

APHASIA ROUNDTABLES

SUPPORTING MENTAL HEALTH AND APHASIA SERVICES IN MICHIGAN

Katie A. Strong, Ph.D, Becca Johnson,
Kait Moses, M.A., Robin Pollens, M.S.
MSHA Conference, East Lansing MI, March 24, 2022

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Speaker Disclosures

Katie Strong – *Financial*– Salary from Central Michigan University, Grant funding from Project BRIDGE, Complementary conference registration. *Nonfinancial* – facilitator Lansing Area Aphasia Support Group, Aphasia Access Affiliate, Virtual Connections for Aphasia Volunteer.

Becca Johnson - *Financial* – Conference registration paid by Project BRIDGE. *Nonfinancial* – Aphasia advocate, Lansing Area Aphasia Support Group member.

Kait Moses - *Financial* – Salary University of Michigan Aphasia Program, Conference and lodging accommodations paid for by Project BRIDGE. *Nonfinancial* – Aphasia Access Affiliate.

Robin Pollens -*Financial disclosures* – Salary Western Michigan University, Conference and lodging accommodations paid for by Project BRIDGE. *Nonfinancial* – Aphasia Access Affiliate.

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Learning Outcomes

1. List 3 programs within Michigan providing specialized aphasia services
2. Identify resources for local groups within Michigan and other online resources for individuals impacted by aphasia
3. Participate in collaborative brainstorm on identifying further needs or plans with particular emphasis on mental health services for people living with aphasia

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History of Aphasia Roundtables at MSHA

2017 – Strong and Glista hosted a discussion at MSHA to begin to share resources

2017 questions that we posed for discussion



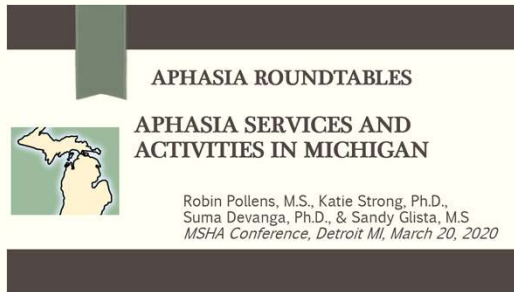
Questions????

- | | |
|---|--|
| <ul style="list-style-type: none"> • In Michigan, what do people with aphasia want? • What are the needs of people with aphasia in your town? People with aphasia whom you serve? • Do caregivers and family members of people with aphasia have unmet needs? • What resources are available to caregivers and family members? • Will collaboration across the state improve access and opportunities for people with aphasia? | <ul style="list-style-type: none"> • How can people with aphasia be linked to innovative opportunities? • Can access to communication and communication opportunities increase? • What barriers exist to communication access for people with aphasia who live in Michigan? • Can successful programs used in other states and communities be replicated in our state and our communities? • Can client choice become a viable alternative? |
|---|--|

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History of Aphasia Roundtables at MSHA

2020 – Pollens, Devanga, Strong, and Glista planned to continue the discussion



- Conference canceled due to pandemic

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Bringing us to
today...



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AGENDA



Question:

Are there actions we can take individually and/or collectively to improve opportunities for greater life participation for people with aphasia and their families in our communities and in our state?

Stating the problem



Surveying services for people with aphasia in Michigan

Providing resources to support program planning



Visioning in our own communities



Visioning in Michigan

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Questions prompting this presentation



My client with aphasia needs mental health support. Do you know any providers?

My husband has PPA. Do you know where we should go to get help?

My aunt speaks Arabic and has aphasia. Is there someone who can help her?

This patient's insurance allows a very limited number of visits. How can he get more therapy?



"Divorce"

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What do people with aphasia want?

Worrall et al. (2011)

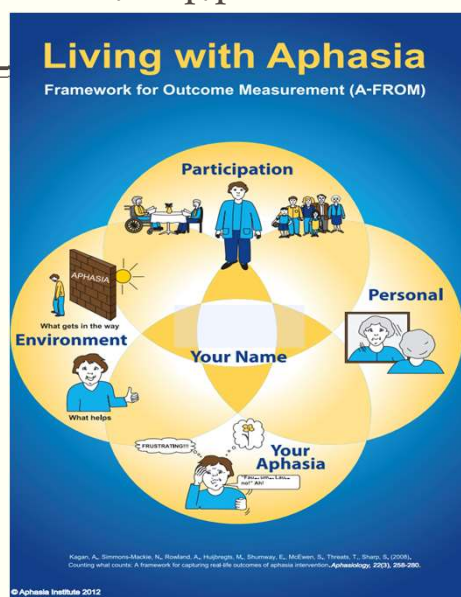
to return to their pre-stroke life and to communicate not only their basic needs but also their opinions

- more **speech therapy**;
- **information** about aphasia, stroke, & **available services**;
- dignity and **respect**;
- **engagement** in social, leisure, and work activities;
- to **help others**;
- greater **autonomy**.

