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STEVE ADUBATO, host:

When a person's ability to communicate is impaired, the impact is profound. Aphasia is up next on CAUCUS: NEW JERSEY.

Announcer: Funding for this edition of CAUCUS: NEW JERSEY has been provided by the Adler Aphasia Center...

(Graphic on screen)

Adler Aphasia Center
Where people touched by Aphasia
can comfortably communicate

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ADUBATO: Welcome to FAMILIES IN FOCUS, a very special series looking at the many challenges facing the modern American family. I'm Steve Adubato. Last time we talked about how patients and their families are coping with aphasia. Here, today, we continue that discussion with the following guests: Dr. Ronald Lazar, who is professor of clinical neuropsychology for the Neurological Institute at Columbia University. Barbara Martin, executive board president of the National Aphasia Association. Barbara has been living with aphasia for 23 years. Mike and Elaine Adler. Mike is also living with aphasia. He and his wife, Elaine, co-founded the Adler Aphasia Center in 2003. And finally, Shirley Morganstein is a speech language pathologist in private practice in Montclair, New Jersey, working with clients living with aphasia.

Listen, last time we got together, we--hopefully, folks, you watched us last week. Very intense conversation about the fact that aphasia--one million Americans suffering with aphasia. That's more than those who are suffering with Parkinson's. Eighty-thousand Americans diagnosed every year with aphasia. Real quick, for those who missed last week--can't imagine you missed us--what is aphasia?

Mr. RONALD M. LAZAR, PhD (Clinical Neuropsychologist): It's an acquired disorder of communication function from a disease or injury that affects the

part of the brain that involves language.

ADUBATO: It does not affect someone's intellectual ability, correct?

Mr. LAZAR: Correct.

ADUBATO: It affects someone's ability to communicate and connect with others. Correct, Elaine?

Ms. ELAINE ADLER (Co-Founder & Vice President, Adler Aphasia Center): Yes.

ADUBATO: And Mike has been--Mike, you were diagnosed what year? Thirteen years ago?

Mr. MIKE ADLER (Living With Aphasia): Yeah.

Ms. ADLER: Nine...

ADUBATO: Thirteen years...

Ms. ADLER: 1993.

ADUBATO: 1993.

You were diagnosed when?

Ms. BARBARA MARTIN (President, National Aphasia Association): Twenty-two years ago.

ADUBATO: Twenty-two years ago. You had a...

Ms. MARTIN: Massive stroke.

ADUBATO: ...massive stroke.

Mike, you were--you had...

Mr. ADLER: Massive stroke.

ADUBATO: Massive stroke.

Also wanted to be clear that you've recovered to the point, Barbara, where you are teaching again.

Ms. MARTIN: I retired seven years ago, but I teach 13 years, the Scarsdale Alternative School.

ADUBATO: OK.

By the way, also want to make sure that you logon to our Web site. We will connect you to the Adler Aphasia Center.

(Graphic on screen)

Caucus www.caucusnj.org
Online Resource Center

ADUBATO: It is a national model. It's one of the only organizations in this country who are dealing with the ongoing care of people with aphasia.

Elaine, quick question: You said you wanted to talk about the caregiver, because this is FAMILIES IN FOCUS. What does it mean for a caregiver of someone with aphasia?

Ms. ADLER: One's life is completely changed, 180 degrees.

ADUBATO: Be specific.

Ms. ADLER: Yesterday we were having a wonderful time. Last night, Mike had a stroke. Today, we hare in limbo until we learn what to do and how to live with the aphasic. It's not easy because nobody really has taught us that there is such a thing as aphasia; therefore, we don't know the manifestations.

ADUBATO: Mm.

Ms. ADLER: But we do have a book, and you have it over there.

ADUBATO: There it is.

Ms. MARTIN: Yeah.

Ms. ADLER: A wonderful, wonderful book that...

Ms. MARTIN: Fantastic.

Ms. ADLER: ...was written in England, and we at the National Aphasia Association...

Ms. MARTIN: National Aphasia Association.

Ms. ADLER: ...had it translated to American English. If anyone is in need, both family and the aphasic, to learn about themselves what to do, how to do and what not to do, it's all in that book. And this...

ADUBATO: And this'll be listed in our book.

Ms. MARTIN: In...

ADUBATO: Yes, and some of the things that we will find in this book would be, Barbara?

Ms. MARTIN: Well, where to find a group that will meet once a week for the aphasic...

ADUBATO: Support groups.

