

Best Practices for Reporting of Discourse Analysis

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Introduction

Validity and reproducibility of results in spoken discourse analysis in persons living with aphasia requires expert agreement on measures, methods, and analyses, which cover all aspects of the concept being measured. Minimum reporting standards encourage consistency and efficacy, allowing clinicians and researchers to evaluate the results across studies and reproduce these works.

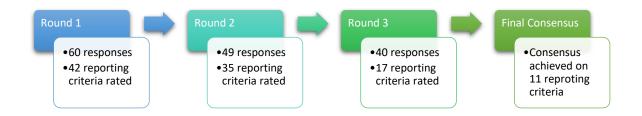
Methods

This study was conducted by members of the FOQUSAphasia (FOcusing on QUality of Spoken discourse in Aphasia) working group (Stark et al., 2020). Experts in aphasia and discourse analysis were identified as the top 165 publishing researchers in this field through Web of Science. Experts were invited via email to contribute their expert opinion of minimum reporting standards for spoken discourse in aphasia using the e-Delphi method, an iterative, three-stage process (see Figure 1). At each stage, experts were invited to complete a short online survey to identify expert consensus and agreement on discourse analysis key terms relating to reporting of discourse elicitation, preparation and analysis.

Results

In the first eDelphi round, 60 experts responded, providing opinions on the inclusion of 42 reporting criteria relating to key terms, measures, methods, and analyses to interpret study results, to ensure reproducibility of study findings and evaluate the methodological rigor of discourse analysis studies. Agreement baseline was reached on 28 reporting criteria which were taken to round 2, and a further 7 criteria were added from qualitative comments. In Round 2, 49 experts again provided opinion to elaborate on the answers

from round 1. Results were analyzed with a stricter baseline of agreement, and 17 reporting criteria were carried forward to round 3 for final consensus among experts. The final round ratings by 40 experts provided consensus on 11 criteria that are deemed necessary for reporting in discourse studies, and a further 5 criteria that were recommended.



Conclusions

Expert agreement on minimum reporting standards enables reproducible and replicable scientific evaluation of discourse in aphasia, promoting further studies and improving assessment and treatment of persons living with aphasia. A defined set of minimum reporting criteria will enable researchers to create a cohesive body of evidence to support future investigation and clinical implementation of discourse practices, while also allowing the inclusion of additional study-specific reporting.

As reporting standards are used, future research will identify discourse analysis key terms, measures, methods, and analyses where variation exists in research practice for further study. This will facilitate the standardization of discourse analysis procedures and enhance implementation in clinical aphasia services.

References

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