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<https://www.aphasia.ca/shop/personal-a-from/>



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Bridges to the Community (Pollens & Glista, 2006)



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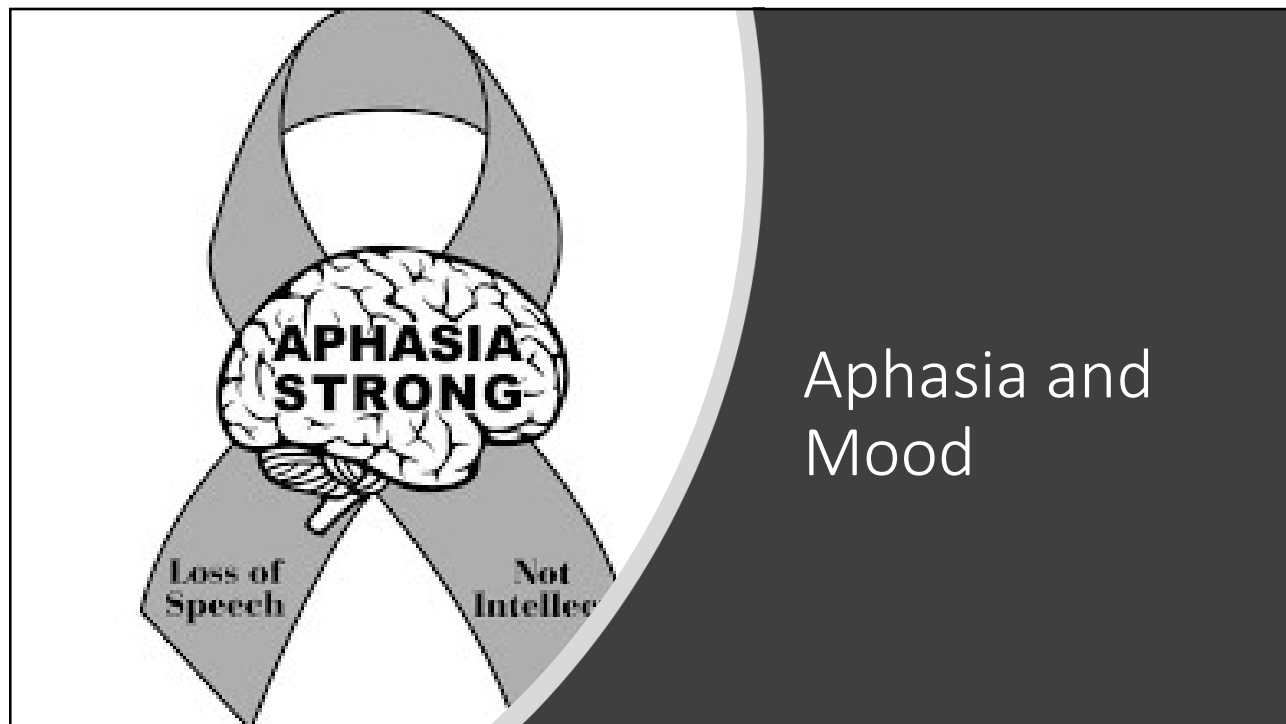
Recommendations: Call to Action (Simmons-Mackie, 2018)

1. Launch a strategic program to build **knowledge and awareness of aphasia**
2. Improve **services for family members or caregivers**.
3. Improve **communication access in health care** and the wider community.
4. Connect across organizations to **identify *best available resources*** suitable for aphasia.
5. Promote inter-professional programs designed to **prevent social isolation**
6. Improve **services for people with aphasia** (including attention to **depression**).

[Podcast link](#)

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Stroke

- Stroke is the fifth leading cause of death in the United States and the leading cause of serious long-term disability.
- Every year, more than 795,000 people in the United States have a stroke.
- Stroke is the most common cause of aphasia.
- About 1/3 of strokes result in aphasia.

(American Heart Association & National Aphasia Association)



American Stroke Association
Advancing stroke research and care
Together to End Stroke®

SPOT A STROKE™

F.A.S.T.



FACE Drooping



ARM Weakness



SPEECH Difficulty



TIME to Call 911

Learn more at stroke.org

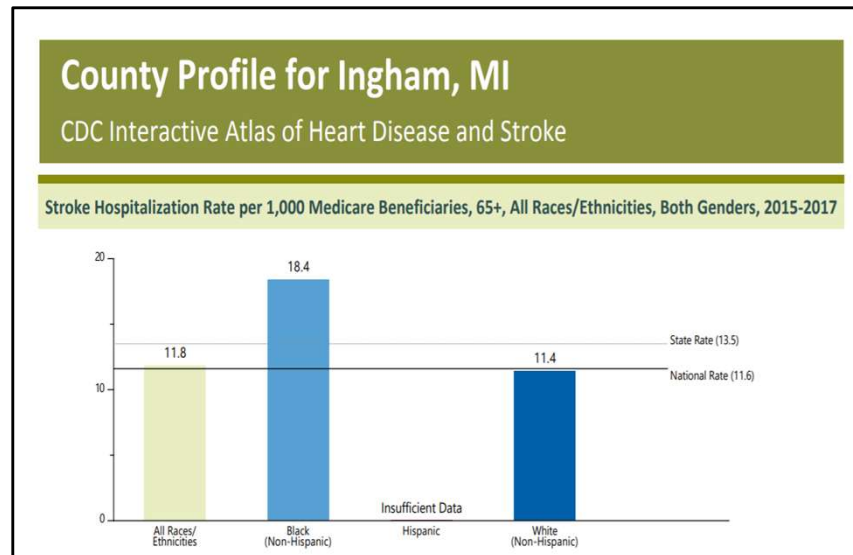
Copyright 2020 American Heart Association, Inc. All rights reserved. American Heart Association is a registered trademark of the AHA. All other trademarks are the property of their respective owners.

