

# Communication Advice from Experts: Individuals with Aphasia

by Gary Milner



ordering food in a restaurant, try pointing to a menu item if you cannot say it. Don't be afraid to ask for help!

**5. Be polite.** Remember, you are the one with the physical challenge, not them! Always be polite! It is not their fault that you had a stroke! Your spouse or significant other may remind you of the situation — for example, when it is appropriate to say “Thank you” or “Please.”

**6. Pay attention.** This will help you make sure that what you say is what you mean. It is a common symptom of aphasia to respond with a “yes” when what you really are trying to say is “no.” To avoid embarrassment, be sure of what you say or you can end up with some strange things!

## TIPS FOR INDEPENDENT COMMUNICATION

**1. Interact with family.** A family's interaction with a person with aphasia is critical. Anytime a person with aphasia is frustrated with their inability to communicate, the stage is set for the frustration to escalate unless there is knowledgeable intervention. The interaction with a family member or close friend or relative is important for them to understand the situation.

**2. Inform conversational partners.** A person with aphasia should reveal their condition to anyone they intend to have an in-depth discussion with. It should be a rehearsed message that concisely explains the aphasia. It should not be too technical or “high-brow.” The terms should be common words or words with definitions.

**3. Provide feedback.** Many clients in our Aphasia Treatment Program have stated that it is helpful to give feedback to communication partners. For example, when Dorene was ordering a sandwich, the person behind the counter was talking too fast. Dorene simply asked her to please slow down. From that point on their communication was a success story instead of an example of frustration.

**4. Use visuals.** For the ladies, when ordering cosmetics or lipstick, bring in the empty tube of the color or style last used. When grocery shopping, bring in the empty can or product wrapper and show the employee the wrapper, and a successful experience will follow. When

**7. Use communication aids.** There are some very good communication aids: a piece of paper with the alphabet on it; pictures of some common activities like mowing the lawn or ordering a cup of coffee. However, the most effective of these is a business card handout (see below) developed by Dr. Wilson Talley, who was once a client at the Aphasia Treatment Program. Depending on the amount of speech loss, the card can help a person communicate when speech fails. It gives the cardholder's name, emergency contacts, physician's name and telephone number, and this message:

*“Aphasia is an impairment of the ability to sometimes use or comprehend word, usually acquired as a result of a stroke. Depending on where and to what extent the brain is injured, each person with aphasia has a unique set of language disabilities. I am not drunk or mentally unstable! It is NOT a loss of intelligence!”*

This card is very helpful if you get pulled over while driving.

Stroke survivors with aphasia often struggle to be understood. Some simple, clever strategies can help them communicate effectively.

## MANAGING INTERACTIONS WITH STRANGERS

A good start for communicating with strangers is to make them aware of your disability. After this, they may overreact and become too slow. This is easier to handle than being too fast. Try to maintain your dignity.

Other ideas include:

- Use an answering machine to answer the phone, then don't reply to the message until you've had time to decide what you will say.
- People may think you are "mentally challenged." If they do, show them your aphasia business card so they will learn about aphasia.
- When handling rude people while shopping, disengage — it's their problem.

*Alert a store manager about your problem and speak up for aphasia.*

## LIFE WITH APHASIA

Rudy, a stroke survivor since May 2003, notices that he is reading slower. His family tells him that he is more impatient. Friends from prior to the stroke left because of his changed personal habits not matching theirs.

Kerry, a stroke survivor for 10 years, is still severely affected as a result of the stroke. She, too, has lost friends for the same reasons as Rudy. Her speech is still difficult, and she has a difficult time walking and needs help showering. She cannot read or write without assistance. There has been improvement, but only slight. When Kerry goes to Taco Bell, she uses a combination of aids and either points or says, "Two taco specials."

*Members of the ATP include Latif, Bob, Larry and Dorene.*



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Dorene had a subarachnoid hemorrhage that resulted in a total loss of speech five years ago. She also needed help showering. Her short-term memory loss is gradually improving. She is unable to drive. Her family notices a change in her personality. She is improving, gradually.

John owns a bed-and-breakfast in Point Reyes, Calif., and is able to take reservations on the phone, including how many rooms and dates. His speech is not perfect, but it is effective. When in restaurants he points to the item on the menu. He can also say that he wants eggs over easy, hash browns and wheat toast. John asked for two tickets for a movie without aphasia interfering. It is hard to construct a full sentence, but communication is successful when three words or less are required.

It is important to remember that the person you are talking to is not a mind reader! Very often we fall into that trap.

For more information on aphasia, or to find a certified speech-language pathologist in your area, call ASHA's HELPLINE at 1-800-638-8255, e-mail ASHA at [stroke@asha.org](mailto:stroke@asha.org) or visit ASHA on the Web at [www.asha.org](http://www.asha.org) 

*Editor's Note:* Gary Milner participates in the Aphasia Treatment Program (ATP) at California State University, East Bay. He wrote this article for an assignment in that program. The other ATP participants helped in its development. Gary's aphasia is the result of a brain tumor.



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