

**8. Griffin-Musick, J., Jakober, D., Sallay, A., Milman, L. & Off, C. (2021) Cognitive-linguistic outcomes from an intensive comprehensive aphasia program implemented by graduate student clinicians, *Aphasiology*, DOI: [10.1080/02687038.2021.1937920](https://doi.org/10.1080/02687038.2021.1937920)**

*Background:* Intensive Comprehensive Aphasia Programs (ICAPs) implement evidence-based, holistic therapies in a short-duration cohort model. ICAPs are growing in popularity, yet there are still relatively few programs, partially due to the high cost of running an ICAP. ICAPs implemented by graduate student clinicians can reduce the overall cost of an ICAP, but Phase I efficacy data for cognitive-linguistic outcomes for an ICAP carried out by graduate students has yet to be reported.

*Aims:* To investigate the impact of a graduate student-run ICAP on measures of cognitive-linguistic change, and to identify relationships between individual and treatment variables and cognitive-linguistic function across pre- and post-ICAP administration.

*Methods & Procedures:* Fifty-three stroke survivors with chronic aphasia (33 males, 20 females; 32 first-time participants and 21 repeat participants; mean age = 65 years; mean time post-onset = 34 months) participated in an ICAP implemented by graduate students across eight cohorts. Cognitive-linguistic outcome measures included: *Western Aphasia Battery, Revised* (WAB-R); *Boston Naming Test, Second Edition* (BNT-2); and *Raven's Coloured Progressive Matrices* (RCPM). Paired samples *t*-tests were used to compare pre- and post-ICAP performance for each measure, and Pearson's *r* correlation coefficients were used to evaluate relationships between measures, as well as individual and treatment variables.

*Outcomes & Results:* Statistically significant change was observed on all three measures post-treatment, with small to no effect size. Participants who had completed a previous ICAP showed greater change on the WAB-R and RCPM, but no other individual or treatment variables significantly predicted change on outcome measures.

*Conclusions:* Results provide Phase I, proof-of-concept evidence of positive cognitive-linguistic change in stroke survivors with aphasia following ICAP participation. An ICAP implemented by graduate student clinicians produced significant improvements for persons with chronic aphasia.