

# Post-Aphasia Diagnosis: The Impact of Social and Emotional Stress on Language

Sarah Alagna, B.S.

Faculty Sponsor: Ethan Kristek, Ed.D., CCC-SLP

Fontbonne University - Department of Communication Disorders and Deaf Education

## Abstract

“Up to 62-70% of persons with aphasia following a stroke experience symptoms of depression. Furthermore, multiple studies indicate that the QOL (Quality of Life) of persons with aphasia is significantly worse than the QOL of stroke survivors without aphasia” (Kristinsson & Halldorsdottir, 2021, p.244). Aphasia is a diagnosis that can cause social and emotional isolation by affecting one’s ability to communicate daily needs and wants. Regarding treatment, the utilization of specific treatment approaches, therapy techniques, and group treatment interventions will be discussed in relation to emphasizing addressing linguistic factors instead of incorporating the social and emotional needs of people with aphasia. This session will explain the importance for people with aphasia to seek speech-language therapy services and how addressing expressive and receptive language deficits can affect integral emotions and social interactions for persons with aphasia. Furthermore, an overview containing the physiological, social, and emotional effects of aphasic patients' communication-related quality of life will be discussed in relation to selecting treatment approaches and techniques.

Learner Outcomes: Participants will be able to implement

1. Identify how aphasia affects the communication-related quality of life and related to social and emotional functioning.
2. Distinguish the variety of treatment approaches to address language and social and emotional considerations.
3. Discuss appropriate intervention in persons with aphasia by implementing QOL assessment and treatment techniques.

## Aphasia and Symptomatic Generalities

- Lack of Self-Esteem (Cahana-Amitay, et al., 2011)
- Fatigue (Cahana-Amitay, et al., 2011)
- Avoidance (Cahana-Amitay, et al., 2011)
- Depression and Anxiety (Cahana-Amitay, et al., 2011)
- Catastrophic Thinking (Cahana-Amitay, et al., 2011)
- Physical Decline (Cahana-Amitay, et al., 2011)
- Motivation Strain (Cahana-Amitay, et al., 2011)
- Loss of identity (Cahana-Amitay, et al., 2011)
- “Loss of Voice” (Sodbinow, 1970)
- Decreased Cognitive Functioning (Cahana-Amitay, et al., 2011)

The implementation of appropriate treatment approaches that result in social and emotional effects is important when conversing with others. “Living with aphasia is often associated with significant mental health-related challenges” (Pompton, 2022, para. 1).