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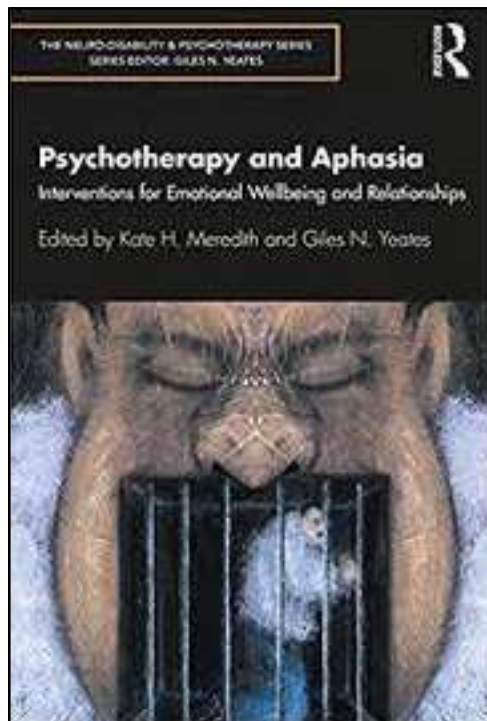
Stroke in Ingham County

- In 2015-2017, approximately 11,800 people in Ingham County were hospitalized from a stroke.
- Meaning that about 4,000 people acquired aphasia.

Centers for Disease Control and Prevention
<https://nccd.cdc.gov/DHDSPAtlas/?state=County>



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Aphasia impacts mood and causes depression.

- 1/3 of adults with aphasia report significant depression
- Depression can increase over time
 - 3 months after stroke 11% report depression
 - 12 months after stroke 33% report depression
- Emotional problems often persist over time

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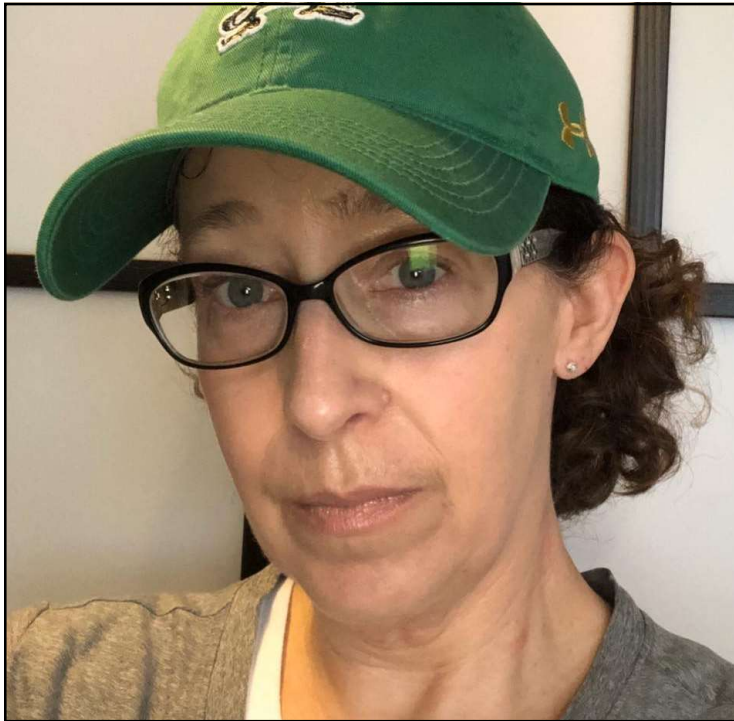
The bottom line is
depression
is underdiagnosed
in
people with aphasia

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Aphasia
affects
more than
the person
who has it.

- Family members, friends, and others close to people with aphasia also struggle with changes in mood and depression due to
 - Loss
 - Changes in roles
 - Stress of caregiving

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Why this is
important to
me

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Before my stroke

- I had ADHD (attention deficit hyperactive disorder).
- I took medication (Celexa) for anxiety.
- I went to therapy to talk about me and my emotional health.

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After my stroke

- I have aphasia.
- I still have ADHD.
- I still have anxiety.
- I have depression.
- I am NOT taking any medication for my ADHD or anxiety but do take medication for seizures and stroke.
- I am NOT talking to anyone about my emotional health.
- I want to see a counselor, but my aphasia gets in the way.

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Let's talk:
Does any of
this
resonate
with you?

What is **your** experience?

Did you ever talk to a counselor
before your stroke/ aphasia?

Have you ever wanted to talk to a
counselor **after** your stroke/
aphasia?

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Different ways of managing stress

- Talk (psychotherapy)
 - Psychology
 - Social Work
 - Psychiatry
- Medicine
- Alternative methods
 - Massage
 - Acupuncture
 - Support groups
 - Etc.

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How do mental health providers feel about aphasia and mental health services?

AJSLP

Research Article

How Do You Do Talk Therapy With Someone Who Can't Talk? Perspectives From Mental Health Providers on Delivering Services to Individuals With Aphasia

Katie A. Strong^a and Jenna Randolph^{a,b}

Purpose: Aphasia is correlated with depression and anxiety, and it has a negative impact on quality of life. Aphasia is also frequently misunderstood among mental health care providers. The aim of this study was to explore the experiences of mental health providers who provide services to people living with aphasia.

