Introduction

• Aphasia is a loss of language skills caused by brain damage or dysfunction, commonly after a stroke.1
• Aphasia can impact expressive and/or receptive language abilities, including reading and writing, which may limit an individual's social interactions with friends and family members or participation within the community.2
• These acquired challenges often lead to feelings of loneliness and isolation, ultimately impacting communicative participation and overall quality of life (QOL).2
• Recent studies have generally shown a positive impact of time- and dose-intensive intervention for persons with aphasia (PWA).3

Objective

To investigate changes in QOL in PWA following participation in the UDASI (University of Delaware Aphasia Summer Intensive), a two-week intensive therapy program.

UDASI

Participants were encouraged to become more comfortable expressing their environment and interacting with unfamiliar people. This participant and student clinician worked through STAR health campus to target therapy goals in a functional manner.

Methods

• Nine PWA participated in UDASI, five women and four men with a mean age of 61.3-years-old (range 35-82-years-old) and were an average of 21.0 months post stroke (range 3-35 months)
• Seven of the UDASI participants completed the Assessment for Living with Aphasia (ALA) before and afterwards to measure change in aphasia-related QOL
• Client-participants spanned a wide range of aphasia severity, as measured by the Comprehensive Aphasia Test (CAT) and ASHA Functional Communication Measures (FCM).

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Results

• Group mean differences (pre versus post) were analyzed with the Wilcoxon signed rank test, a non-parametric statistic.
• Participants’ ALA total score improved significantly (Wilcoxon Z = -2.37, p=.018), and this effect was driven by the Participation domain score in particular.
• Overall, these findings suggest that the intensive therapy program improved participants’ aphasia-related QOL.

Discussion & Conclusions

• Results indicate that overall, PWA reported improved QOL following participation in the intensive therapy program.
• Although it is unclear which elements of the program were most beneficial, improvement on the Participation domain score in particular suggest that QOL improvements may stem from immersion in a supportive environment with opportunities to interact with individuals who have experienced similar challenges.
• Client-participants may have also experienced an increase in self-confidence.

Directions for Future Research

While results of this study suggest improved functioning and QOL for PWA who participated in an intensive therapy program, future studies should include a more rigorous methodological design (e.g., include a control group) to increase the confidence of these findings.

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References