

# Linguistic transfer in the therapy of bilingual aphasia

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Although there are numerous and varied questions about bilingual aphasia therapy (see an excellent review in Paradis, 1993) the present paper will focus on the transfer from the treated to the non-treated language and on the variables or factors on which transfer depends. According to Paradis (1993) the transfer might be a function of (1) structural distance between the languages, (2) order of acquisition, (3) dominance pre-onset, (4) dominance post-onset, (5) type of aphasia, (6) pattern of recovery and/or (7) type of therapy.

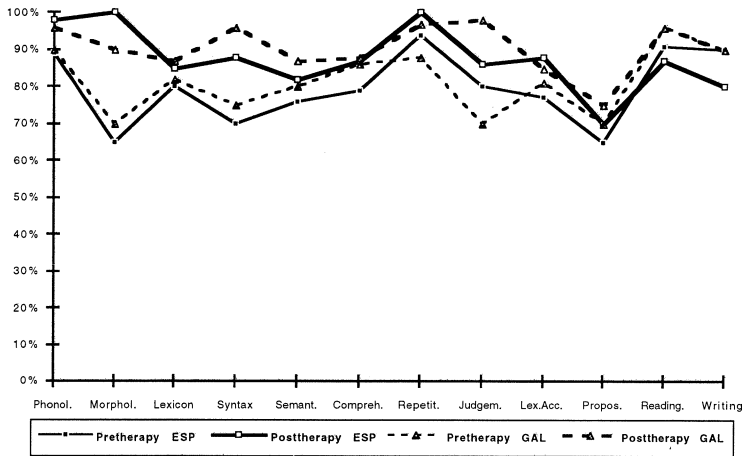
In order to contribute to the study of the transfer of therapy effect we are presenting six case studies, who are part of the world-wide research project on Bilingual Aphasia Rehabilitation directed by Michel Paradis. The present study is focused on three aspects of which the transfer may be a function (1) structural distance between languages, (2) dominance pre-onset, and (3) type of aphasia. The subjects spoke two closely related languages, Spanish and Galician, that are spoken in Galicia, an autonomous region in the Northwest of Spain. Galician is a romance language and is quite similar to Spanish and Portuguese. Spanish possesses only one phoneme that does not exist in Galician and Galician possesses only 2 phonemes that are not part of the Spanish repertoire. The two languages have considerable similarity in surface syntax and lexicon.

All the subjects suffered C.V.A and have shown no evidence of spontaneous recovery over the past six months. Dominance pre- and post-onset was assessed with the *Bilingual Aphasia Test* available in Spanish (Elias, 1989) and Galician (Gonzalez *et al.* 1990) versions. They presented different aphasia types. The same therapy methods, based on the Luria's approach (Tsvetkova, 1978), was used with all the patients. This general approach was made concrete in different programs and tasks connected with different language impairments in each subject. One hour therapy sessions were given five times a week for a period of three months. In all the cases the therapy language was Spanish. In order to assess the recovery process, the BAT was administered after the three months. According with Paradis's hypothesis we could expect that the effects of therapy will be extended from the treated to the non-treated language in the same linguistic levels and skills. Similarity between languages would cause the greater amount of transfer.

## CASE 1.

Case 1 is a 31-year-old right-handed man. He was fluent in both languages having acquired Spanish and Galician before the age of 5. At school the language of education was always Spanish from age. He had a total of 12 years of schooling. At home he spoke always Spanish but he also spoke Galician every day with friends and relatives.