Method: Interpretative phenomenological analysis was used to analyze interviews of six mental health providers who had some experience in providing services to people with aphasia.

Results: Three main themes among mental health care providers' experiences providing services to people with aphasia were identified: barriers, interdisciplinary collaboration, and therapy looks different. Subthemes associated with barriers included insufficient training and knowledge of

aphasia, the stigma of receiving mental health services, and accessibility to services. Subthemes related to interdisciplinary collaboration included referrals, knowledge and awareness, and strategies and tools. Subthemes supporting therapy looks different included a new approach to therapy and challenges.

Conclusions: Mental health providers' experiences reveal the need for an action-oriented approach to overcome barriers, a nontraditional approach to talk therapy for people with aphasia, and increased collaboration with speech-language pathologists (SLPs). Future research should explore expanding the collaboration between SLPs and mental health providers to increase shared knowledge and skills in issues related to reducing depression and anxiety to support the well-being of people with aphasia.

Figure 1. Themes and subthemes from interpretative phenomenological analysis.

Barriers	Interdisciplinary Collaboration	Therapy Looks Different
<ul style="list-style-type: none"> • Training • Stigma • Accessibility to services 	<ul style="list-style-type: none"> • Referrals • Knowledge and awareness • Strategies and tools 	<ul style="list-style-type: none"> • New approach • Challenges

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Programs Emerging from Around the World


United Kingdom





- SOFIA Project led by Dr. Sarah Northcott – Solution Focused Brief Therapy
- <https://blogs.city.ac.uk/sofia/results/>
- SUPERB Trial – Dr. Katarina Hilari - Adjustment with aphasia after stroke - Peer befriending <https://www.city.ac.uk/news-and-events/news/2021/03/peer-befriending-may-help-people-with-aphasia>

Australia

- Aphasia ASK Project led by Dr. Brooke Ryan
- <https://www.latrobe.edu.au/research/centres/health/aphasia/research/optimising>

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Brent Archer
Bowling Green State
University

Natalie Douglas
Central Michigan
University

Jennie Acois
Lamar University


Katie Strong
Central Michigan
University

Research Team



Friendship

Research project about friendship in aphasia.



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We feel there is a gap in services in Michigan for people with aphasia accessing mental health services.

What can we do about this?

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Starts with today's conversation

- Building a team
- Project BRIDGE – stakeholders
 - People with aphasia
 - Care partners
 - Speech-language pathologists
 - Mental health providers
 - Primary care physicians
 - Researchers
- www.projectbridge.online



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If you are
interested in
continuing
the
conversation

- We're starting a team to address the gap of mental health services for people with aphasia in Michigan.
- Contact Katie and Becca ston4ka@cmich.edu

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SURVEY ACCESS AND SUPPORT FOR PEOPLE WITH APHASIA IN MICHIGAN

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Transitions Across the Continuum of Care



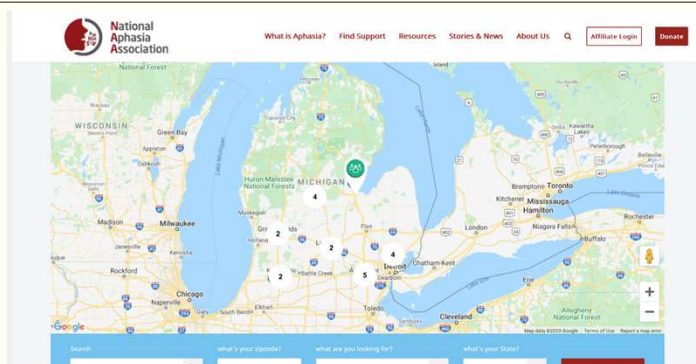
- What do aphasia services look like in Michigan across the continuum of care?
- How does a person with aphasia navigate transitions between different venues of care?

(Simmons-Mackie,
2018, *Aphasia in
North America*, p. 20)

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National Aphasia Association Michigan Affiliates/2019



22 total listings

- 6 emails undeliverable
 - 2 no responses
 - 2 people listed twice
- 1 person mentioned PPA
- 2 required multiple phone calls to reach the correct person
 - 13 cities: Alma, Ann Arbor, Bay City, Brownstone, East Lansing, Grand Rapids, Harrison Township, Mt. Pleasant, Kalamazoo, Royal Oak, Sterling Heights, W. Bloomfield, Wyoming

MSHA 2020 Aphasia Services in Michigan, Pollens, Strong, Devanga, Glista

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Activity One

Introduce yourself

What services or activities are available for people with aphasia and their families in your facility, community, or university?

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**WHAT RESOURCES CAN SUPPORT
PROGRAM PLANNING?**



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Some resources for planning services for people living with aphasia

- Needs assessment
 - Surveys
 - Interviews / Focus Groups
 - Products
- Professional Aphasia Associations
- Aphasia Support Groups
- Networks of aphasia services (state-level models)
- Research



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Needs Assessment: Survey examples

- Survey SLPs about their community aphasia groups

Rose M. & Attard M. C. (2015). Practices and challenges in community aphasia groups in Australia: Results of a national survey. *International Journal of Speech-Language Pathology*, 17, 241–251. Survey is linked here. [iasl_a_1010582_sm2282.zip](#)

Do you currently offer community aphasia group services for people with aphasia?