Ms. MARTIN: Exactly. And caregivers. We have about 375 already in this country.

ADUBATO: OK.

And I tell you what, there are a whole range of things that I want to talk about here. After we worked together at the Adler--the annual gala that the Adler Aphasia Center has--and by the way, this year the event is on September

19th. This program, we're taping it in May. June is National Aphasia Awareness Month, which is being sponsored by your organization. Again, it doesn't matter when the program airs, but June is that month.

ADUBATO: In September, on the 19th, it's going to be another gala for your organization. And who do you have coming in to perform?

Ms. ADLER: Marvin Hamlisch. Do come. You will love it. Be a great evening...

ADUBATO: All...

Ms. ADLER: ...and you will be supporting the Adler Aphasia Center.

ADUBATO: All the proceeds go to...?

Ms. ADLER: Adler Aphasia Center.

ADUBATO: All right, here we go. Mike, we talked about this, because you were the CEO of an organization, 700 employees, at the top of your game.

Mr. ADLER: (Unintelligible)

ADUBATO: You were a great communicator. By all accounts--I mean, I'm a student of the game and I heard that you were an extraordinary communicator. Some of the tips--some of the things that you have been able to do to communicate more effectively that would be helpful to those who are suffering with aphasia right now:

Mr. ADLER: I went to a speech therapist, and he said, 'You talk fine.'

Ms. MARTIN: Yeah.

Mr. ADLER: 'Talk. Don't be embarrassed. Get in there and talk.' It changed my whole life. I figure I talk and you listen. And that's the tip that you give aphasics. Talk. Don't be embarrassed.

ADUBATO: Question: How good a listener is Elaine?

Ms. ADLER: Now, don't make trouble in the family.

ADUBATO: Well, Elaine--no, no, no, no, no. Elaine--Elaine, if I ask Mike how good a listener you are and you interrupt, that gives us an indication, OK?

Mike, I'm asking you. How good a listener? I know she's a great friend, supporter, 60 years--you're coming on 60 years being married. How good a listener is she?

Mr. ADLER: She has an innate sense of doing the right thing. She doesn't listen, she--magical quality by doing the right thing.

ADUBATO: The right answer, Elaine?

Ms. ADLER: I like it.

ADUBATO: Some of the tips that I learned--and again--actually, if you also logon to our Web site, I wrote an article for The Star-Ledger--I write a

weekly column on The Star-Ledger dealing with communications issues. And I was really struck by the Adler Aphasia Center, so I started writing about the communication issues they face. Let's go through the ones that I remember. If I'm wrong, you'll tell me.

Number one, do not interrupt someone and finish the sentence of someone who is an aphasic, right, someone suffering with aphasia?

Ms. ADLER: Yes.

ADUBATO: Do not finish their sentence if you're getting impatient...

Ms. MARTIN: Yeah, yeah.

ADUBATO: ...and you think you're helping them because...?

Ms. SHIRLEY MORGANSTEIN, CCC-SLP (Speech Language Pathologist): Because you need to ask them how best you can help them. Some people do like you to give a word, some people do not. I think the key is focus on the person with aphasia and determine how they want to be helped.

ADUBATO: Each person separately.

Ms. MORGANSTEIN: Each person individually.

ADUBATO: The other thing I remember is, when you're asking questions, ask questions that are closed-ended and require a yes or no answer if possible, as opposed to answer--asking a question that requires a more complicated, open-ended response. Fair assessment?

Ms. MORGANSTEIN: If that person has not got capability of doing more.

Offscreen Voice #1: Yeah.

Ms. MORGANSTEIN: There are many other techniques for people with very limited verbal output that we train partners in. For example, many people with aphasia can profit from what we call supported communication.

ADUBATO: For example?

Ms. MORGANSTEIN: Paper and pencil. For example, if I wanted to ask Mike or Barbara a question rather than yes/no, I might put down some written choices and say, 'Is it any of these?' If they could select, then I can move on and ask more questions that are targeted...

ADUBATO: Multiple choice?

Ms. MORGANSTEIN: Kind of, exactly.

ADUBATO: Sorry for interrupting you while we were talking about communication.

Ms. MORGANSTEIN: Pictorial supports are often helpful in the doctor's office. There are some resources that are available when people go in to visit a physician, for example, that can assess pain, dizziness, other kinds of things that they may not be able to verbalize.

ADUBATO: Mm.

Ms. MORGANSTEIN: So yes/no is very valuable for some individuals, but there are more in-depth, supported techniques.