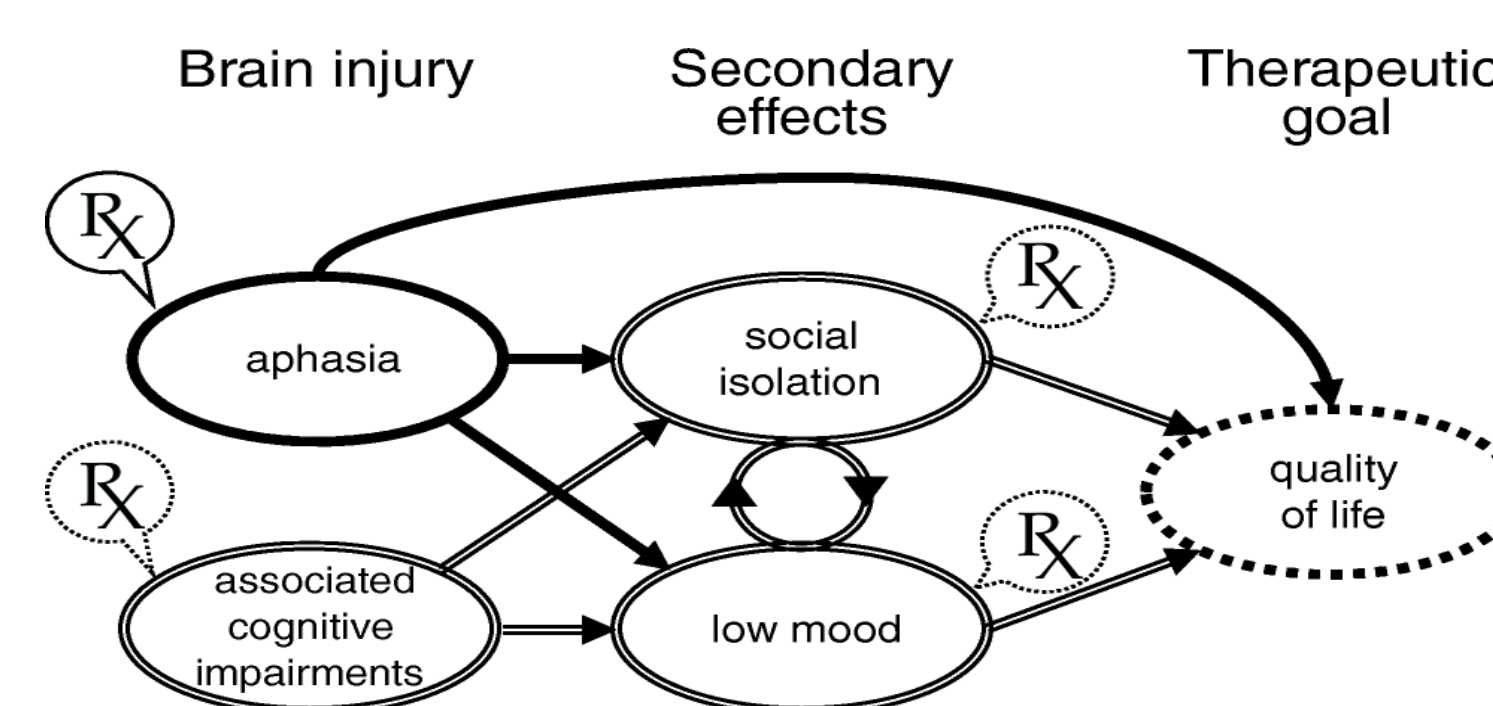
## Effective Treatment Approaches:

- Aphasia Action Success Knowledge Program (ASK)
- Personal Adjustment Counseling
- Aphasia Group Treatment

Aphasia Action Success Knowledge Program (ASK)	Personal Adjustment Counseling	Group Therapy Approach
<ul style="list-style-type: none"><li>• ASK is a program that advocates the positive adjustments of quality of life for persons with aphasia.</li><li>• This program implements functional activities, social support groups, positive coping strategies, and life participation approach for aphasia.</li><li>• “The ASK program delivers speech-pathologist with a systematic manner to deliver psychoeducation and promotes positive adaptations for persons with aphasia in treatment” (Ryan, et al., 2017).</li><li>• Persons with aphasia and their family members have reported high satisfaction with the program.</li><li>• ASK assists in controlling the feelings and emotions of persons with aphasia (grief, depression, sadness, neglect) (Ryan, et al., 2017).</li></ul>	<ul style="list-style-type: none"><li>• Allowing a safe, conservative environment for the patient.</li><li>• Five components that should be targeted during counseling consist of self-awareness, active listening, gathering information, providing information, and promoting change (Schaffer &amp; Henry, 2023).</li><li>• Building a trusting, positive relationship between the clinician and patient.</li><li>• Involvement of family members and caregivers.</li><li>• Providing supportive communication strategies.</li></ul>	<ul style="list-style-type: none"><li>• Conversing with other aphasic patients allows for others to express feeling, thoughts, and emotions.</li><li>• Improves the psychosocial functioning with others who share the same diagnosis.</li><li>• Provides community involvement to promote better QOL for persons with aphasia (Elman 1970).</li></ul>

## Prevalent Evidence-Based Screening Tools used to Assess PWA Social and Emotional Status:

- Patient Health Questionnaire (PHQ) depression scales
- PROMIS Emotional Distress-Depression Scales
- Questionnaire for Cognitive Decline in the Elderly
- Stroke Aphasic Depression Questionnaire-21 item (SADQ-21)
- Assessment for Living with Aphasia (ALA)