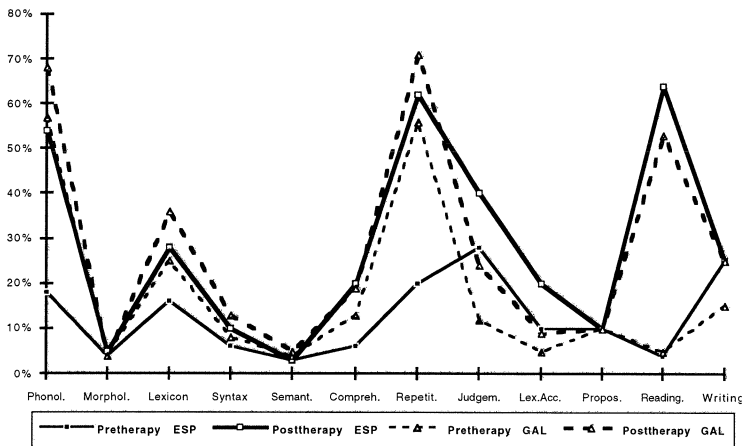
Figure 1. Profiles (pre and posttherapy) of case 1 (BAT assessment) in all linguistic levels and skills in Spanish (ESP) and Galician (GAL).



CASE 2.

The patient is a 54-year-old, right-handed man. He spoke only Galician until the age of 7. The patient attended a primary school (only in Spanish) from 7 to 14 years of age. At home he used to converse in Galician with his wife and at work he spoke both languages.

Figure 2. Profiles (pretherapy and posttherapy) of case 2 according to the BAT assessment in all linguistic levels and skills in Spanish (ESP) and Galician (GAL).

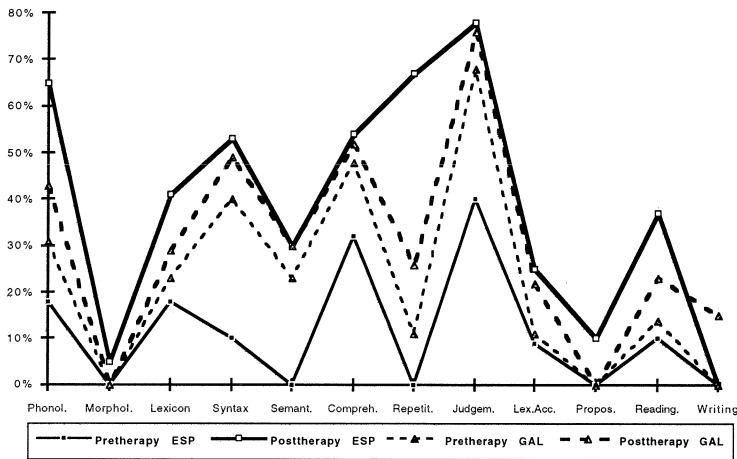


CASE 3.

Case 3 is a 60-year-old right-handed man. He was fluent in both languages having acquired

only Galician before the age of 7. The language of education was Spanish during his 7 years of schooling. At home he spoke always Spanish.

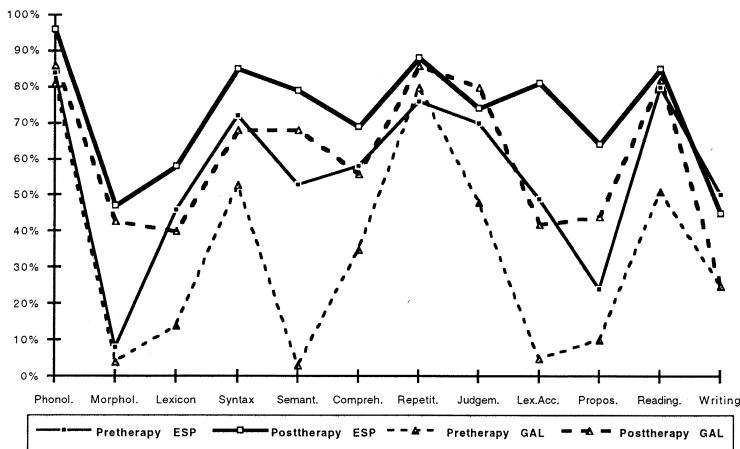
**Figure 3. Profiles (pretherapy and posttherapy) of case 3 according to the BAT assessment in all linguistic levels and skills in Spanish (ESP) and Galician (GAL).**



**CASE 4.**

Case 4 is a 69-year-old right-handed man. He was fluent in both languages having acquired only Galician before the age of 7. The language of education was always Spanish. He had a total of 7 years of schooling. Before onset he spoke always Spanish at home and at work.