ADUBATO: And I also know that Barbara--I'll come back to you, Doctor--Barbara, say you're going into Manhattan...

Ms. MARTIN: Yes.

ADUBATO: ...or Philly, or wherever, you know, big city, where there are a lot of--there's a lot of traffic and there are cabs. Is it true that you told our producers that--say you want to go to the Met.

Ms. MARTIN: Met.

ADUBATO: You will go into a cab and you will have on an index card, "Take me to the Met."

Ms. MARTIN: Yeah. Now I...

ADUBATO: Not the--not the Mets game in Queens, but the Met, the Metropolitan Opera. You will hand it--you don't have to say a word.

Ms. MARTIN: Yes, exactly.

ADUBATO: Works?

Ms. MARTIN: Well, I did it in the beginning. Now people think I'm foreign, so I don't. But for five years...

ADUBATO: They think you are...?

Ms. MARTIN: Foreign.

ADUBATO: OK.

Ms. MARTIN: So I don't have to. But before--but before, I hand--I went into Manhattan many times, hand where I go to the driver, and they take me. And I functioned very well for about five years like that.

ADUBATO: So you adapted over time. But the issue of the following--first of all, you had the self-confidence.

Ms. MARTIN: Yes.

ADUBATO: Mike had the persistence--and Elaine, who wasn't going to let anything else happen--to keep it up, and now he is--I've heard him speak in many situations and he's a darn good public speaker.

Ms. ADLER: Mm-hmm.

ADUBATO: How much of his, however, Doctor, has to do with people overcoming a sense of shame, guilt, embarrassment?

Mr. LAZAR: Those are all very important issues. It turns out that there's a significant portion of aphasic patients who have depression as a result of

seeing their functionality after the stroke, for example, compared to the way they were functioning before.

ADUBATO: By the way, go back again. Say the term again, "aphasic."

Mr. LAZAR: Aphasic.

ADUBATO: That is the appropriate term for someone with aphasia, correct?

Ms. MORGANSTEIN: Well, I prefer person with aphasia.

ADUBATO: See, I was saying "person with aphasia." I heard Elaine use the term "aphasic," which we've done before. Now we're going to get politically correct about people with it, OK. But, go ahead.

Ms. MORGANSTEIN: What else can we do but be politically correct?

ADUBATO: Yes.

Ms. MORGANSTEIN: I think we want to focus on the person with the problem, rather than the problem.

Offscreen Voice #2: (Unintelligible)

ADUBATO: But however one describes it, Doctor--do you see how I just transitioned?

Ms. MORGANSTEIN: Excellent.

ADUBATO: What are we dealing with?

Mr. LAZAR: Well, first, I agree with you, we have to treat the person...

Ms. MORGANSTEIN: Yes.

Mr. LAZAR: ...who has aphasia, as any other condition and illness they may have, so I stand corrected in that matter.

ADUBATO: Now let's talk about embarrassment, guilt, whatever it is that someone's feeling emotionally and psychologically as a--as a huge set of factors in their recovery.

Mr. LAZAR: People have this normal tendency to compare the function after the stroke to the way they were functioning beforehand, and they see often a huge change, and that wreaks havoc with one's own sense of self-image. And depression is a major issue, and it's often...

ADUBATO: It is?

Mr. LAZAR: It is, and it's not treated properly. And in some cases they may need some psychiatric input. Sometimes they need to talk to a counselor or they have to be in a group support session. But the psychosocial aspect of their condition has to be addressed as part of their overall recovery.

ADUBATO: You can't separate that from the clinical, therapeutic, if you will--when I was watching a lot of the folks at the center, they're working on the computer and they're learning in that way. They're learning by having

a--being involved in a facilitated discussion by really wonderful professionals who draw people out.

But, Mike, let me ask you this on the emotional piece. Have you at any point during these 13 years felt as if you were some sort of--that your condition, as someone with aphasia created an undue burden for Elaine or your family?

Mr. ADLER: Three months after I had the stroke, I put myself on depressive drugs, and in six months I felt better and then I stopped.

ADUBATO: Wait, hold on. Three months in you get on drugs, certain drugs, because you thought they would help you do what?

Mr. ADLER: Feel better. I was depressed, and I knew it was the effect of the aphasia, and I knew it. But I couldn't fight it, so I take drugs for depression and I felt better. Six months...

Ms. MARTIN: Later...(unintelligible)...doesn't need it.

Mr. ADLER: Yeah. Yeah.

