

Lau Yoke Lian, 2017

Volume 3 Issue 1, pp. 507 - 515

Date of Publication: 21st March, 2017

DOI-<https://dx.doi.org/10.20319/pijss.2017.s31.507515>

This paper can be cited as: Lian, L., Y. (2017). A Preview of Aphasia Research in Malaysia and Indonesia.

PEOPLE: International Journal of Social Sciences, 3(1), 507-515.

This work is licensed under the Creative Commons Attribution-Non Commercial 4.0 International License. To view a copy of this license, visit <http://creativecommons.org/licenses/by-nc/4.0/> or send a letter to Creative Commons, PO Box 1866, Mountain View, CA 94042, USA.

A PREVIEW OF APHASIA RESEARCH IN MALAYSIA AND INDONESIA

Lau Yoke Lian

Department of Applied Linguistics, Tsinghua University, Beijing, China,

PPIB, University Malaysia Sabah, Malaysia

liuyulin15@tsinghua.mails.edu.cn

yokelian@ums.edu.my

Abstract

The current research on aphasia in Malaysia can be divided into two areas. One is carried out by research personnel of medical units while the other is carried out by university lecturers with linguistic background. The research studies made by both parties are different in terms of research methods and research focus. The researchers at medical units normally carry out aphasia research on stroke patients in most cases. Aphasia is only regarded as one of the symptoms of stroke patients. On the other hand, university lecturers with linguistic backgrounds remove reasons for aphasia and focus on aphasia itself instead of discussing reasons for the occurrence of stroke among aphasic patients. Malaysia has various researchers from different backgrounds who focus on aphasia. The researcher has found a lot of relevant data in this area. Meanwhile, many students with a background in liberal art and science have engaged in research in this area and these include undergraduate students, graduate students, and doctoral students. There are more doctoral students graduating from foreign universities and majoring in aphasia than those graduating from local universities. There are many doctoral students who graduated from universities in London, New Zealand, and other places. The aphasic patients

who have been studied are those who speak Malay, Arabic, Hindi language and Minangkabau respectively. However, it was really surprising to find that there is no documented research on Chinese aphasic patients. Although there are few Chinese students conducting research in this area, there were no Chinese aphasic subjects. The absence of Chinese aphasic patients could possibly be due to the researcher's failure to speak or understand Malaysian Chinese or failure in searching for suitable Chinese aphasic patients.

Keywords

Malaysia, Indonesia, Aphasia, Stroke, Symptoms

1. Introduction

The researcher once thought that there were only a few types of researchers on aphasia in Malaysia. However, after collecting the relevant information, the researcher has found that the research studies on aphasia in Malaysia had a history spanning 20 years. The most authoritative experts on aphasia are members of a research team consisting of Dr. Leela Koran from the Department of Linguistics, University of Malaya and Dr. Noor Aina Dani from University Putra Malaysia. Generally, Malaysians are able to speak at least three languages (Leela, 2015), (Helen, 2013). However, the Chinese society has a more complex linguistic background (Helen Ting Mu Hung, 2013). Most of aphasia researchers in Malaysia are professors or doctors/ health care personnel from medicine units. Besides Dr. Leela Koran, the researchers who really view aphasia from the linguistic perspective also include Dr. Noor Aina Dani and Gusdi Sastra, a doctoral student under Dr. Noor Aina's guidance from University Putra Malaysia and Dr. Ikhwan (an Indonesian) from the Hasanuddin Makassar University of Indonesia. These scholars could be the key researchers focusing on aphasia from the linguistic perspective. Most of the aphasia research patients in Malaysia consist of Malays or Indians. For example, Chiang (2005) carried out a research on a Malay aphasic patient. There are also a few Chinese research subjects.

Although there are a few research studies on Chinese objects, most of them consists of non-Chinese speakers or non-Chinese-dialect speakers. Due to education factors, some Chinese in Malaysia do not know how to speak Chinese. The researchers face limitations because they fail to understand Mandarin or dialects spoken by Malaysian Chinese. The researcher thinks that Malaysia has great research potential in terms of research on Chinese aphasic patients. This is

because most Malaysian researchers normally publish journal articles on aphasia in Malay and English.

2. Research Objectives / Research Questions

1. Which rehabilitation programs could be provided for local aphasic patients according to Malaysian research studies on aphasia?
2. Do aphasic patients under different contexts face more complex symptoms of aphasia?

