

Aphasia Awareness Training for Emergency Responders: Train the Trainers

Background

Communication is crucial in emergency situations, but aphasia can affect an individual's ability to state their name or understand a firefighter saying, "Follow me." Stressful situations often exacerbate the effects of aphasia. Many stroke and brain injury survivors are already at risk in crisis situations because of their physical impairments; those with aphasia can be rendered almost completely vulnerable.

While emergency service personnel, such as EMTs and firefighters, rarely receive training on aphasia, they are in fact more likely to encounter a person with aphasia than someone with multiple sclerosis, cerebral palsy or muscular dystrophy (Will & Peters, 2004). However, many of them do not know what aphasia is, much less how to communicate with a person with the disorder. Unfortunately, because few first responders are specifically trained to deal with people with aphasia, they may mistake the aphasia for mental illness or other conditions. This project arose out of one such situation. Misunderstandings may arise and efforts to help people with aphasia may be useless – or dangerous.

With seed funding from the Christopher and Dana Reeve Foundation, the NAA created a pilot project to train first responders in the New York metropolitan area.

The project objectives were to educate police, firefighters, and EMTs in NJ, NY, CT about aphasia, so that they can recognize, communicate with, and respond more effectively to, people with aphasia in routine encounters or in emergency situations. A goal was also to have first responders recognize the “Aphasia Awareness symbol/sticker”(Figure 1) which is used by persons with aphasia on their vehicles and homes. To further this end, four objectives were established: 1) Developing an outline for aphasia training workshop and pre- and post- tests to measure effectiveness of training. 2) Compilation of a training template package consisting of aphasia training workshop outline, aphasia training video, and NAA materials. 3) Conducting training for at least 15 targeted first responders with the training averaging about an hour and a half in length. 4) Establishing that at least 85% of workshop participants demonstrate an increased understanding of aphasia.

Methods

A program coordinator was hired who would oversee the training program under the supervision of the NAA Executive Director. For the pilot project, the program coordinator delivered all the training modules. There were 10 training modules delivered between 2008 and 2009. Training modules ranged from 60-120minutes with groups ranging in size from 15-450 attendees. Several outlines for training were developed taking into account differing audiences, time allotments, and depth of interest. For example, training outlines for EMT's, who have medical training, were developed to include more specific information regarding the physiological types and causes of

aphasia, whereas training for police and fire concentrated more on identification and communication techniques. All training modules delivered both started and ended with the Aphasia Quiz (Figure 2) so that we could demonstrate the effectiveness of our short training courses. Evaluation forms (Figure 3) were used to determine satisfaction and knowledge gained from the training as well as to obtain data for research relating to consumer and community needs.

The various PowerPoint training presentations were combined into a training package which included an NAA informational brochure, the Aphasia Awareness symbol/sticker, copies of the Aphasia Identification Card, and the DVD –Aphasia Education for Emergency Personnel developed in 2008 by the Aphasia Advocacy Foundation of New Hampshire and the University of New Hampshire.

Findings

The NAA met and exceeded its target goals for conducted training. 450 trainers for the New York City Police Department (NYPD) were trained in aphasia awareness. They in turn were charged with bringing this training to approximately 25,000 police officers and personnel. The NYPD has incorporated the training into a permanent lesson plan in their command level training program. Training was delivered to 25 chiefs of Middlesex County, New Jersey fire department. A relationship for ongoing training has been established with the Nassau County (NY) Police Training Academy which delivers all training to police, firefighters, and EMT's in the county. Training was delivered to their trainers in February and June 2009 and follow-up meetings were conducted to discuss how aphasia awareness training will become a permanent part of the academy's training curriculum. Training was conducted in Fairfield County Connecticut.

For all trainings, an evaluation form was to be completed, along with the Aphasia Quiz. Post-training the participants were able to answer the questions correctly on the *Aphasia Quiz* and written feedback indicated a substantive understanding of aphasia and methods of communicating with people with aphasia.

420 evaluation forms were completed out of 660 persons trained for an average return rate of 64%. In response to their knowledge of aphasia before the training, only 10% indicated prior knowledge. Having completed the training session, 87% felt they now had good understanding of aphasia and 13% indicated average understanding. When asked if they felt the training has prepared them to encounter people with aphasia and respond appropriately, 82% responded yes, 5% responded no and 13% were unsure. 62% of respondents would like to be updated annually on aphasia. There were two open-ended questions asking for comments and recommendation for improving training as well as future learning needs. An overwhelming number of comments indicated that presentation and speaker were informative and their awareness of aphasia was increased. There were recommendations for incorporating more examples and videos as well as having a person with aphasia participate in the training. Many interesting questions regarding aphasia were received and highlighted additional points to include in future training (Figure 3).

Discussion

As a result of beginning this project, a wider distribution of the aphasia symbol/sticker has occurred and this project is included as part of all NAA educational presentations. There were roadblocks, however, most of the barriers to our objectives had their genesis in the fact that targeted audiences were unfamiliar with aphasia and, therefore, hesitant to follow-up on requests to deliver training. These roadblocks were expected and serve to both highlight and document the very reason the NAA made the grant request to provide training in aphasia to educate first responders.

