

ABSTRACT

Background: Counselling and information sharing form part of the audiologist's role in the early stages of diagnosis and management of hearing impairment. A limited number of health communication studies in the field of audiology have been conducted to date, none of these studies have analysed interactions in paediatric cochlear implant settings. The lack of research within the field indicates that audiologists have a limited evidence based in terms of information regarding communication processes in the paediatric cochlear implant setting.

Aims: The main aim of the current study was to examine the interaction between audiologists and caregivers in the paediatric cochlear implant clinic setting. The main objective of the study was to observe the communication processes and practices of audiologists as well as the manner in which information sharing and counselling were conducted.

Method: This study adopted a qualitative exploratory, cross-sectional design involving interactional analysis of recorded consultations, participant observations as well as thematic analysis of semi structured interviews with participants. The research was conducted at a single Cochlear Implant Centre in the private healthcare sector of Johannesburg, South Africa. The data comprised of eight recorded interactions between three participating audiologists and 10 caregivers, supplemented by interviews with participants after the consultations as well as 12 hours of observations by the researcher in the clinic environment. The interactions included both, implant programming and Auditory Verbal Therapy (AVT) follow-up appointments. The video recorded appointments were analysed via means of genre analysis and sociolinguistic principles. Inductive thematic analysis was used to analyse the interview transcripts. The video recorded data, participant observations and semi structured interviews were then triangulated to strengthen the analysis and overall confirmability of the study.

Results: Similar interactional phases were found to occur in each interaction regardless of the content emphasised in the appointment. A cyclical approach to recommendation giving, progress updates and summary of concepts was observed. The main aspects which emerged from the data set included the complexity of communication within the cochlear implant context, the role of the audiologist as a guide in the patient management process, as well as collaboration between caregivers and audiologists. Themes including; adaption, trust, co-ordination of care, communication and partnership were key themes which emerged from the interview data. These aspects highlighted the experience required by audiologists to identify and manage levels of complexity within consultations.

Conclusion: The results of the current study provide further implications for training and practice within the field of audiology, adding to the growing body of research in this area. By providing opportunities for observational training and mentorship in the areas of counselling and interaction, audiologists may be able to gain the experience needed to juggle the complexity of the paediatric cochlear implant setting.

Keywords: Information sharing, counselling, interaction, communication, audiology, cochlear implant, collaboration, complexity, experience, observational training, mentorship, South Africa.