

NATIONAL APHASIA ASSOCIATION (NAA)

## **APHASIA BILL OF RIGHTS\***

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### **WHEREAS:**

aphasia is a condition, usually acquired as a result of stroke or other brain injury, which impairs the ability to use or comprehend words, but does not affect intelligence, and

as a result of their difficulty communicating, people with aphasia may experience great isolation and frustration in their daily lives, which is often made worse by the lack of information that they receive about their condition, and

many people are never even told that their difficulty communicating has a name - “aphasia” - and the majority leave the health care system without referrals to resources in their own communities, and

people with aphasia must be accorded the same rights as other patients to full and adequate medical treatment, insurance coverage, and research regarding their condition, and

people with aphasia have the same fundamental rights as other members of society, including the right to the pursuit of happiness and a full and positive quality of life,

**NOW, THEREFORE** on September 26, 2005 the Executive Board of the National Aphasia Association (NAA) votes unanimously to approve the following Bill of Rights:

### **People with aphasia have the right to:**

1. Be told, as soon as it is determined, preferably by a qualified speech-language pathologist (SLP), both orally and in writing, that they have “aphasia” and given an explanation of the meaning of aphasia.
2. Be provided, upon release from the hospital, with written documentation that “aphasia” is part of their diagnosis.
3. Be told, both orally and in writing, that there are local resources available to them, including Aphasia Community Groups in their areas, as well as national organizations such as the National Aphasia Association (NAA).
4. Have access to outpatient therapy to the extent deemed appropriate by a qualified speech-language pathologist (SLP).
5. Give their informed consent in any research project in which they are participating.
6. Demand that accrediting health care agencies and health care facilities establish requirements for and competency in caring for people with aphasia.
7. Have access to information in their most functional language through a qualified professional, or through an interpreter and/or printed material, and access to culturally sensitive services when the person with aphasia speaks a language different from English and/or is from an ethnically/culturally diverse background.

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\* The NAA wishes to recognize the prior work of Dennis Tanner, who in 1986 developed the “Aphasic Person’s Bill of Rights” within the context of patient/speech-language-pathologist the relationship.