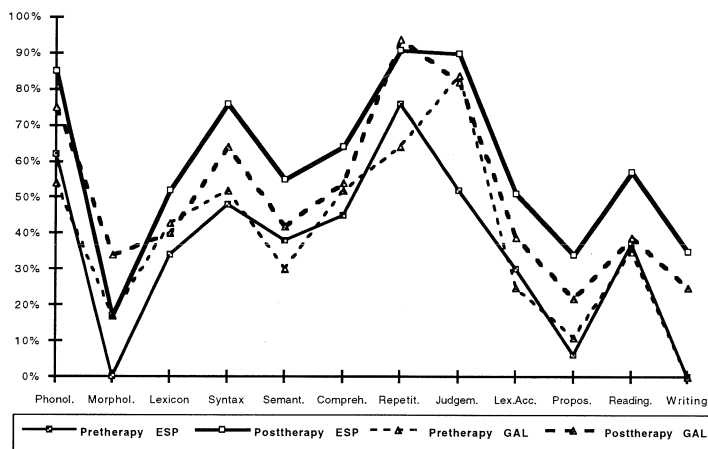
**Figure 4. Profiles (pretherapy and posttherapy) of case 4 according to the BAT assessment in all linguistic levels and skills in Spanish (ESP) and Galician (GAL).**



**CASE 5.**

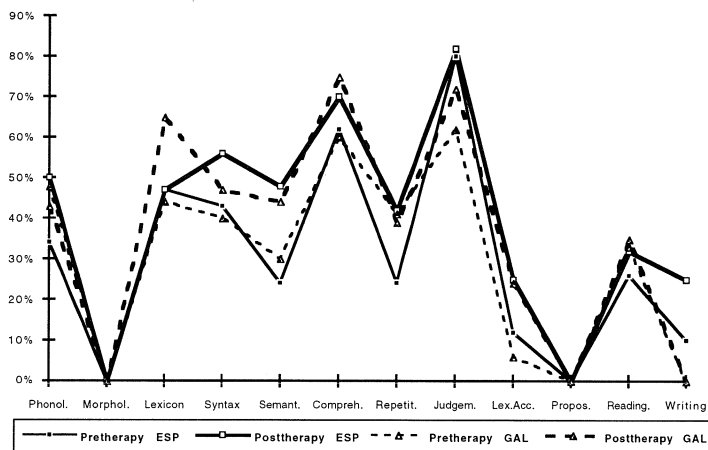
Case 5 is a 53-year-old right-handed woman. She was fluent in both languages having acquired only Galician before the age of 6. She was brought up in a bilingual environment, using Galician at home and Spanish at school. The language of education was always Spanish. She had a total of 7 years of schooling. Before the onset she spoke always Spanish at home and at work.

**Figure 5. Profiles (pretherapy and posttherapy) of case 5 according to the BAT assessment in all linguistic levels and skills in Spanish (ESP) and Galician (GAL).**



**CASE 6.**

**Figure 6. Profiles (pretherapy and posttherapy) of case 6 according to the BAT assessment in all linguistic levels and skills in Spanish (ESP) and Galician (GAL).**



Case 6 is a 58-year-old right-handed man. He was fluent in both languages having acquired only Galician before the age of 7. He was brought up in a bilingual environment, using Galician at home and Spanish at school. The language of education was always Spanish. He had a total of 7 years of schooling. Before the onset he spoke always Galician at home and at work.

## DISCUSSION

Our data are consonant with the hypothesis that in case of very closely related languages (1) effects of aphasia are dependent upon the history of bilingualism, (2) transfer from the treated to the non-treated language affect all the linguistic levels and skills. The pattern of recovery in both languages are similar as well as the amount of improvement in each even though the language of therapy was different of the post-onset dominant language.

## REFERENCES

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