ADUBATO: How about for you?

Ms. MARTIN: I didn't. I don't know why. I can't talk. I fight--my husband thinks I fight with him in bed.

ADUBATO: So let me get this straight, even though you had aphasia, you still fought with your husband? I just want to be clear. It has no impact on your ability to get along as husband and wife. You still will fight.

Ms. MARTIN: And in the kitchen I'd throw the pans on the floor, I'm so angry.

ADUBATO: OK, I want to be clear, you threw pans on the floor, but not at anyone.

Ms. MARTIN: No.

ADUBATO: Just clarifying. Go ahead. To get your point across.

Ms. MARTIN: Yes, exactly. I was so frustrated.

ADUBATO: Did you at any point--and if you don't want to answer...

Ms. MARTIN: Yeah.

ADUBATO: ...I totally understand. Did you--or were you prescribed any medication to deal with those issues?

Ms. MARTIN: I don't have that, but most do. I don't know why. I'm angry, perhaps, is the--but I don't have depression.

ADUBATO: And that frustration...

Ms. MARTIN: The frustration is all the time.

ADUBATO: But for the frustration, which obviously--and I know I'm up against

a break here--which could obviously turn very easily into depression...

Ms. MARTIN: Yes.

ADUBATO: ...is largely a product of the fact that communicating, speaking...

Ms. MARTIN: Yeah.

ADUBATO: ...is such a critical part of who we are and how we connect with the world.

Folks, listen, this is a fascinating discussion, and I've learned a lot. I hope you have, as well. Continue to listen to the last portion of our discussion. Logon to our Web site, because a television program can only do so much. We are connected to the Adler Aphasia Center, to the national organization dealing with it.

Ms. MARTIN: (Unintelligible)

ADUBATO: And there are a lot of dos and don'ts, and we're there to help. We're a resource.

Stay with us. We'll be right back.

(Announcements)

Announcer: If you would like more information on this program or if you'd like to express an opinion, e-mail us at info@caucusnj.org and visit us on the Web at www.caucusnj.org.

ADUBATO: Welcome back. Before we go to Elaine Adler, who is about to run the show--you should see what's going on when we're not on the air--is the fact that aphasia does affect not only someone's ability to verbally communicate but also their ability to write, their ability to communicate in writing and other ways.

Elaine, you wanted to say about the caregiver...? Go ahead.

Ms. ADLER: The caregiver is equally as frustrated.

ADUBATO: Give us a for instance.

Ms. ADLER: OK. I would ask Mike a question and he would say no, automatically.

You said yes. My husband said no.

Ms. MARTIN: I said no, too...(unintelligible).

Ms. ADLER: And I--well, if it wasn't important...

Ms. MARTIN: Yeah.

Ms. ADLER: ...I didn't bother. Well, one day I wanted so badly to do something and he said no, and I was angry. 'Why can't I do it?' And he really meant yes, but he said no.

Ms. MARTIN: Yes.

Ms. ADLER: Until I sat with a group in Arizona and I learned that they say no before they say yes...

Ms. MARTIN: Say yes.

Ms. ADLER: ...I didn't realize that.

ADUBATO: Because?

Ms. ADLER: That's a natural instinct.

Ms. MARTIN: There's a--I don't know.

Ms. ADLER: They say no.

ADUBATO: Wait a minute, time out.

Ms. MARTIN: Yes.

ADUBATO: Aphasia does not affect your intellect.

Ms. MARTIN: No.

Ms. ADLER: No. He knew what he wanted. He wanted to say yes.

Ms. MARTIN: Wanted to say yes.

ADUBATO: Mike...

Ms. ADLER: But he said no.

Ms. MARTIN: No.

ADUBATO: OK, Mike, I'm sure you don't remember the spirited discussion you had with Elaine at the time.

Mr. ADLER: No.

ADUBATO: Good. No is a good answer, by the way. But do you remember saying no but meaning yes?

Mr. ADLER: I don't remember. Elaine would say, 'You say no.' I don't remember, but she...

ADUBATO: But then you figured out that Mike meant yes when he said no.

Ms. ADLER: Yeah.

ADUBATO: So then how did that change the way you--first of all you're frustrated.

Ms. ADLER: Of course.

ADUBATO: And you were showing it.

Ms. ADLER: Of course. By the way, at our Adler Aphasia Center, we will--we list our caregiver bill of rights.

ADUBATO: Translate it.

Ms. ADLER: We've got a right to be annoyed. We've got a right to ask for something.