IF YOU ANSWERED "NO", COULD YOU TELL US WHY YOU DO NOT PROVIDE THIS SERVICE? Providing detail will help us understand some of the possible challenges/restrictions you may be facing, and the nature of your services. After you provide your answer there are no further questions for you in this survey. Thank you for your vital contribution.

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Needs Assessment: Interviews and Focus Groups

- Ask all **stakeholders** about issues personal to them

Morris, K., Ferguson, A., & Worrall, L. (2014) A qualitative study of legal and social justice needs for people with aphasia, *International Journal of Speech-Language Pathology*, 16(6), 541-551. DOI: 10.3109/17549507.2013.855260

Health and financial and consumer situations were most frequently identified in the data. Additionally, there were a number of situations found specifically relating to people with aphasia involving their signatures and credit card use. Instances of discrimination and abuse were also identified, and, although infrequent, these issues point to the profound impact of aphasia on the ability to complain and, hence, to ensure rights to care are upheld.

MSHA 2020 Aphasia Services in Michigan, Pollens, Strong, Devanga, Glista

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Needs Assessment: Communication

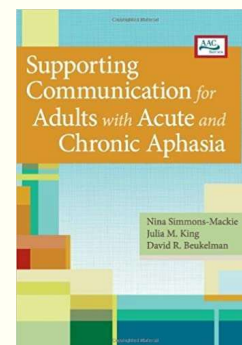
WHAT WOULD YOU LIKE TO TALK ABOUT DURING CONVERSATIONS?

- ☐ Funny stories about your children
- ☐ Your adventures as a young child/growing up
- ☐ Dating and getting married
- ☐ Being in the military
- ☐ Your worst jobs
- ☐ Your most important job/career
- ☐ Moving or traveling
- ☐ Hobbies or unique interests
- ☐ Family history/ancestry/genealogy
- ☐ Local events
- ☐ Current events
- ☐ Sports
- ☐ Politics/the economy/the government
- ☐ Weather
- ☐ Favorite meals/restaurants
- ☐ My house/home town/things to fix
- ☐ My stroke and/or other medical issues

List: _____

APHASIA NEEDS ASSESSMENT

(©) 1997, revised 2006, Garrett, K & Beukelman, D.



Simmons-Mackie, N., King, J., Beukelman, D. (2013). *Supporting Communication for Adults with Acute and Chronic Aphasia*. Baltimore, MD: Paul H. Brookes.

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Example: WMU ACE Program needs assessment for people with aphasia and family members (Glista & Pollens, 2003)

Western Michigan University
Charles VanRiper Language Speech and Hearing Clinic
1000 Oakland Drive
Kalamazoo, Michigan 49008

To: People with Aphasia, their family members, and their therapists
From: Sandra Glista, M.S., CCC-SLP, Clinical Supervisor
Date: March 31, 2003

Please tell us your opinion about these activities for people with aphasia. Your ideas are important to our clinic and training program.

1. I would like to join a book club.	YES	NO
2. I would like to use email.	YES	NO
3. I would like to take a computer class.	YES	NO
4. I would like to learn to use the Internet.	YES	NO
5. I would like to play games on the computer.	YES	NO
6. I would like to do speech therapy exercises on the computer.	YES	NO
7. I would like to join a caregiver aphasia support group for families.	YES	NO
8. I would like to join an art class.	YES	NO
9. I would like to join a physical education class for fun.	YES	NO
10. I would like to attend an aphasia group 1 2 3 4 5 times per week.	YES	NO
11. I would like to come to aphasia group for 1 2 3 4 5 hours per day.	YES	NO
12. I would like my family member to be in therapy with me.	YES	NO
13. I would like to participate in field trips/outings.	YES	NO
14. I would like a student volunteer to visit and talk with me.	YES	NO
15. I would like to talk to community groups about living with aphasia.	YES	NO
16. I want to teach others about communicating with people with aphasia.	YES	NO
17. I would like to work on writing.	YES	NO
18. I would like to raise money for aphasia education (bake sales/walks).	YES	NO
19. I would like to work on the annual National Aphasia Education Month in June.	YES	NO
20. I would like to volunteer and work in my community or church.	YES	NO
21. I would like to organize and conduct workshops for people with aphasia and their families.	YES	NO
22. I would like to attend workshops for people with aphasia.	YES	NO
23. I would like to attend workshops for families of people with aphasia.	YES	NO
24. I would like to go on field trips with other people who have aphasia.	YES	NO

Other Suggestions?

Person completing this form:
☐ Person with aphasia
☐ Family Member
☐ Speech Therapist

- Most preferred activity: **Field Trips and outings** with people with aphasia
- Attend an **aphasia group**, twice a week, for 2 hours each day.
- Physical education class
- Student **volunteers visiting**
- Working on **writing skills**
- Fund-raising for aphasia education
- Attending workshops** for people with aphasia

* *Implemented*

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Needs Assessment: Focus Group

Aphasia Communication Enhancement (ACE) Program WMU 2019

What else could be helpful for people with aphasia in Michigan?

Family Members (TPO 9 months to 17 years); 6 counties

- Educate other Professionals about Aphasia: eye doctor, bank, police, PT, OT
- "I certainly wish more restaurants had picture menus"*
- Inform others about this type of program (ACE)
- Learn about durable power of attorney, etc.

