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ANALYSIS OF APHASIA LANGUAGE DISORDER IN ADULTS: A PSYCHOLINGUISTIC STUDY.

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Abstract

Aphasia was analyzed in this study due to this topic being one of the theories that encompass language and the brain. The purpose of this study is to define language impairment in adults with specific causes that refer to aphasia. To support this research, the author uses the theory of language impairment by Vasic (2006). The methodology used by the author is descriptive qualitative. The data of this study was analyzed using Vasic's theory of language impairment. In the process of obtaining data, the author chooses YouTube media as a source and the object of this research is an aphasia patient, Michelle, 17 years old. She had a stroke that occurred on February 27, 2011 from a long boarding/snowboarding incident that made her have difficulty using language, she could not speak clearly because of her illness. From the analysis, the author found that Michelle had incomplete comprehension, her fluency was affected and her repetition and naming of things were slightly affected. The author's greatest hope is that this research will enrich readers' knowledge about language disorders, especially aphasia.

Keywords: Language disorders, aphasia, psycholinguistics.

INTRODUCTION

Language as a communication system that enables humans to exchange verbal or symbolic utterances. This definition emphasizes the social function of language and the fact that humans use it to express themselves and to manipulate objects in their environment. Functional theories of grammar explain grammatical structure by its communicative function, and understand the grammatical structure of language as the result of an adaptive process by which grammar is "adjusted" to serve the communicative needs of its users. Another definition sees language as a formal system of signs governed by the rules of grammatical combination to communicate meaning. This definition emphasizes that human language can be described as a closed structural system consisting of rules that connect certain signs with certain meanings.

This definition can also be stated that language is primarily a mental faculty that enables humans to perform linguistic behavior: to learn language and to produce and understand utterances. This definition emphasizes the universality of language for all humans, and emphasizes the biological basis for the human capacity for language as a unique development of the human brain. Proponents of the view that the drive to acquire language is innate in humans argue that this is supported by the fact that all cognitively normal children raised in an environment where language is accessible will acquire language without formal

instruction.

But not all humans can access language due to many factors. There are some people who are unable to understand or formulate language due to damage they have sustained to certain brain regions, called language impairment. Language impairment is a condition where their body and mind are stable, but they have a delay in speaking. Language impairment is one of the communication problems that occur in humans when there is difficulty in expressing language in the oral and written process. One type of language disorder that is of concern to the author in this study is Aphasia. Aphasia is a syndrome of the nervous system that impair language ability. It can occur suddenly after a stroke or head injury, or arise slowly from a growing brain tumor or disease. Aphasia affects a person's ability to express and understand spoken and written language.

LITERATURE REVIEW

1. Language Disorder

Language disorder is a communication disorder in which a person has persistent difficulties in learning and using various forms of language such as spoken, written, or signed. They may struggle to understand the words they hear or see. While they do not have trouble physically making sounds, they may not be able to use language effectively to communicate, American Psychiatric Association. (2013). Asha (1993:190) states that language impairment is a disorder of understanding or using spoken, written and other symbol systems. Symptoms of language impairment first appear in the early developmental period when people begin to figure out and use language. Language learning and use depend on expressive and receptive abilities. Expressive ability refers to verbal signals or gestural cues, while receptive ability refers to the method of receiving and understanding language. Individuals with language disorders have impairments in either their receptive or expressive abilities, or both.

Thereafter, people with this condition lack understanding and production of vocabulary, sentence structure and discourse. As people with language impairment usually have a limited understanding of vocabulary and grammar, they have even a limited capacity to engage in conversation. People with language impairment usually speak with grammatical errors, have a small vocabulary, and may sometimes struggle to find the right word. When engaged in conversation, they may not be able to provide adequate information about the key point they are discussing or tell a coherent story.

The causes of communication disorders have a strong genetic component, and individuals with language disorders are more likely to have family members with a history of language disorders. Language disorders are also strongly associated with other neurodevelopmental disorders, such as specific learning disorders (literacy and numeracy), attention-deficit/hyperactivity disorder, autism spectrum disorder, and developmental coordination disorder. Treatment for language disorders mainly consists of speech and language therapy to improve expressive and receptive language skills. Psychotherapy can also be a helpful tool to manage emotional and behavioral issues that may arise in individuals with language disorders.

2. Aphasia

Aphasia is a language disorder, which affects the production or understanding of speech and the ability to read or write. Aphasia is always caused by an injury to the brain-most often from a stroke, especially in older individuals. But brain injury resulting in aphasia can also arise from head trauma, from brain tumors, or from infections. Lesser

(2014) states that aphasia is a brain injury that disrupts language, how people process and understand language itself.