3. Literature Review

Noor Aina (2014) had once published her research results in an international seminar in 2014. Her research patients consisted of five stroke patients at the Hospital of Kuala Lumpur who were accompanied by speech therapists during the process of her research. There were three research objectives of that particular study namely to demonstrate the syntax of the language used by ordinary people, to find out the missing language parts among aphasic patients and to analyze the missing language parts of aphasia. Suraiya (2014) simply introduced several ordinary types of aphasia in Malaysia in her work in 2015. Aziz et al. (2013) had conducted a research on the application of verbs and nouns for non-fluent aphasic patients in 2013. Their results showed that such aphasic patients could use and understand nouns better than verbs. Khairuddin and his partners (2016) published a report on the status of local stroke patients with aphasia.

Their research object was a 72-year-old Indian woman who has been living in a nursing home for four years. The condition of this patient has always under the care of the University Kebangsaan Medical Centre. Results of the research showed that the lady has typical aphasia symptoms such as failing to understand the words of others, expressing sentences in phrases, asking others in sentences and phrases repeatedly, declining ability of being able to understand simple sentences and vocabulary though language skills and having the ability to give the reaction using her limbs. Gusdi Sastra (2005) studied aphasic patients speaking Minangkabau language and Malay in 2005. The language errors include pronouns errors, total lack of vocabulary, word disorder, additional terms and vocabulary shortening which were 32%, 48%, 10%, 4% and 5.5% respectively. His research showed that the most common symptom of Broca's aphasic patients is missing words which could be reflected in the expression of voices and morphemes.

One of the symptoms which the most medical researchers in all units are invariably discussing during the research of stroke patients is aphasia. For example, research done by Rameezan (2005) showed that 59 people in total were sent to the Medical Center of Malaya University because of stroke from July 1999 to October 1999. Among those people, 36 people (accounting for 61%) did not suffer from aphasia, 3 people (accounting for 6%) suffered from aphasia, 8 patients (accounting for 16%) had severe language disorders and 4 patients (accounting for 8%) had slight language barriers.

Table 1: 59 stroke patients in Medical Center of Malaya University from July to October 1999.(B A R Rameezan, 2005)

| | Patients | % |
|-----------------------------|----------|----|
| Suffer from aphasia | 3 | 6 |
| Severe language disorders | 8 | 16 |
| Slight language barriers | 4 | 8 |
| Did not suffer from Aphasia | 36 | 61 |
| Others | 8 | 9 |

Siti and her partners (2014) included 41 stroke patients in their research. Of the total number of stroke patients, 32 people (accounting for 78%) had strong desires to know about aphasia during their rehabilitation periods and after-stroke periods, 7 people (accounting for 17.1%) chose to know about aphasia whereas 2 patients (accounting for 4.9%) were unsure whether they would like to know aphasia or not.

The research above showed that stroke patients had a strong desire to obtain a positive solution when facing problems related to aphasia. Ikhwan (2009) graduated from the University of Indonesia and he obtained a Doctor's degree. Just like Gusdi Sastra (2005), he also focused on researching aphasic patients speaking Minangkabau language and Malay. However, he made a stratified test of the aphasic patients with detailed research. His research not only involved speaking, reading, writing and listening tests for the aphasic patients, but also included a series of gradual treatment activities in the form of games on aphasic patients. In addition to verifying symptoms of non-fluent aphasic patients, he also tried to carry out a few remodeling behaviors. Ikhwan (2013) published the results of another research where he conducted a sampling three times and obtained 30 aphasic patients as research objects. He determined the research subjects

through interviews and specific identification equipment. The first stage involved collecting data after the stroke patients were affected for 14 days. Next, the second stage involved gathering information within seven days after rehabilitation whereas the third phase involved collecting data after a rehabilitation period of one month.

Leela Koran's research (2015) is different from other researchers. Instead of conducting research on stroke patients in sanatoria, Leela's patients consisted of stroke patients living at home. Leela's research was mainly carried out using conversational analysis which mainly focuses on language forms when the patients were talking with their family or friends. She focused on researching the language form of aphasic patients in natural conditions instead of obtaining the result from a general test.

