group of sales assistants to alter in their confidence and skills from being a barrier to a facilitator in the retail service encounter.
- The training session was consensually evaluated by all experimental group participants as good (Table 5.1). This was further corroborated by the researcher and research assistants' observations of these participants' full involvement throughout the 4 hour training session within the small groups, as well as in interaction with the researcher, the research assistant with a TBI, and at appropriate times with all the group participants combined.
- The training session employed a number of customized components that were specifically developed for, and incorporated in the main study, which were considered to be powerful contributors to the positive outcome of the study. These, together with the effect of incorporating principles extrapolated from adult learning (that were likewise considered to influence these outcomes), will be described in turn.

7.3.1 *Video scenarios*

- The training session made extensive use of customized video material professionally produced and refined during the pre-experimental phase. These videos comprised real interactions of individuals with a TBI inside a supermarket during operating hours, and were considered to be as realistic simulations of these interactions as was possible, given the fact that the sales assistants were told in advance that they were going to be videotaped. This information may potentially have affected the representativeness of

the actions of the sales assistants being videotaped, although they all appeared unconcerned about this (Table 4.5).

- Several customers with a TBI were used to produce the videos. They represented a diverse range of individuals with a TBI with various cognitive-communication disorders that in more obvious and/or subtle ways impacted on the communicative interaction with the sales assistant.
- Use of key questions in reference to these video scenarios systematically and powerfully focused the groups' attention on a diverse and representative range of sales interactions. Opportunities were provided for considering and discussing possible solutions with different kinds of customers with a TBI, thereby increasing the participants' confidence and skill in identifying the barriers and facilitators during sales transactions involving such customers. In so doing, the second sub-aim of the current study was targeted.
- Different video scenarios were used during training from the ones used in conjunction with the administration of the 2 pre-and-post questionnaires (Table 4.6), in order to combat over-familiarity and boredom with the material amongst the research participants, and also to stimulate problem-solving within the group (Bornman, 2001).

7.3.2 *Research assistant with a TBI*

- The positive subjective evaluations of the training session (reflected in Table 5.1) were facilitated via collaboration with a research assistant with a TBI, who exposed the experimental group participants firsthand to the personal perspective of such an individual.
- Several participants commented that meeting the research assistant was “unforgettable” and “a great opportunity to learn so much from him.” The opportunity to interact with, and ask questions of him was clearly informative and educational for the participants, and powerful in both encouraging the shifting of previous attitudes, and fostering new learning. Collaboration with individuals with a disability, and who are the subjects of the research has likewise been advocated by Krogh & Lindsay (1999); Mertens (1998); Oliver (1992); Silberman (1990); and Sohlberg et al. (1998).
- The researcher assisted the research assistant in systematically focusing his script (to be used in the training session) as succinctly as possible regarding the impact of a TBI specifically in relation to the shopping experience (*Appendix 20*). His first independent

efforts were verbose and insufficiently cohesive to make the necessary impact on the experimental group participants within a specific time period.

- The research assistant's comments regarding his collaboration with the researcher reflected his belief that it was a productive and clearly empowering process (Ylvisaker & Feeney, 1996, 1998b, 1998c, 1998d, 1998f, 2000, 2001; Ylvisaker & Holland, 1985; Ylvisaker et al., 2003). Furthermore, his actual participation in the training process was considered a very worthwhile and challenging experience by the research assistant, who stated that "I wish more companies would invite me to teach them about living with a TBI."

7.3.3 Principles of adult learning

A range of adult learning and diversity awareness principles were incorporated into the training session. These were considered to contribute to the positive outcomes of the current study, and included the following:

- An interactive, participation-based small-group training format was used incorporating principles advocated by Bornman (2001); Caffarella (1994); Franklin's disability awareness in a retail environment training manual (2001); Kagan and Shumway (2003a); Mayo and DuBois (1987a, 1987b, 1987c, 1987d, 1987e, 1987f, 1987g); Silberman (1990); Togher et al. (2004); and Wastell (1995), in order to promote co-operative learning (Slavin, 1996). The use of a small group format was also considered valuable in providing an opportunity for participants to share and debate concepts among one another, let go of misconceptions, and consider other solutions for discussion with the group as a whole, resulting in "cognitive restructuring" for the participant (Slavin, 1996, p.50).
- The inclusion of the diversity awareness fable *The Giraffe and the Elephant* (Roosevelt Thomas (with Woodruff), 1999c) (*Appendix 22*) as a metaphor for humans in the workplace specifically (but with implications for appropriate consideration within the supermarket environment), was considered stimulating, and highly relevant to the aims of the current study. Specific questions concerning the fable were presented to the experimental group participants for discussion, encouraging them to expand the breadth of their thinking regarding the range of potential customers they might need to serve, who might be more challenging, and might require various accommodations in order to facilitate a more pleasant and successful sales interaction for both the customer and the sales assistant.