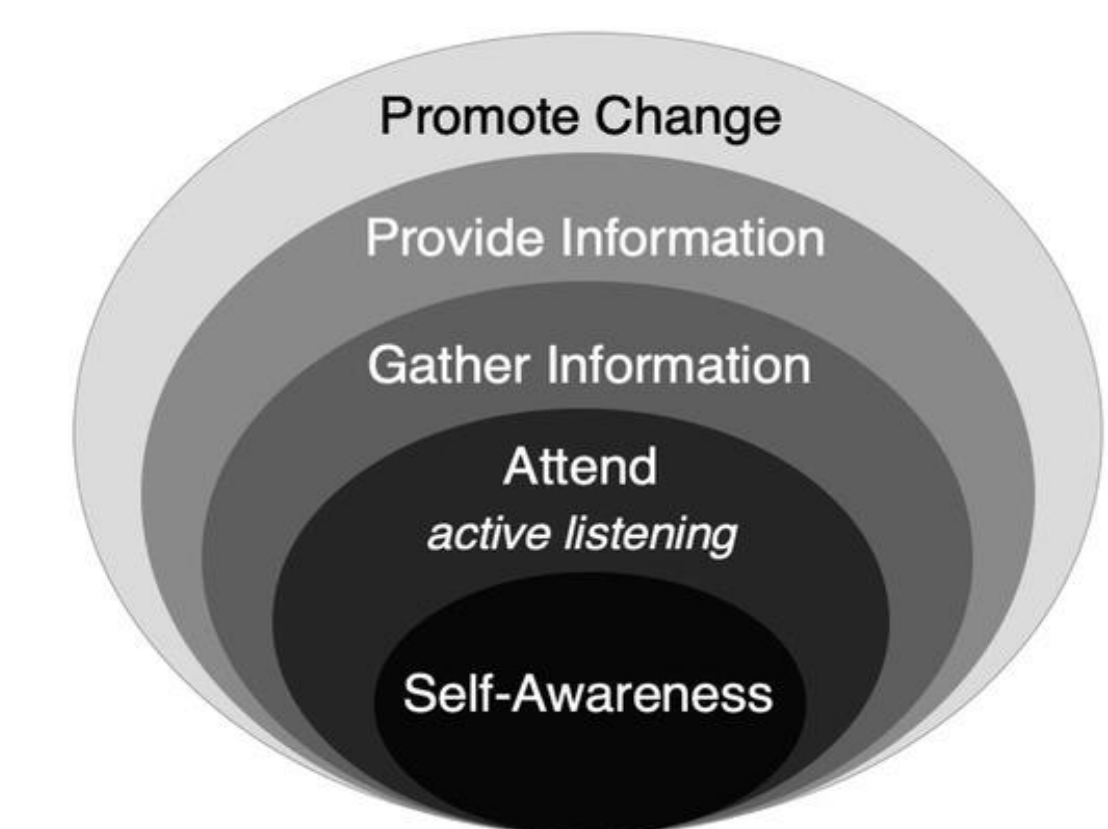
Doogan, C., Dignam, J., Copland, D., & Leff, A. (2018, October 15). *Aphasia recovery: When, how and who to treat? - current neurology and Neuroscience Reports*. SpringerLink. Retrieved March 6, 2023, from <https://link.springer.com/article/10.1007/s11910-018-0891-x>

## Results

- Significant improvements were provided and positive reports of the success of the ASK program were given. This program is effective for implementing communication skills while targeting the social and emotional aspects of communication (Ryan, et al., 2017).
- Personal Adjustment Counseling is proven to provide comprehensive care that targets the sensitive needs of PWA (Manning, et al.2022). Counseling allows for increased knowledge and coping skills for PWA and family members. Increased communication skills are also a result of counseling (Pompton, 2022).
- Aphasia group therapy treatment is effective in the psychosocial effect on individuals with aphasia. This approach allows the vocalization of feelings, thoughts, and emotions while feeling a sense of acceptance. This approach allows individuals to communicate and be vulnerable to their situation (Bronken, et al., 2012).