4. Current Situation of Aphasia Research in Malaysia and Indonesia

The aphasia research in Malaysia does not focus on research antecedents. Almost no research points out which accident or condition leads to which type of aphasia or creates the relationship between both education and medicine. The current research studies are limited as most of them only confirm previous research results. For example, the symptoms of Broca's aphasia patients have been confirmed without any positive solution. In another example, a research carried out by Khairuddin and his partners (2016) showed that a 72-year-old aphasic patient suffered from uncontrollable language ability and could not express her thoughts because of brain damage.

Judging from the more serious cases, aphasia will lead to a decreased quality of life. However, the researchers did not put forward a proposal to reduce the inconvenience caused by aphasia, nor did they find the most basic methods of reducing helplessness among aphasic patients.

5. Similarities and Differences in Methods and Research Tools of Aphasia from the Medical Perspective and Linguistic Perspective

In 2013, in order to find out the deficiency among aphasic patients in the use of nouns and verbs, A Aziz M and his partners conducted a research on Malay aphasic patients with a research tool called MOAT (Malay Object and Action Test). Rameezan (2005) tested aphasia from a medical point of view by using questionnaires and list tables. He prepared questionnaires

which consisted of five separate forms. The five forms include demographic data, clinical characteristic data, the stroke impairment scale, the cognitive function assessment form and the functional independence measure (FIM).

The fifteenth item in the third section aims to test the ability of aphasic patients to answer questions. 0 points will be given to the patient if he has normal language skills, 1 point for mild aphasia, 2 points for the serious aphasia patients while 3 points is given for complete aphasia. What Siti and her partners (2014) had adopted was data analysis. By focusing on the symptoms of the stroke patients, she could calculate the causes of stroke among the patients. Khairuddin and his partners (Khairuddin Syah bin Zainuddin, Nuramalina binti Haju Tuah, Zaimi bin Awat, 2016) chose an aphasic patient and observed her condition through a series of tests. There were four tests which were common aphasia research methods. First, a simple social conversation is carried out with the patient. Second, the patient is told a "Cat's Story ". Third, the patient is asked to recognize the objects in the pictures. Fourth, the patient needs to move her body according to the instructions given.

The research methods of Ikhwan (2013) are varied and interesting as it involved drawing, cartoons, sounds, and words. The motion design is researched according to different levels. He had repeatedly carried out the activities of talking, naming, understanding, repeating, reading and writing. However, different equipment and test tools were used in various stages. During the research, they divided the patients into five groups according to the final scores. The first group which obtained 0 points consisted of those who failed to speak. The second group which obtained 1-3 points consisted of patients with slight language competence barriers. The third group obtained 4-6 points as they consisted of patients with affected language competence. The fourth group which received 7-9 points had slight impact whereas the fifth group which were normal received 10 points.

The research by Leela (2015) was mainly based on videos of aphasic patients. It focused on researching the language form of aphasic patients carrying out normal dialogue in their daily lives. This research form is very new in Malaysia because what aphasic patients express under the natural or non-stressful situations is the most natural language condition.

6. Future Research Direction

From the point of view of medical research, the current methods of researching the severity of aphasia require more rigour. For example, in the forms by Rameezan (2005), they did not define which level is considered as the "normal" language expression or which kind of language is considered as moderate or severe symptoms of aphasia. We could do a more detailed interpretation and classification of this aspect in order to obtain more accurate results. Aphasia studies in the area of medicine are not accurate as they are only recorded in the form of numbers and number of aphasia patients.

For future research, the classification of native language in aphasia research can be intensified. For example, it would be interesting to find out the percentages of English-speaking aphasic patients, Chinese-speaking aphasic patients, Hindi-speaking aphasia patients and aphasic patients who speak other languages. It is also important to find out which of these aphasic patients recover more quickly. If the aphasic patients speaking certain languages recover faster, then why is the recovery speed faster than aphasic patients who speak other languages? If we can start pondering on issues like these, it is highly possible that better treatment methods for aphasia may be discovered in future.

7. Conclusion

The researcher believes that the research methods on aphasia in Malaysia can be diversified especially in terms of research techniques and tools. Meanwhile, considering the clear segmentation between medicine and linguistics, similar aphasia research plans can be carried out in collaboration with research personnel in medical college so that it will not result in polarized research in the field of medicine and linguistics.