Ms. MARTIN: Yeah.

Ms. ADLER: We've got a right to have some free time.

ADUBATO: Bang pots and pans?

Ms. MARTIN: Yes, that's...

Ms. ADLER: Whatever you want.

ADUBATO: Go ahead. Keep going. You have a right to do these things...

Ms. ADLER: Yes.

ADUBATO: ...and still be a good person, a good caregiver.

Ms. ADLER: Exactly. Without guilt.

ADUBATO: Without guilt.

Ms. ADLER: The whole thing is with--to make you feel as though you are not a bad person for doing this. After all, your spouse is a sick person. How can you react so violently, even if it's just internal, when he's sick? Well, you have the right to think what you want to think, as well. Again, without guilt. So if anyone is interested, I think we have it on our...

ADUBATO: It's on your Web site.

Ms. ADLER: It is on our Web site.

ADUBATO: They'll logon to ours; we're connected to yours.

Ms. ADLER: Yeah. Right. You can read the caregiver's bill of rights and feel good about yourself.

ADUBATO: By the way--good. By the way, I should make it clear that the Adler Aphasia Center is a not-for-profit organization...

Ms. ADLER: Oh, yes.

ADUBATO: ...which is why we're able to do that.

Your husband.

Ms. MARTIN: Yes. My husband is...

ADUBATO: Real patient?

Ms. MARTIN: He is like Elaine.

ADUBATO: He's like Elaine?

Ms. MARTIN: Exactly. He gives me the right to speak. When I don't--if I don't speak or not have the ability, he cuts in. But he lets me speak. And I think I had a miracle. The head of the department of the Alternative in Scarsdale said, 'When you want to come back, come back.' And this is small classes...

ADUBATO: Right.

Ms. MARTIN: ...so I can handle it. So I--so that is wonderful.

ADUBATO: Let me ask you this: You wanted to talk about the community, Shirley. What do you mean by the community? And isn't the community simply the family?

Ms. MORGANSTEIN: It's the first step in the community. You know, centers like the Adler Center, they are invaluable. They are protected communities in the sense that people with aphasia are totally safe there. But people with aphasia need to transition also back to the community from which they came.

ADUBATO: Not as safe.

Ms. MORGANSTEIN: Their synagogues and churches, their YMCAs, their Rotary clubs, their sewing circles, whatever it was in life before aphasia that was of value to them. So to make that more possible...

ADUBATO: Right.

Ms. MORGANSTEIN: ...I think speech language pathologists, for example, are beginning to target not just the person with aphasia but the community.

ADUBATO: But stay on this. Wait a minute. When I was at the aphasia center, one of the things I was struck by was not just how supportive people are but how many different things people are able to do and the choices they have, and just--it's a terrific environment. And the other thing that really bothered me was that I do know that is the exception.

Ms. MARTIN: Yes.

ADUBATO: There are--there are not many like this.

Ms. ADLER: Mm.

ADUBATO: That being said, you go out into the community, you have aphasia, what is the reaction of most people around you at your church, at your synagogue, walking down the street to go to the local store, whatever it is? Do you--should you be explaining to people, 'By the way, I have something called aphasia. You may not know what it is, but it takes me longer to communicate'? I mean, what do you do so that someone doesn't treat you in a way that isn't going to be productive at all? Doctor:

Mr. LAZAR: That's a--that's a real challenge that we're trying to confront, and we have to educate the patients to be more comfortable in saying this about themselves but also educate the community about people who have these kinds of problems.

ADUBATO: For example, translate education, because on our Web site we're going to say what some of the dos and don'ts are when communicating. Educate some folks right now. Give them some tips. First of all, they don't know if someone has aphasia, so how would they--they're being educated to someone--or something they may not recognize.

Mr. LAZAR: I think the first thing that the person without aphasia should assume is that there's not necessarily something else wrong, like the person is drunk or is--has some other problem.

ADUBATO: Do they usually think that?

Ms. ADLER: Yes.

Mr. LAZAR: Yes.

Ms. ADLER: Yes.

ADUBATO: They think someone's drunk.

Ms. MARTIN: Or mentally...

Mr. LAZAR: Or someone has a psychiatric illness...

Ms. MARTIN: Illness, yes.

Mr. LAZAR: ...or is someone who's going to be abusive in some way. So the first...

ADUBATO: So what do they do, pull away?

Mr. LAZAR: Yes.

Ms. MARTIN: Yes.

