

FEATURE STORY AFTER THE ACCIDENT

Road to Recovery from an ABI: Beating the Odds! An S-LP point of view

BY DEBORAH ANDERSON
M.A. S-LP(C)-CCC, REG. CASLPO
ASC100@ON.AIBN.COM



As S-LPs we all have experienced cases that we find extremely challenging. This is a story of my journey working with a teenage girl who had a severe acquired brain injury (ABI) and her remarkable motivation to recover and learn to speak and eat again.

Ashley Fearn was involved in a serious car accident while driving home with friends after a fishing trip in 2008. Although she was not the driver herself, she takes responsibility for the decision she made to get into the car with an impaired driver. This decision would change the course of her life forever. She describes herself before the accident as popular, and the “life of the party”. After the car rolled 14-15 times, Ashley had to be removed from the car with the “jaws of life” and placed on life support. She spent eight months in a coma before showing signs of consciousness. Waking up was just the beginning of Ashley’s long and arduous road to rehabilitation. Ashley’s first memory was shock; “I can’t talk, eat, or walk”. Little did she know what a long battle she was in for as she worked to return to the basics of living that each of us takes for granted.

I met Ashley when she was one year post motor vehicle accident (MVA), getting ready for discharge from the slow to recover ABI unit to her community hospital. She was just beginning to use an alphabet board to communicate and at the very early stages of beginning to eat – a peach sauce was her favourite.

When asked to take Ashley on as my client, the original expectations I received were extremely minimal due to the severity of her ABI and the length of time since her accident. The one thing I remember distinctly when I first met Ashley was her spiritedness. Although by all therapeutic standards her recovery outcome should have been minimal, there was a spark and a determination that made me wonder if there could be more to her recovery. I had to look at my therapy model with her in a very unique fashion. She was a challenge on multiple fronts – with so many areas to tackle and prioritize; being systematic was necessary in order to achieve functional outcomes. Ashley was absolutely determined to eat/drink on her own (have the GI Tube removed) as well as to talk. It was a constant challenge to determine what was realistic and when/if to give up on her dreams. We did pursue an augmentative device much to Ashley’s dismay, but by the time we received it she was already talking. Therapy was broken down into the smallest units required for both swallowing and talking. I remember her first goal was to achieve phonation for 2 seconds. As it took a very long time for Ashley to achieve that target I had to reflect upon the amount of time required for such a minimal gain. Could I justify continuing this course of therapy, weighing the



Deborah targeting Ashley’s oral motor skills.

amount of time needed to achieve a small goal with Ashley’s strong desire to continue working towards talking??? Although from a S-LP perspective this was such a small victory, it was in Ashley’s eyes a step closer to her goal of talking. After much thought decided to keep moving forward. I continued to break the goals of respiration, phonation, and articulations into the smallest units for therapy.

Therapy was a process in so many ways. Along with the challenges of working towards talking there were also goals for swallowing, school work, social issues, and all the other cognitive-communication challenges that come with a severe ABI. Ashley was now 17 years old, sitting in a hospital room with limited family support. Another tragedy for our clients is that often friends wander away over time, leaving our clients isolated at a time in their life when they need the most support. This happened to Ashley but she was truly unique: in the midst of losing supports she actually created a new family system. These were people she barely knew before the accident and yet they were to become her strongest support system and cheerleaders. Again I was amazed by this teenager who continued to defy the odds of what I would expect from her based on the severity of her brain injury.

In the midst of all this intensive work there were days when Ashley would be so frustrated and angry and needed to let it all go – those were tough sessions for both of us and we would have to review how far she had come in her recovery. As therapists we all know that dealing with anger from our clients can be one of the biggest challenges, but we also need to recognize that anger can also be a wonderful tool in moving forward. We need to remember that our clients’ anger is justified and not jump to categorizing them as “behavioural” or a “difficult client”. Ashley had every right in the world to be angry but at the same