> "*Aphasia as an acquired language disorder causes deficits in production and comprehension or better to say input and output of verbal messages in individuals with a normal history of language acquisition. Therefore, this problem makes people with aphasia unable to convey messages or information to others clearly and also they cannot receive symbols from others" Vasic (2006).*

Aphasia can be so severe that it makes communication with the patient almost impossible, or it can be very mild. It can affect mainly a single aspect of language use, such as the ability to retrieve the names of objects, or the ability to string words into sentences, or the ability to read. More commonly, however, several aspects of communication are impaired, while some channels remain accessible for limited information exchange. There are six types of aphasia.

a. Anomic aphasia
   Laine & Martin (2006) states that anomic aphasia is a complex disorder affecting theprocess of lexical production.
b. Global aphasia
   Ho (2005) states people with global aphasia are known to have difficulty in comprehending or using an external symbol.
c. Primary progressive aphasia
   Mesulam (2001) mentioned that primary progressive aphasia is focal dementia characterized by an isolated and gradual dissolution of language function.
d. Wernicke's aphasia
   Fridriksson (2014) states that broca's aphasia categorized into neurolinguistics. The disease that damages left hemisphere of brain.
e. Broca's aphasia
   Boatman (2000) states that transcortical sensory aphasia is characterized by impaired auditory comprehension with intact repetition and fluent speech.
f. Transcortical sensory aphasia
   Bastiaanse (2004) states that Wernicke's aphasia is predominantly lexical semantic in nature, although lexical processing is compromised in Broca's aphasia and grammatical errors are regularly observed in Wernicke's aphasia.

3. Psycholinguistics

Psycholinguistics is a combination of language and psychology. Language is called the internal structure of psycholinguistics because it is the core of how linguistics develops. Meanwhile, psychology is referred to as the external structure of the human mind, toughness, behavior, memory, mental processes. Hence, how language is produced such as speech production. Psycholinguistics is a combination of two variables, namely linguistics and psychology. It also focuses on two factors, internal factors (linguistics) speech, words, lexical, phonology, and so on. And external factors (psychology), human behavior. Therefore, the micro aspect discusses language, and the macro aspect discusses language and its relation to external factors such as psychology, sociology and so on.*Cowles (2011) psycholinguistics is the study of the psychological and neurobiological factors that enable humans to acquire, use and understand language. Psycholinguistics is essentially concerned with the processing and representation of knowledge that underlies the ability to use language and how they relate to other aspects of human cognition.*

Psycholinguistics or psychology of language is the study of the interrelationship between linguistic factors and psychological aspects. The field is concerned with the psychological and neurobiological factors that enable humans to acquire, use, understand and produce language. The discipline is primarily concerned with the mechanisms by which language is processed and represented in the mind and brain.

Psycholinguistics is concerned with the cognitive abilities and processes required for the grammatical forms of language to be produced from the mental grammar and lexicon. It is also concerned with the perception of these constructions by listeners.

RESEARCH QUESTION

1. What are the difficulties faced by Michelle (Aphasia patient) during Aphasia speech therapy?
2. What are the different types of aphasia?

RESEARCH METHODS

The approach used in this research is qualitative. According to Miles and Huberman (1984), "Qualitative data is usually in the form of words rather than numbers". In addition, the author uses qualitative research because the data obtained by the author is described and explained in the form of words. Data presented in the form of words or sentences without numerical data.

RESEARCH INSTRUMENTS

The author analyzes one YouTube video that has content related to aphasia. The video was uploaded by Michelle Nguyen. The video shows an aphasia sufferer, Michelle, 17 years old, who receives speech therapy. From the video, it can be seen that the cause of aphasia that occurred to Michelle was due to a stroke. The stroke occurred on February 27, 2011 due to a long boarding/snowboarding incident.

FINDINGS AND DISCUSSION

There is a video that the author uses to collect data. The video was uploaded on Michelle Nguyen's YouTube account. Here below the author will show the data found in the video entitled "*Aphasia Speech Therapy (Patient-Michelle, 17 years old) April '11*".

Aphasia is a language disorder, which affects the production or understanding of speech and the ability to read or write. The following below is data that shows the difficulties faced by Michelle (an aphasia patient).

Data 1

Michelle had an opening conversation with the doctor.
At the 00.00.30 second, the doctor asked Michelle to count from 1 to 10
And at the 00.00.34 second Michelle started counting. At 00.00.42 when mentioning the number (8), Michelle could not pronounce it clearly. She spelled the number eight as E (pronounced like the Indonesian alphabet).
During naming a number, she had trouble with only one number, eight; for the rest of the numbers she was able to pronounce them well.

