

Aphasia Insights!

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“It’s a fortunate person whose brain is trained early, again and again, And who continues to use it To be sure not to lose it, So the brain, in old age, may not wane.”

Squire, L.R (Edited). The History of Neuroscience in Autobiography, Volume 5, Mark R. Rosenzweig. The Society for Neuroscience, Elsevier Academic Press, Burlington, MA (2006)

Mark Richard Rosenzweig (9/12/1922 – 7/20/2009) was an American psychologist and research on neuroplasticity.

Stroke Educator, Inc. is committed to educating the wider public about stroke and the 50 state “*Aim High for Aphasia!*” Aphasia Awareness Campaign.

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People with Aphasia: Social Distancing Professionals Long Before the Virus was in Vogue!

By Tom Broussard, Ph.D.

The start of recovery for a person with aphasia (PWA) is the beginning of understanding the loss of one’s language from a stroke. The brain heals very slowly, and “healing” doesn’t mean that a person gets better overnight.

I had been told, one; that I had problems reading, writing and speaking, and two; that my therapist had noted that I was

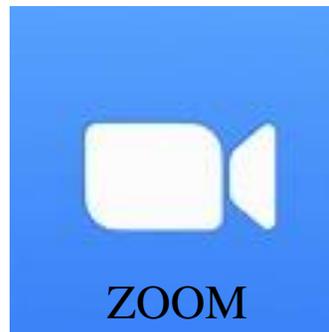
aware of those problems based on what had to have been affirmative responses of mine.

Yet every day I would ask (as best I could), “What is this thing called “awareness of deficits?” Clearly, I was still unaware, and couldn’t explain what I wanted to say. As a result, the conversations were more a do-loop, repeating the same questions (and same answers) until I became aware enough to realize that the words *themselves* started to mean something that I could begin to understand.

That is why it is so difficult to “talk” with a person with aphasia

given that colleagues, friends, or family members have no idea on how to approach a conversation when both are having difficulties from their own perspective.

At that point, neither party really knows what to do and that often means doing nothing. As a result, days become weeks, then months...and then years with zero communication. Sadly, that is the way it is, social distancing by osmosis.



But social distancing in today’s COVID world is completely different than social distancing when it comes to people with aphasia. Upon losing one’s language, the next step is often losing

one’s friends and work relationships. PWA often miss work events, social gatherings, have been left out of conversations or weren’t even invited in the first place. That is the beginning of isolation and clinical social distancing.

I had been attending the Boston University Aphasia Resource Center (BUARC) group for quite a while and thought I was ready to see my friends and associates at work. I went to my first department lunch at my university several months after my stroke.

The lunch went well. Plenty of chit chat but none that “bothered” me or were too confusing. Near the end, someone told me that one of my employees (who wasn’t at the lunch) was getting married. I heard the name but couldn’t *place* it.

I asked “Who is she?” The co-worker said, “You know ... Rebecca?” I asked again, and still couldn’t recognize the name even though I had hired her years before <sigh>.

That is how isolation and social distancing occurs. The conversations stop, no more lunches, and no more work friends or colleagues to have lunch with.

Social interaction is what makes us who we are, and that is what makes it difficult to join in (and enjoy) many conversations in daily life as a result of aphasia.

We become “social distancing” by accident but it is more like “social-*ending* distancing” than anything else. It takes a lot more than just six feet apart for people with aphasia who can’t communicate at any distance. It is a different kind of isolation than the typical COVID “social distancing” kind.

That is the crux of the matter. PWA need to practice communicating in the face of stumbling, halting, disconcerting, and embarrassing utterances that many listeners might run from.

PWA have to practice reading, writing and speaking daily while still practicing social distancing. Although people in the COVID

world have become somewhat isolated, it is completely different than the social isolation that comes as a result of aphasia.

PWA have *lost* their ability to read, write and speak well by *accident* while people in the COVID Age have to *volunteer* to remain apart in order to stop the virus.

Ironically, in the new world of “social distancing” (and loss of social interaction) a person with aphasia has to communicate and interact *more*, not less.

If there is a silver lining to the virus for people with aphasia, Zoom is it. *The World is Flat* by Tom Friedman talked about the forces that “flattened the world” with communication technology.

Zoom has made the world even “flatter” and has leveled the communication field for people with aphasia who have become the professionals of social distancing in the COVID Age.

Signed: *The Johnny Appleseed of Aphasia Awareness*

Squire, L.R (Edited). *The History of Neuroscience in Autobiography, Volume 5*, Mark R. Rosenzweig. The Society for Neuroscience, Elsevier Academic Press, Burlington, MA (2006) pp. 613-654.