Counseling Families Through Life Changes After Stroke

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We have no relevant financial or nonfinancial relationships for disclose.
Learner Objectives

1) Raise awareness of social aspects in recovery for Persons With Aphasia (PWA).

2) Group therapy as a type of counseling process for PWA.

3) When to refer to outside counseling services.
Interpret nonverbal communication to find the intention behind the spoken words. It’s not what we say that counts, rather, our body language and intonation convey the most meaning.

Active listening to allow for the client’s initiation of a response.

We may absorb a lot of our client’s emotions and may be carrying most of the burden for change.
What is Disenfranchised Grief?

- Grief that is not openly acknowledged and processed by PWA, family, & friends.

- Prevalent in PWA, their family and in us. “Why am I feeling this way?”

- Letting go of “shoulds” since grief is complicated, fluctuating and different for each person.

- Some people are more intuitive and need to communicate their loss and others are more instrumental and need to DO something.
We know that people feel many emotions at one time and knowing how one is feeling is often confusing. Asking others how they perceive us helps sometimes to recognize our own grief.
From: Humphrey and Zimpfer (1996) Counselling for Grief and Bereavement, Sage Publications
Expressive Art: Collage
Feelings need to be validated. Describe a behavior and a feeling reflection, rather than ask, “How are you feeling?”

Family may focus on the PWA at the expense of their own recovery and may not recognize that they are experiencing vicarious trauma. They may need counseling yet often are resistant to seeking help.

Getting out of the “expert chair” open doors to stronger relationships. “What it is like to be you now?” “How has your life changed since your stroke?” “What have you learned from this experience?”
Oscillation

Loss Oriented

Not Grieving At All

Restoration Oriented

Broadening and refocusing of clinical practice and research on the consequences of aphasia.

Focus on re-engagement in life, starting with the initial assessment, through intervention, until the client no longer elects communication support.

-ASHA, 2001

Defined: “a consumer-driven service-delivery approach that supports individuals with aphasia and others affected by it in achieving their immediate and longer term life goals.”
Focus on real-life goals of people affected by aphasia

- Strengthening daily participation in activities of choice

- Clinicians consider the dual function of communication—transmitting and receiving messages and establishing social links.
What is evaluated in LPAA

- Assessment of how satisfied client is with life activities, social connections and emotional well-being.

- Our clients are often “stuck” in processing their emotions and need alternative approaches to convey their joys, frustrations, disappointments.....

- How far are we willing to “go there” with our clients and when do we refer to a counselor?
Our Research

- Our question: Does the addition of group therapy to individual therapy make a difference in communication and overall well-being for persons with aphasia (PWA)?

- Random placement in individual therapy only or a combination of group and individual therapy

- Pilot study, small sample size; 6 persons with aphasia and 6 family members. Results: no significant difference.

- Measures pre and post semester, Beck Depression Inventory (client’s assessment) and Communicative Effectiveness Index CETI (family member’s assessment of PWA).
ISU Communication Skills Groups
Family Belief Systems

- When one person changes in the system it affects everyone in the family, a domino effect.

- Family members expect members to respond in a certain way to change; mixed messages, change/don’t change.

- Group therapy provides a place for PWA to practice a new role and learn how to advocate for themselves.
ISU Group Process

1. Social Relevance
2. Acceptance
3. Empowerment
4. Participation/Interest
5. Trust & Expectation
6. Fun
The Result

- Members have hope, power and purpose
- Members are redefining their roles and practice communicating in a safe place
- The group is a micro-family experience
- Members find out about each other as a person first yet are united by aphasia
- PWA learn to appreciate other client’s resilience and life experiences
Group is a microcosm of community

Group is like a family and we give them tools to help them increase participation in that family

- Tools; rating scales, multiple choice questions, true/false questions
  - Member spotlight; tell me about yourself
  - Teach other members a skill and adaptations
  - Increase participation at a level they feel successful (making coffee, time keeper, bring in inspirational quotes, greeters, clean tables)
Our groups become another family that helps PWA feel validated, accepted and appreciated.

We hold members accountable for their actions which offend or diminish other group member’s experiences.

Aphasia is so different that we avoid comparisons of one’s recovery.
Counseling


- Listening for process and themes and the message, the intention behind the words.

- Opportunities for emotional growth even with the loss of words for PWA and their family.

- Expressive art brings out unconscious thoughts and feelings.
Persistent and profound grief that negatively impacts health

Suicidal ideation; if PWA tells you they want to end their life, ask them if they have a plan. Also, tell them you need to tell their family and possibly have them go to the closest ER.

Strained and complicated family dynamics

Personality disorders & mood disorders
Life Participation Can Often Be that Skyline in the Distance
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References