The response to this training has been overwhelming and the NAA is expanding the program nationally. Training is currently being done in over 20 states. Several articles were published. We are convinced that these training programs impart simple and easily understood material which not only increases the professionalism and effectiveness of first responders but also contributes to the overall safety and well being of persons with aphasia precisely because police, fire and emergency personnel are now equipped to respond and communicate effectively to those with aphasia

What started out as a program specifically focused on first responders has now achieved a more global audience and is highly adaptable. As the training programs expanded, people with aphasia helped train the targeted communities. Incorporation of personal experience and perspectives was encouraged. This added a new dimension to the training and assists the person with aphasia in their rehabilitation. There were many lessons learned being incorporated into future training. Follow up is warranted to determine retention and generalization of knowledge into “real life” interactions and if people with aphasia note increased awareness from first responders. The vision is for the aphasia awareness symbol/sticker to be nationally recognized.

References

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- Liechty, J. & Garber, D. (2010) On a mission to build aphasia awareness: How to enhance emergency response to this language/communication disorder. *EMSWorld*, October 28, 2010. Retrieved from [http://www.emsworld.com/web/online/Education/On-a-Mission-to-Build-Aphasia-Awareness-/5\\$15080](http://www.emsworld.com/web/online/Education/On-a-Mission-to-Build-Aphasia-Awareness-/5$15080)
- Will, M. & Peters, J. (2004). Law enforcement response to persons with aphasia. *The Police Chief*, December 2004, 20-24.

Figures

Figure 1- Aphasia Awareness Symbol/Sticker

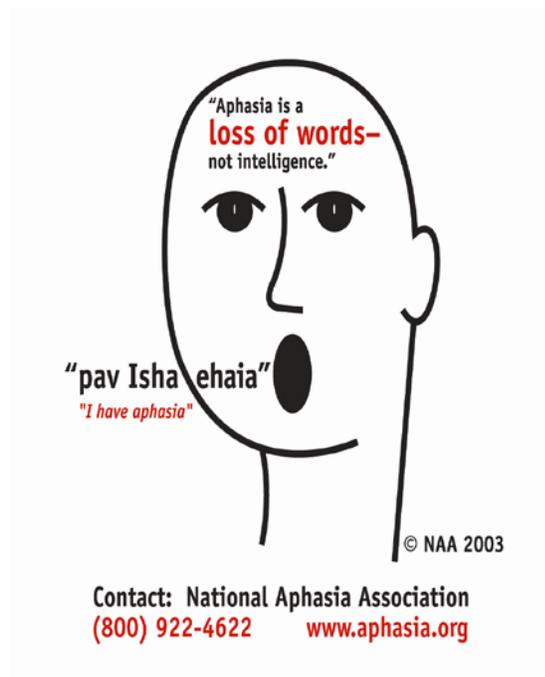


Figure 2-Aphasia Quiz



the aphasia quiz

Do *you* know the facts?

Please check either true (T) or false (F) for each statement.

1. Most people are familiar with aphasia.
 True False
2. Aphasia means a person has difficulty retrieving words for speech and usually has some problems reading, writing and understanding spoken language.
 True False
3. The cause of aphasia is usually due to a heart attack.
 True False
4. If people have aphasia they will always have significant memory loss as well.
 True False
5. Aphasia is more prevalent than Parkinson's Disease or Muscular Dystrophy.
 True False
6. A person with aphasia may have no noticeable physical impairment.
 True False
7. All individuals with aphasia have very similar symptoms of the same approximate severity.
 True False
8. Although most people with aphasia are older than 50 years of age, it is not unusual for younger people to acquire this disability.
 True False
9. Some individuals with aphasia return to work, however, most are forced to retire or change jobs and work in a modified capacity.
 True False
10. Recovery from aphasia is usually complete within six months of treatment.
 True False



Figure 3- Evaluation Form

Based upon 420 surveys completed out of 660 trained- 64% return rate

1. BEFORE THE TRAINING DID YOU KNOW ABOUT APHASIA?

Yes (42) 10% No (378) 90%

2. HAVING COMPLETED THE TRAINING SESSION, DO YOU FEEL YOU NOW UNDERSTAND-WHAT APHASIA IS?

Good (365) 87% Average (55) 13% Poor (0)

3. DO YOU FEEL THE TRAINING HAS PREPARED YOU TO ENCOUNTER PEOPLE WITH APHASIA AND RESPOND APPROPRIATELY?

Yes (344) 82% No (21) 5% Unsure (55) 13%

4. WOULD YOU LIKE TO BE UPDATED ON APHASIA ANNUALLY?

Yes (260) 62% No (84) 20% Unsure (76) 18%

5. IS THERE ANYTHING THAT COULD HAVE BEEN EXPLAINED BETTER OR IN MORE DETAIL DURING THE TRAINING SESSION? DO YOU HAVE ANY RECOMMENDATIONS ON HOW THE TRAINING COULD BE IMPROVED?

(Sample Responses)

- Presentation and speaker very informative
- More videos/examples should be incorporated
- Everyone in public relations should take it
- Should be explained to all new police recruits
- Video was helpful Suggest having a person with aphasia at training
- Have more ID markers for PWA i.e. license
- Have more examples of aphasia; types of aphasia; treatment

- **Helped increase awareness**

6. DO YOU HAVE ANY OTHER COMMENTS, QUESTIONS, OR SUGGESTIONS?

(Sample Responses)

- **Are sign language abilities affected by aphasia?**
- **How do you know if someone is faking aphasia?**
- **Are there medications available?**
- **Are aphasics violent?**
- **How can they still be intelligent?**
- **Is aphasia hereditary?**