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The Seven Habits of Highly Effective Aphasia Therapists as reported by people living aphasia

- *Prioritize relationships*
- *Begin with the end in mind,*
- *Look behind the mask*

Give them a voice

Worrall, L. (2019) The seven habits of highly effective aphasia therapists: The perspective of people living with aphasia. *International Journal of Speech-Language Pathology*, 21(5), p. 445

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“OUTCOMES”

<https://pubmed.ncbi.nlm.nih.gov/30303810/>

A core outcome set for aphasia treatment research:

The ROMA consensus statement

In addition to Language

“Satisfaction and Impact of Treatment”

*Devanga, S. R., Pollens, R., Koss-Ryan, M., Nagler, E., & Ruffini, C. (2022).
Measuring patient-reported satisfaction/impact of treatment and care-partners’
perceptions of a university aphasia clinic (will present at IARC in June).*

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WHAT WOULD YOU WANT TO BE ACHIEVED BY 2030 FOR PEOPLE WITH APHASIA?



Tweets from the Lansing Area Aphasia Support Group



The screenshot shows three tweets. The first is from Emeritus Professor Linda Worrall (@aphasiologist1) dated Jan 19, asking for a common vision for 2030. The second and third are from Dr. Katie Strong (@KatieStrongSLP) dated Jan 22, sharing thoughts from the Lansing Area Aphasia Support Group. The first thought is about first responders and law enforcement. The second thought is about equitable health care and identifying aphasia as a treatable chronic health issue.

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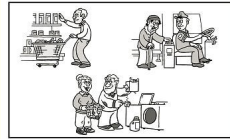
Goal operationalized: Aphasia Education and Advocacy Team Trained all 200 Ingham County Sheriff's Employees in 2021

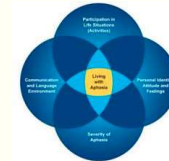
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Resources: Participation Needs Assessment

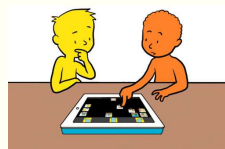
LIV Cards



Assessment for Living with Aphasia



Talking Mats



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Resources: Beginning a Support Group



**American
Stroke
Association.**
A division of the
American Heart Association.

**Stroke Comeback
Center.**
Opening the door to a brighter tomorrow
Home

- [ASA Successful Stroke Support Groups](#)
- [Support Group Leader Resources](#)
- [ASA Register your Stroke Support Group](#)
- [Groups that work. Stroke Comeback Center](#)

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Stroke Support Group Finder

<https://www.stroke.org/en/stroke-support-group-finder>



Find a Stroke Support Group Nearby

All fields are required.

Zip Code

48823

Radius

50 Miles



Search

If your initial search does not pull up any groups, try increasing your mile radius.



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Resources: Conducting telepractice groups

SIG 18 Telepractice

Detailed report of small telepractice aphasia group including group plan, management, and outcome data.

Walker, J., Price, K., & Watson, J. (2018). Promoting Social Connections in a Synchronous Telepractice, Aphasia Communication Group. *Perspectives* (January) , American Speech-Language-Hearing Association.
<https://doi.org/10.1044/persp3.SIG18.32>

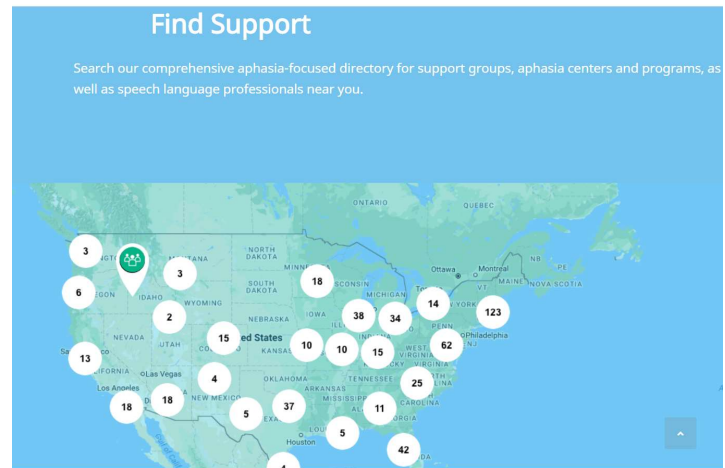
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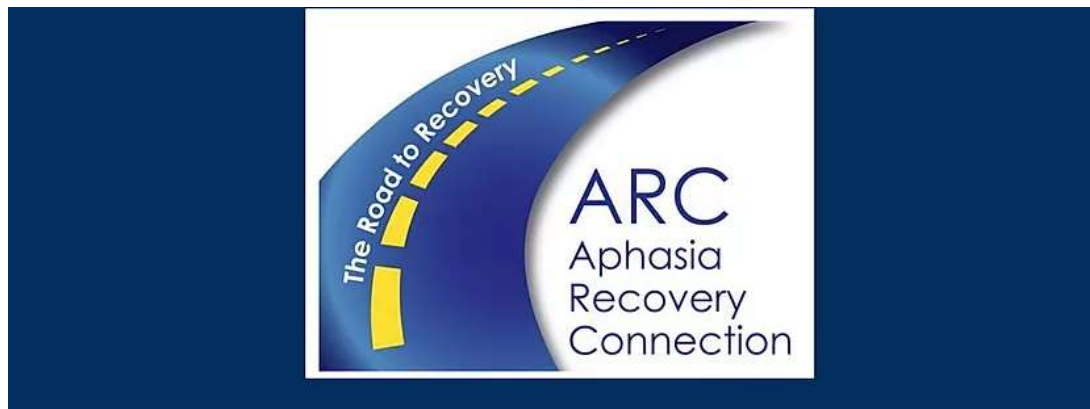
Aphasia Support Groups