- Both the research assistant with a TBI, and the diversity awareness fable, *The Giraffe and the Elephant* (Roosevelt Thomas with Woodruff, 1999c) were introduced at the beginning of the training session in order to set the tone early on for the entire session, and to motivate and energise the participants (Napier & Gershenfeld, 1983; Silberman, 1990).
- The training session was found to be well-paced and sequenced, containing a varied mix of activities to maintain group interest (Table 5.1). In addition, during the progressive slots of the training session, participants were encouraged to increasingly focus their awareness in considering the barriers and facilitators when serving customers with a TBI (from both the perspective of the sales assistant, as well as the customer with a TBI). This was achieved through a combination of small group discussion, together with interaction involving the research assistant with a TBI, and the group as a whole (Table 4.14) (Kagan & Shumway, 2003a, 2003g).
- Consistent use was made throughout the training session of repetition and revision of important material (supported by the use of handouts provided on the tables, and overhead transparencies), in order to further integrate the participants' thinking concerning the issues of barriers and facilitators within the retail environment, thereby internalising new learning concerning issues of personal significance to each participant (Bornman, 2001; Silberman, 1990; Slavin, 1996).
- In addition, material was consistently summarised for the participants by the researcher, who integrated the issues raised by the group into a list of *Do's and Don'ts* (Franklin's disability awareness in a retail environment training manual, 2001) (*Appendix 23*), in order to facilitate enhanced confidence and skill when serving such customers (Silberman, 1990; Slavin, 1996).

7.4 Recommendations for future research

Results revealed a variety of interesting and provocative trends. Preliminary answers, and many more questions were raised that will need to be answered in the following kinds of future research:

- Examine the sustainability of strategies learned in the current research by following up the same group of experimental group participants longitudinally, and re-administering the post-questionnaires 1 and 2, together with having the participants draw up their own list of *Do's and Don'ts* in relation to their serving such customers.

- Examine the confidence and skill of these participants in real life sales interactions in the stores serving customers with a TBI, including a subjective measure of the comfort and confidence of both the sales assistant and the customer.
- In order to determine how extensive this kind of training session needs to be to produce the most sustainable change, replicate and examine the components of the training session used in the main study by means of the following enlarged methodology. Create 3 larger groups of experimental participants where one group sees a video containing information about TBI; the second group meets an individual with a TBI; and the third group both watch a video and meets an individual with a TBI. Use sufficiently sensitive measurements to examine the impact of these 3 experimental conditions both immediately, and over time in their in-store interactions.
- Determine the impact of exposure to, and the influence of, the video material used in the current research by showing the experimental and control groups selected video scenarios accompanied by some general questions unrelated to the video content specifically. After a period of time, show the same group the identical videos followed by the same general questions.
- More specific research to determine the human impact of a research assistant with a TBI collaborating in the training, and to determine the sustainability of this input on the participants over time.
- Disability training modules comprising communication partner training programs should be implemented using larger samples of participants in order to obtain larger significance levels across a potentially wide range of service sectors, including for example:
 - Supermarkets (with differing types of in-service training being offered to their employees);
 - Various corporate sectors within the retail and service industry (including e.g. banking, clothing; pharmaceutical; travel; restaurants);
 - Government departments, and public and private health service sectors such as the police; schools and colleges; as well as medical and paramedical professionals.
- More focused and comprehensive skill-based communication partner training programs, where strategies learned can then be measured both post-training and longitudinally, in order to determine their sustainability across the range of above-described contexts, including the workplace. Partner training could include:
 - Awareness-raising and modification of attitudes towards the individual with a communication disorder.
 - Develop scripts comprising specific context-related skills and strategies (in relation to

interacting with individuals with a range of cognitive-communication disorders and potentially intrusive pragmatic disorders) in order to empower the communication partner, and provide support and access for the individual with a TBI both face-to-face, and even telephonically.

- Developing an empowering skill-based training program for individuals with a TBI who could likewise be trained using various scripts for different relevant life situations, thereby lessening barriers, and enhancing their access.
- Research measuring deeper participation (Alant, 2005a; Seligman, 2002) for the individual with a TBI and their communication partner, by examining this in relation to levels of specific information gained, or skills acquired by these individuals during training.

7.5 Summary

This chapter provided a conceptual rationale for the research undertaken, in which the needs of the rehabilitation and corporate contexts were combined into a training session for a group of sales assistants. This assisted them to identify the barriers to, and facilitators of interactions involving customers with a TBI. The success of this training session was specifically ascribed to the following factors: The collaboration with a research assistant with a TBI; the exposure to a range of custom-made professionally-produced in-store video scenarios; the use of diversity awareness material (Roosevelt Thomas (with Woodruff), 1999c), in combination with various adult learning principles which were considered to provide the participants with the opportunity for “experienced reflection” (Mintzberg, 2004, p.264). This training was facilitated by means of problem solving based on a range of realistic scenarios, where participants reframed previous assumptions, and integrated these new ideas regarding interactions involving customers with a TBI into their own pre-existing beliefs and experiences. The formulation of such a training session created the “possibility” (Zander & Zander, 2000) for more comfortable and effective participation by both the sales assistant and the customer with a TBI during sales transactions. By means of a critical evaluation of the research, combined with a discussion of the study’s strengths and weaknesses, the validity of this study is established. Given the dearth of published programs in both the rehabilitation and corporate contexts which address the issue of communication partner training programs involving individuals with a TBI specifically, the groundwork has been laid for future more in-depth research to replicate, refine and expand the current study in various ways that could be generalized beyond this specific population of individuals with a communication disorder.