Language and communication impairment in bilingual older adults: impact on individuals and families.

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Bilingualism defined

• speak two or more languages – currently or in the past equally proficient or more proficient in one language

• may not speak first language regularly

• specific contexts for each language: home / work / school / community => “hidden” bilingualism

• bilingualism is both prevalent and increasing
Prevalence of Bilingualism

- Australians born overseas: 26.1%
- Speak language other than English at home: 21.5%
- Aged over 65 speaking LOTE at home: > 30%
- Estimated overall bilingualism: at least 26 - 49%

ABS 2006
Prevalence of Bilingualism

- NSW: 20% (1.2 million people) have a disability
  27.9% with a disability are from CALD backgrounds
  (ABS 2006)

- SESLHD: 21% born overseas in non-English speaking country
  24% speak language other than English at home
  (ABS 2006)

- POWH Community Health - Speech Pathology caseload:
  60% bilingual / multilingual
  10% monolingual non-English language
Research Focus

- To investigate the impact of impaired language and communication (aphasia) in bilingual adults and their carers
- Little research on impact of aphasia on bilinguals
- Older individuals are at higher risk of language and communication impairment due to strokes and dementia
- Bilingualism is extensive in the older population
- In single-language speakers impaired language and communication due to aphasia impacts on functional independence, social participation and wellbeing
Bilingual participants & method

- 5 bilingual adults with aphasia and 5 matched controls from same language communities
- Proficient bilinguals, literate, switch languages in conversation
- Languages: Rarotongan (Cook Islands Maori), Maltese, French & English
- Tested first and second language (English) and ability to use both languages in conversation
- Qualitative semi-structured interviews with bilingual participants with aphasia & carers to investigate impact of impaired language and communication
Quantitative Results

- Parallel impairment of language and communication in each language (L1 and L2) for bilinguals with aphasia
- Impaired grammar of language switching – unable to use both languages correctly in conversation
- Able to select the appropriate language to speak

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Qualitative Results: Consequences

Themes from interviews with participants and carers:

- limited social participation & community activities:
  avoid/reduced conversations, phone, social contact
  hard to participate in groups

- reduced independent functioning:
  more housebound, changed living arrangements, need
  others to talk to services, make appointments

- loss of identity: changed work, family, social roles, self
  identity

- decreased quality of life and wellbeing, increased stress:
  for bilingual individuals with aphasia & carers
Implications for everyday practice

- Assessment in both languages for bilingual individuals is essential: impairment may not be equivalent
- Always check if bilingual (past or present spoken languages): if Australian born & fluent English will not be indicated on medical record
- Discussion of complex information and testing may need to be in first language for accurate results
- Education and training for families - effective use of both languages together to facilitate communication
- Education of health team on impact of bilingualism
- Need for increased services to improve outcomes and address impact of communication impairment
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