- www.aphasia.org
- Support Group Finder
- Also a place where existing groups can register their group for others to find.
- Professionals can become affiliates and list information about their services



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Online Aphasia Communities

<https://www.aphasiarecoveryconnection.org/>

- 10,000+ members in ARC
- Group members can:
 - Meet others with aphasia and their caregivers & families
 - Help new group friends stay in touch
 - Learn the latest information about aphasia
 - Help each other through difficult times

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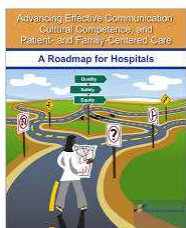
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Weekly offerings
<https://www.aphasia.com/virtual-connections-info/>

VIRTUAL CONNECTIONS		MARCH 14-20, 2022				
Aphasia Recovery Connection & Lingraphica		ALL TIMES ARE IN THE EASTERN TIME ZONE				
MON-14	TUES-15	WED-16	THURS-17	FRI-18	SAT-19	SUN-20
11 AM OPEN MIC CAFE 	10:30 AM A WALK IN THE PARK  12 PM APHASIA MASTERS 10+ YEARS 	11 AM LINGRAPHICA DEVICE USERS  12 PM MUSIC WITH KIERSTEN  4 PM MOVIN' N GROOVIN' TO THE BEAT 	10 AM GET TECH SAVVY!  12 PM SPEAKING POETRY  1:30 PM YOGA AND BREATHING 	11 AM THINK POSITIVE  1 PM APHASIA BOOK CLUB 101  4 PM MEMBER SPOTLIGHT: TERRI 	11:30 AM MINDFULNESS & MEDITATION 	NO SESSIONS! 

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Resources: Professional Associations



[Road map link](#)

Resources for planning and program development

- Aphasia-Friendly Forms

[View Samples and Log In](#)



- Aphasia Group Activities

[View Samples and Log In](#)



- Aphasia Conversations Podcasts

[Listen and Learn](#)



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Resources: Networks of Aphasia Services (State-level models)



[Triangle Aphasia Project](#)

North Carolina

Hub & Spoke model



Minnesota Connect **Aphasia Now**

<https://mncan.org/>

& [Julia Halvorson podcast](#)

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Resources: Aphasia and PPA Treatment Research at Western Michigan University

Neurogenic Communication Intervention Lab

- *Bridging the clinical-functional gap in managing acquired neurogenic communication disorders*
- Research on interventions that help individuals with aphasia and other neurogenic communication disorders **to communicate in everyday life.**
- ACE Program is analyzing **outcome measures for university-based aphasia services.**



Individuals and families with aphasia, TBI or PPA may contact
Suma Devanga, PhD suma.devanga@wmich.edu

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Resources: University of Michigan Aphasia Program (UMAP)

Intensive Comprehensive Aphasia Program (ICAP)

- Providing intensive therapy, focusing on re-engagement in life and care partner programming for families living with aphasia.
- Bonding & peer support are a huge benefit of participating in an ICAP
- Interdisciplinary team approach (SLPs, Neuropsychologist, Social Worker-led groups)



M
MARY A. RACKHAM INSTITUTE
UNIVERSITY CENTER FOR
LANGUAGE AND LITERACY
UNIVERSITY OF MICHIGAN

More information at www.AphasiaHelp.com or call (734) 764 8440

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Resources: UMAP

Referral Lists for Interdisciplinary Professionals Connecting with the Aphasia Treatment Community

Treating people with aphasia or those who have had a stroke is often a team effort. If you'd like to refer one of your clients or reach a potential referral source, you can start with a broad Google search of "therapists near me." However, we compiled this list of aphasia- and stroke-related professionals to give you a more focused place to begin.

Communication Therapists and Psychologists

- <https://locator.apha.org>
- <https://www.psychologytoday.com/us/therapists>
- <https://www.findtherapist.com>
- <https://www.goodtherapy.org>

Social Workers

- <https://www.helpnet.com/home/BasicSearch.aspx>
- <https://www.psychologytoday.com/us/therapists>
- https://www.researchtherapy.com/directory/first_therapist.asp

Case Managers

- Brain Injury Association search: <https://www.biausa.org/find-bia>
- Certified Case Manager search: <https://comcertification.org/ccm-directory>

Personal Aids or Caregivers

- <https://mexdoor.com/>
- <https://www.care.com/>
- <https://aging.nyborator.nash.org>

Physical and Occupational Therapists

- <http://ndasign-apa.org/PT/OTDirectory/FindAPTDirectory.aspx>
- <https://www.healthgrades.com/physical-therapy-directory>
- <http://www.everest.com>

Music Therapists

- List of Michigan Music Therapists: <http://www.mmtonline.org/about/mmtfind-a-music-therapist>
- American Heart Association Stroke Support Group Finder: <https://www.stroke.org/oneline-supportgroup-finder>