## Implications

- Support from family members and healthcare professionals is essential when focusing on the social and emotional impact of PWA. Appropriate and effective treatment approaches should be implemented post-aphasia diagnosis to provide the best QOL possible.



Pompton, R. H. (2022, October 3). *20Q: Mental health, aphasia, and the SLP's role*. SpeechPathology.com. Retrieved March 6, 2023, from <https://www.speechpathology.com/articles/20q-mental-health-aphasia-and-20528>.

## Acknowledgements

- Bronken, B. A., Kirkevold, M., Martinsen, R., Wyller, T. B., & Kvigne, K. (2012, July 22). *Psychosocial well-being in persons with aphasia participating in a nursing intervention after stroke*. Nursing Research and Practice. Retrieved March 6, 2023, from <https://www.hindawi.com/journals/nrp/2012/568242/>
- Cahana-Amitay, D., Albert, M. L., Pyun, S.-B., Westwood, A., Jenkins, T., Wolford, S., & Finley, M. (2011). *Language as a stressor in aphasia*. Aphasiology. Retrieved March 6, 2023, from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3372975/>.
- Doogan, C., Dignam, J., Copland, D., & Leff, A. (2018, October 15). *Aphasia recovery: When, how and who to treat? - current neurology and Neuroscience Reports*. SpringerLink. Retrieved March 6, 2023, from <https://link.springer.com/article/10.1007/s11910-018-0891-x>
- Elman, R. (1970, January 1). *[PDF] the importance of aphasia group treatment for rebuilding community and Health: Semantic scholar*. Topics in Language Disorders. Retrieved March 6, 2023, from <https://www.semanticscholar.org/paper/The-Importance-of-Aphasia-Group-Treatment-for-and-Elman/6df9154c13a533ace1d4baa76c34e983688a914c>
- Manning, M., MacFarlane, S., Hickey, A., Galvin, R. & Franklin, S. (2022) *Regulating emotional responses to aphasia to re-engage in life: A qualitative interview study*. *International Journal of Language & Communication Disorders*, 57: 352–365. <https://doi.org/10.1111/1460-6984.12702>
- Pompton, R. H. (2022, October 3). *20Q: Mental health, aphasia, and the SLP's role*. SpeechPathology.com. Retrieved March 6, 2023, from <https://www.speechpathology.com/articles/20q-mental-health-aphasia-and-20528>.
- Ryan, Brooke & Hudson, Kyla & Worrall, Linda & Simmons-Mackie, Nina & Thomas, Emma & Finch, Emma & Clark, Kathy & Lethlean, Jennifer. (2017). *The Aphasia Action, Success, and Knowledge Programme: Results from an Australian Phase I Trial of a Speech-Pathology-Led Intervention for People with Aphasia Early Post Stroke*. *Brain Impairment*. 18: 1-15. 10.1017/BrImp.2017.5.
- Schaffer, K. M., & Henry, M. L. (n.d.). *Counseling and care partner training in primary progressive aphasia*. Retrieved March 8, 2023, from [https://pubs.asha.org/doi/epdf/10.1044/2021\\_PERSP-20-00296](https://pubs.asha.org/doi/epdf/10.1044/2021_PERSP-20-00296)
- Sodbinow, E. (1970, January 1). *The emotional and psychosocial effects of aphasia: An Autoethnography*. Scholarly Publishing Services - UW Libraries. Retrieved March 6, 2023, from <https://digital.lib.washington.edu/researchworks/handle/1773/49234?show=full>.
- Wagner, A. (n.d.). *Penn State team works to improve mental health care for people with aphasia*. Penn State University. Retrieved March 7, 2023, from <https://www.psu.edu/news/research/story/penn-state-team-works-improve-mental-health-care-people-aphasia/>.