As the Chinese are the second largest ethnic group in Malaysia, it is truly a great loss should there be a lack of research on Chinese aphasic patients in Malaysia. The researcher sincerely hopes that relevant research on Chinese aphasic patients will be carried out in the future. The department of medicine and the department of linguistics could make joint efforts to nurture top researchers in aphasia research. If the two units could cooperate together and benefit each other, it can certainly produce a breakthrough in the research on aphasic patients.

If Malaysia wants to achieve greater results in aphasia research, there must be more researchers who are keen to join this field as more research data will solidify the research results obtained. As different aphasic patients with different native languages will exhibit different

rehabilitation conditions, the researchers should make detailed records and follow-up so as to effectively improve the quality of research in the field of aphasia.

Che Rabiaah (2010) had completed his PhD in the field of the educational needs of home-based stroke patients (HBSP) and family caregivers. His research was focused on the state of Kelantan located in the northern part of Peninsular Malaysia. In addition, Deidre (2014) came up with a guide for stroke survivors and their family. In future, perhaps others may carry out a similar research but in the field of aphasia. It is believed that many more individuals can benefit from understanding the early stages of preventing aphasia, living with aphasia and dealing with aphasia.

References

- B A R Rameezan. (2005, December). Functional status of acute stroke patients in University Malaya Medical centre (UMMC), Kuala Lumpur, Malaysia. *Med J Malaysia*, 60(5), 548-559.
- Ikhwan M. Said. (2009). The development of Language competence of non-fluent aphasia sufferers caused by ischemic stroke. Universitas Hasanuddin Makassar.
- Che Rabiaah Mohamed. (2010). The educational needs of home-based stroke patients and family caregivers in Malaysia. Victoria University of Wellington. doi:<http://researcharchive.vuw.ac.nz/xmlui/handle/10063/1431>
- Chiang Ching Pei. (2005). A case study: Linguistics analysis of Malay a grammatic speaker. National University of Malaysia.
- Deidre Anne de Silva. (2014). Understanding stroke- a guide for stroke survivors and their families.
- Gusdi Sastra. (2005). Verbal expression of stroke sufferers in view of neurolinguistics analysis. Kuala Lumpur, Selangor, Malaysia: University Putra Malaysia.
- Helen Ting Mu Hung. (2013). Language, identity and mobility: perspeyive of Malaysian Chinese Youth. *Malaysian Journal of Chinese Studies*, 2(1), 83-102. doi:https://www.newera.edu.my/files/mces/MalaysianJournal/Malaysia%20Journal%20Vol%202_5.pdf
- Ikhwan M. Said. (2013). Kompetensi pembedaan kata-kata mirip oleh penderita afasia tidak lancer. ISOL-1 UNAND.

- Khairuddin Syah bin Zainuddin, Nuramalina binti Haju Tuah, Zaimi bin Awat. (2016). Masalah kecacatan Bahasa pada pesakit strok tempatan di Malaysia. Kuala Lumpur. doi:<https://www.dropbox.com/s/44r2zqyr2cmymnsn/Masalah%20Kecacatan%20Bahasa%20pada%20Pesakit%20Stroke%20Malaysia.doc?dl=0>
- Leela Koran. (2015). Ahpasia in a linguistically diverse population resources for turn construction and intercational adaptations of Malaysia adults. UK: University College London. doi:<http://discovery.ucl.ac.uk/1468881/2/Koran%2C%20L.%202015%5B1%5D.pdf>
- M, A Aziz, Abd Aziz A, A Razak R, Abd Hamid B. (2013). Word retrieval deficits in Malay-speaking adults with non-fluent aphasia. *Procedia Social and Behavioural Sciences* 94 (pp. 69-70). Elsevier.
- Noor Aina Dani. (2014). Language deviation in stroke patients with aphasia. *The International Conference on Humanities and Social Science*.
- Siti Noorkhairina Sowtali, Sakinah Harith. (2014). Educational need among stroke patients admitted to Hospital Sains Malaysia: Preliminary findings. *Jurnal Sains Kesihatan Malaysia*, 12(1), 67-73. <https://doi.org/10.17576/jskm-1201-2014-09>
- Stephanie binti Maicheal. (2009). *The Case study on learning experiences of successful dyslexics*. University Malaysia Sarawak.
- Suraiya Chapakiya. (2014). *Asas Linguistik*. (A. Hassan, Ed.) Kuala Lumpur: PTS Akademia.