Neuropsychologists

- <https://www.healthgrades.com/neuropsychology-directory>
- <https://thebrain.org/directory/>

Ophthalmologists

- Recreational or Vocational Therapists: <https://secure.aas.org/aasfind-ophthalmologist>
- <https://www.careeroneup.org/localhelp/AmericanJobCenters/find-american-job-centers.aspx>
- <https://www.vetcenter.va.gov/>
- <https://www.alta-online.com/search/custom.asp?id=4824>
- <https://www.healthgrades.com/recreation-therapy-directory>

Call (734) 764-8440 or visit [Aphasiahelp.com](https://aphasiahelp.com) to learn more

[@aphasiahelp](https://www.instagram.com/aphasiahelp) [aphasiahelp](https://www.facebook.com/aphasiahelp) [@UM_Aphasia](https://twitter.com/UM_Aphasia)

<https://mari.umich.edu/wp-content/uploads/UMAP-Resources-Aphasia-Community-and-Treatment-Referrals.pdf>

Aphasia FAQ for Health Services

Help, the person seeking services has aphasia
(an acquired language disorder that impacts his/her ability to communicate).
Please review the information below before provision of services.

Name of person with aphasia (PWA) _____

Will there be someone accompanying the PWA? YES NO

Relationship to the PWA: _____

Has the PWA received similar services before? YES NO

Does the PWA have any physical deficits that may impact services? YES NO

Does the PWA have any visual deficits that may impact services? YES NO

Does the PWA have any hearing deficits that may impact services? YES NO

Does the PWA have difficulty with emotions/personality that may impact services? YES NO

Request to consult with PWA's speech-language pathologist prior to service? YES NO

What is the primary reason for seeking this service? _____

The PWA best expresses himself/herself with a combination of: _____

The PWA best understands communication with a combination of: _____

Additional comments to note: _____

Thank you for reviewing this information. Please contact _____ should you have any further questions.

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Resources: Aphasia & TBI Research at Central Michigan University

'Strong Story Lab

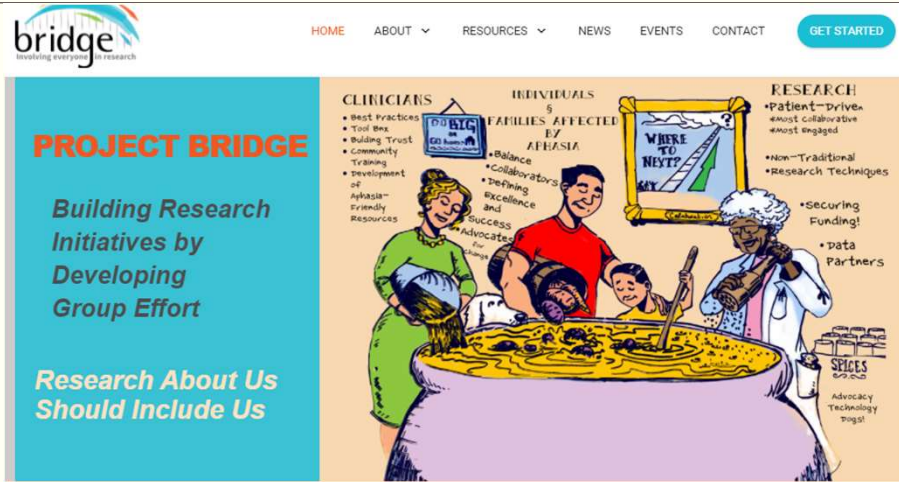
- Aim 1: Explore storytelling methods to create tools for clinicians to use with people who have aphasia & TBI in reconstructing their identity and moving forward with a successful life.
- Aim 2: Create a community to support students in engaging in research centered around LPAA, qualitative research methods, narrative co-construction, and identity.
- Recent projects – Photovoice- using photos to express what life is like living with aphasia
- Currently running– Aphasia This is Our World - Storytelling, to Support Identity with Virtual Connections
- Contact: Katie Strong, Ph.D., CCC-SLP
strong4ka@cmich.edu



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Project BRIDGE (Building Research Initiatives by Developing Group Effort)



<https://www.projectbridge.online/>

If interested in learning more and possibly joining a team – contact Katie Strong sttron4ka@cmich.edu

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VISIONING IN OUR OWN COMMUNITIES

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Activity Two Visioning in our own communities

1. Where are the **gaps** in service delivery for people with aphasia in your community?
2. What are your **ideas** for your community/facility?
3. What is **one small change** you can make to service delivery in your community?

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A graphic of a book cover. The top half is light yellow, and the bottom half is dark brown. A green bookmark is visible on the left side. The title "VISIONING FOR OUR STATE" is written in yellow capital letters on the dark brown background.

VISIONING FOR OUR STATE

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Activity Three Visioning in Our State

Call to Action, Simmons-Mackie, 2018



1. Improve **services** for people with **aphasia** (including attention to depression).
2. Improve **services** for family members or caregivers.
3. Improve **communication access** *in health care* and *in the community*.
4. Connect across organizations to **identify** *best available resources* for aphasia.

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Live Google Document for transcribers?? Say out loud/discussion?

- Improve **services** for people with **aphasia** (including attention to depression).
- Improve **services** for family members or caregivers.
- Connect across organizations to **identify** *best available resources* for aphasia.
- Improve **communication access** *in health care* and *in the community*.
- *OTHER!*

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