

## SLP services in Sweden and in Finland – a comparative study

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**Background:** About ten years ago surveys were conducted in Sweden and Finland in order to investigate SLP services for people with aphasia [1, 2] and their significant others [3]. Both in Sweden and Finland there are national legislations that demands evidence-based practice. Although there are still no national clinical guidelines on aphasia rehabilitation in Sweden, such evidence-based guidelines can be found internationally, such as Australian Aphasia Rehabilitation Practice [4]. In addition, Simmons-Mackie et al. [5] has through an extensive consensus work developed the top ten best practice statements for aphasia rehabilitation.

**Aim:** The overall aim of this study was to describe and compare how speech-language pathologists (SLPs) in Sweden and Finland work with persons with aphasia and their significant others and if these speech-language pathology (SLP) practices differ from those reported about ten years ago. Of special interest was if and how the services followed evidence-based clinical guidelines about aphasia rehabilitation.

**Methods:** The study was conducted as a web-based survey in Sweden and Finland in September 2018. The 43-item questionnaire was responded to by 141 (78 Swedish and 63 Finnish) SLPs working with persons with aphasia and their significant others. Quantitative data were analyzed with descriptive and comparative statistics. Qualitative data (answers to open-ended questions) were analyzed with qualitative content analysis.

**Results:** The findings suggested that despite some commonalities (such as allocated time for different types of interventions), SLP services differed both within and between the countries. Most *within*-countries differences were found in relation to in which rehabilitation phase (acute, sub-acute, and chronic) the participants worked but also between private or public SLP services (Finland) or between regions of the countries (Sweden). Differences *between* the countries concerned for instance time allocated for assessment, measures, goal setting, total number of sessions, the use of specific treatment methods, and the contact with significant others. The majority of the participants, particularly in Sweden, expressed dissatisfaction with the resources allocated to people with aphasia and their significant others. Other expressed barriers to SLP services were lack of treatment material, lack of courses for further education, long distances, too short treatment periods, and lack of SLP services after discharge from hospitals. When comparing today's SLP services in Sweden and Finland with internationally agreed on aphasia rehabilitation guidelines several gaps were found, particularly regarding duration and intensity of interventions. Moreover, the participants expressed difficulties with evidence-based practice; barriers such as lack of psychometric sound measures, lack of evidence-based treatment methods, and the need for individual adaptations of treatment methods and materials were mentioned. In comparison with the studies of Blom Johansson et al [1, 3] and Klippi et al [2] some positive trends could be identified but no major differences were found.

**Conclusion:** Today's SLP services to people with aphasia and their relatives in Sweden and Finland do not fulfill internationally recommended clinical guidelines. To change SLP services and implement clinical guidelines seems to be a time-consuming process that encounters several barriers.

1. Blom Johansson, M., M. Carlsson, and K. Sonnander, *Svenska logopeders insatser till personer med afasi*. Logopednytt, 2011(3): p. 18-23.
2. Klippi, A., et al., *Current Clinical Practices in Aphasia Therapy in Finland: Challenges in Moving towards National Best Practice*. Folia Phoniatica et Logopaedica, 2012. **64**(4): p. 169-178.
3. Blom Johansson, M., M. Carlsson, and K. Sonnander, *Working with families of persons with aphasia: a survey of Swedish speech and language pathologists*. Disability & Rehabilitation, 2011. **33**(1): p. 51-62.
4. AARP. *Australian Aphasia Rehabilitation Pathway* [cited 2015 20 Jan]; Available from: <http://www.aphasiapathway.com.au/?name=Home>.
5. Simmons-Mackie, N., et al., *The top ten: best practice recommendations for aphasia*. Aphasiology, 2017. **31**(2): p. 131-151.