time she had to move from anger to focus on her treatment. I realized that Ashley was not a “behavioural” problem, but a teenager who had a lot of justified anger that was going to be part of our journey in our therapy. Somehow I needed to find a way to accept her anger, acknowledge the meaning behind it, and still motivate her towards working together in therapy. As a therapist this was draining at times and yet for Ashley the anger was a powerful force that kept her determined not to give up and to keep fighting towards her goals. Ashley’s life was turned upside down and another big challenge was for her to redefine herself and accept her new life. Somehow we needed to find a larger goal/purpose for Ashley to aim towards. It was during one of our sessions that Ashley decided that she wanted to talk to other teenagers about the dangers of drinking and driving – using her life story as a way to reach others. It was an ambitious goal and I honestly did not know how realistic it was, but yet, Ashley was teaching me that she was capable and determined to achieve each goal that I gave her. During subsequent sessions small improvements continued to mark her process and once again made me wonder what she was truly capable of achieving. On the day before her 18th birthday her GI tube was removed, marking the first major success. Eating birthday cake was a true celebration.

The oral motor goals continued to be a major challenge, but again very slow gains were reasons to celebrate. Then in December 2009 – 20 months post MVA - we were able to execute a /p/ - the first oral consonant sound. Ashley had been able to make the nasal /m/ sound but moving to an oral sound was a struggle. I could not believe how exciting it could be to hear a /p/ sound. It was the first time that working with Ashley brought tears to my eyes as I watched this teenager celebrate what many of us would classify as a simple accomplishment. We were able to elicit more sounds each session and by Christmas she was trying to sing a bit of *Frosty the Snowman*. I always tell Ashley that she is a true Christmas miracle. The odds were so against her and she beat them.

Next, it came time to help Ashley with her public speaking goal to persuade high school students not to drink and drive. It has been amazing to transfer our therapy into something so powerful and meaningful, with a real impact on others. You could have heard a pin drop as she presented her message in front of 100 students. As I looked around I could see tears in the students’ eyes as they took in Ashley’s message. At the end, the teenagers gave her a standing ovation – wow – that was powerful. That was the second time I had tears in my eyes as I watched this amazing teenager who not only pushed her way from a two second phonation goal to presenting a one hour speech, but who also had taken her tragedy and turned it around to make a difference and hopefully save someone from making the same mistakes as her. We can all learn from our clients. She has been able to do something meaningful in

her life as a result of all our hard work. It has been a hard, long road filled with bumps and set-backs, and yet it has been one of the most rewarding experiences of my life. I thank Ashley for allowing me into her world and having the privilege of helping her to speak again so that she could reach out to others.

I honestly don’t know where Ashley will be in a few years from now. She has taught me that there is no ceiling to be placed on her – life is hers for the taking. Ashley wants to continue presenting and I do believe she will be doing it on whatever large scale she chooses. She also wants to continue with her education. There is still a lot of work to be done and Ashley continues to make progress, making me sit and wonder what the end point will be for this outstanding, courageous young lady. She is a true testament to the wonders of the human spirit.

Deborah has a B.A. from University of Western Ontario in Linguistics and a M.A. from Central Michigan University in Communication Disorders/S-LP.

Can you remember the most creatively interesting therapy session you had with Deborah?

I really enjoyed Deb bringing her Yorkie, Oswin (I call him Ozzie) to my therapy sessions. He would sit on my wheelchair tray and cheer me up. I also thought it was funny when Deb had me blow a piece of paper to help make a /p/- who would think that blowing a piece of paper could actually help me with my talking?

What is your favorite part of your day?

My therapy is the highlight of my day. I want to keep getting better so I look forward to my session.

What is your greatest strength as a learner?

Good attitude; stubbornness-not to give up
Hard worker
Ambitious
High expectations for myself and therapists.

Where do you think you would be in a few years from now?

Speaking better, walking of course
I will be finished high school, and in college working towards becoming a rehabilitation therapist myself
Continuing to speak about my accident spreading the message of “Don’t Drink and Drive”.

What did you like in working with Deborah?

I like that she had faith in my expectations and self goals. She could see more in me and my abilities than I could at times. I can do so many more things in my life than even before I met Deborah.

Message to S-LP from Ashley

Always look for the best in your client.
Always have high expectations for your clients. Treat them with respect.
Always have hope for your clients to get better.
Don’t give up on your client - ever.