Data 2

At the 00.00.05 second mark, the doctor asks Michelle Doctor : Do you know the date today, Michelle?
At the 00.00.07 second Michelle answers the question
First, he confirmed today's date by asking the doctor, "This one?"
When answering the date, he stuttered at the beginning, then repeated himself at the second 00.00.15. She mentioned that the date of the day was 23rd then immediately changed the date from 23rd to 26th . He mentioned the wrong date because the doctor immediately made the correct date by saying 25th .
Michelle found it difficult to identify the date. It took her quite a long time to finally finish mentioning the date although she still got it wrong.

Data 3

At the 00.00.25 second mark, the doctor asks the second question Doctor: Do you know the day of the week?
At second 00.00.26 Michelle repeats the doctor's question by omitting "Do you" to "the day the week". When mentioning "the day the week" it can be heard that she cannot repeat the word clearly, she tends to speak a little fast but with unclear sentences.

Data 4

At the 00.00.44 second mark the doctor asks another question Doctor: Can you tell me the day of the week, starting from Sunday?
Michelle first successfully mentioned the day of the week. But then, she found it difficult to say "Saturday" at the 00.00.56 second mark. She dropped the word "day" in the word Saturday to "Satur" and smiled because she knew she couldn't do it.

Data 5

At minute 00.01.00 the doctor asks Michelle to tell him about her favorite movie. During the story, Michelle has some problems that she faces. At minute 00.01.22 Michelle tells the doctor that a girl in her favorite movie has a dog. However, instead of "The girl has a dog" Michelle changes the dog to a boy, becoming "The girl has a boy". This can be recognized because at minute 00.01.28 the doctor clarifies that the boy Michelle is referring to is a dog.

Data 6

In this case Michelle is unable to identify a name. The difficulty found at minute

00.01.25 Michelle barely mentions the dog's name. On the first try she said her dog's name was Toti then on the second try she changed her name to Totio.
Then at minute 00.01.28 the doctor makes a correction about the dog's name, both names mentioned by Michelle are incorrect, the correct name is Toto.

Data 7

At minute 00.01.34 Michelle repeatedly spells the term "Well" because she lacks the vocabulary to continue her story. She uses the expression "Well" to take a moment to remember the vocabulary she needs to use.

Data 8

At minute 00.01.40 Michelle was barely trying to remember terms and ended up naming different terms. At first Michelle stutters and makes a sign by using her hand up to make a sign for the doctor to help her. Next, Michelle mentions "Spayo" and at minute 00.01.43 the doctors understand what Michelle meant and correct the wrong name Michelle mentioned to "Tornado".
In data 6, we can see how Michelle's name identification skills are slightly impaired.

Data 9

At minute 00.02.15 she mentioned "mountain" but then at minute 00.02.21 to 00.02.28 when she needed to mention the word "mountain" she found it difficult to remember the word even though she had mentioned it a few minutes earlier.

Data 10

In the end, at minute 00.02.40, Michelle lost her words and ended her story by saying "I can't explain". From this, it can be seen that Michelle's vocabulary or knowledge of expressions is still limited and needs more practice.

As discussed above, aphasia is a

brain injury that affects the ability to use language, including difficulties for people to process and understand language itself. The following below are the six types of aphasia, namely:

1. Anomic aphasia

Anomic aphasia is a complex disorder that affects the lexical production process.

2. Global aphasia

People with global aphasia are known to have difficulty in understanding or using external symbols.

3. Primary progressive aphasia

Primary progressive aphasia is a focal dementia characterized by the isolated and gradual dissolution of language functions.

4. Wernicke's aphasia

Wernicke's aphasia is predominantly lexical semantic, although lexical processing is compromised in Broca's aphasia and grammatical errors are regularly observed in Wernicke's aphasia.

5. Broca's aphasia

Broca's aphasia is categorized under neurolinguistics. A disease that damages the left hemisphere of the brain.

6. Transcortical sensory aphasia

Transcortical sensory aphasia is characterized by impaired auditory comprehension with intact repetition and fluent speech.

CONCLUSIONS

A language disorder is a communication disorder in which a person has persistent difficulty in learning and using different forms of language, for example: speaking, writing, sign language. Aphasia is a language disorder, which affects the production or understanding of speech and the ability to read or write. Aphasia is always caused by injury to the brain-most often from a stroke, especially in older individuals.

The author analyzes one YouTube video that has content related to aphasia. The video was uploaded by Michelle Nguyen. The video shows an aphasia sufferer, Michelle, 17 years old who gets speech therapy. From the video, it can be concluded that the effects that occur in Michelle, cause understanding - intact, fluency - affected, repetition - slightly affected, naming - slightly affected.

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