ADUBATO: Go ahead, keep talking.

Mr. LAZAR: And so you have to teach the community how to be more responsive to people with handicaps in general.

ADUBATO: Translate more responsive.

Mr. LAZAR: To be able to ask the question, 'Can I help you? Is there something wrong?' And rather assume something you could do positive then rather than avoid.

ADUBATO: You see someone out there who is struggling to get their words out. They're not aggressive, they may take longer to say what they want to say, they may speech--they may speak with an impediment that you don't...

Ms. MARTIN: Understand.

ADUBATO: ...understand. And what you are saying, what all of you are saying, is don't pull back, but ask, 'Can I help?'

Is that a fair assessment, Elaine?

Ms. ADLER: Steve, if we could get a Michael J. Fox...

Ms. MARTIN: (Unintelligible).

Ms. ADLER: ...if we could get a national spokesperson to explain this malady, we would be so far ahead of ourselves.

ADUBATO: Hold on one second. Go back to the Parkinson's issue, because Michael J. Fox got out front because he was this powerful celebrity who is such a genuine figure, terrific person. He has done a great deal for helping--in helping people understand what Parkinson's disease is and what it is not. What would it mean if we had a national spokesperson, someone who said, 'I have aphasia'? And by the way, if this person were to go out public, just like Michael J. Fox did for Parkinson's disease--forget about who the person is, Elaine, what would this person say?

Ms. ADLER: 'I am an aphasic. I've had a stroke,' or brain damage, whatever it be, 'and look at me. I'm back in society again. I couldn't walk, I couldn't talk, I had no cognition, but I have pulled myself up by my bootstraps and I am back in society and so can you do the same.'

ADUBATO: But you also told us that--Mike, I'll come back to you--that Mike, for a long time at dinner, would not speak. And you knew he had something to say and the answer as to why you didn't speak, as I remember it, Mike, was that it--you said it would take you so long to speak. Well, if Mike, who now 13 years later is where he is, how much more difficult would it be--or how difficult is it for someone who's a very public person, a high profile, to say 'I have aphasia. I've gotten through this'?

Mike, what would it take?

Mr. ADLER: Guts. But you're looking for the odd person that has the guts and that had stroke and overcome. Don't do with--don't go with the public persona of the celebrity.

ADUBATO: Does it have to be, does it need to be, Barbara, a public person? Barbara, you're shaking your head.

Ms. MARTIN: Yes.

ADUBATO: Because...?

Ms. MARTIN: Yes. Because I, in the beginning, feel if I don't talk, I am like other people.

Mr. ADLER: Yeah. Yeah, yeah.

Ms. MARTIN: Exactly. And in the beginning a public speaker decided you don't want to talk because you will give my inner feelings away.

Mr. ADLER: Yeah. Yeah.

Ms. MARTIN: So it's get--you have to get over that and then you can do it.

Mr. ADLER: Yeah.

Ms. MARTIN: And the...

ADUBATO: What do you think it would mean, Doctor, if a very public person, as respected as Michael J. Fox, as genuine as Michael J. Fox...

Ms. MARTIN: Yeah.

ADUBATO: ...as well liked as Michael J. Fox...

Ms. MARTIN: Yes.

ADUBATO: ...irrespective of the criticism and the absurdity of Rush Limbaugh attempting to make fun of him and saying that he was acting...

Ms. MARTIN: Yeah.

ADUBATO: ...in a certain way to--I still can't get over that one.

Ms. ADLER: He's sick.

ADUBATO: But I digress. What would it mean to the movement?

Mr. LAZAR: I think the impact would be several fold. It gives hope to the people who have trouble speaking that someone who's been through what they've been through is now articulating for them that they can't articulate for themselves. It gives hope to the families that there are people out there of prominence who make this an issue for everyone to become aware of, both within the family as well as in the larger community. It would have an impact on legislation so that--money for research and for altering, perhaps, the insurance laws for greater reimbursement for rehabilitation. So the trickle-down would be all through society.

ADUBATO: So public awareness. These public awareness spots, you see them all over the place. Testimony before Congress. More and more people saying 'I have aphasia. I'm dealing with it.' Family members, caregivers.

Let me say this, this is the first of many programs we will do on the subject. I want to thank you, Elaine, Mike and all of you for doing a tremendous public service. You know you've made a difference.

Announcer: The preceding program has been a production of the Caucus Educational Corporation, celebrating 20 years of broadcast excellence, NJN Public Television, and 13 WNET New York.

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