Supervising Student Research in Aphasia: Poems, Prayers, and Promises
A Discussion Session

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Whatever else it is, this is the age of science
Though there may be different levels of truth,
there is an increasing demand today for factual knowledge derived from objective research and systematic observation. Given this demand, what are the problems and possibilities in aphasia research for students? When, where, and how should students be exposed to the basics, problems, and possibilities of aphasia research?

Discussion began with the question, "How do we facilitate an appreciation for being a clinician-investigator?" It was asserted that, while people give lip service to the necessary connection between the clinic and research, how or if this connection is translated into practice is questionable. Frequently, students are told "the clinic is the wellspring of research" or "a clinician is really a researcher and every client is a research project." While the statements are true, the necessary translation into practice too frequently fails. How often do we force the students to look at the patient as an opportunity to learn something about problem solving? In the clinic, how often do we teach an approach to diagnosis and treatment:

1. definition and delineation of the clinical problem;
2. development of hypothesis;
3. selection and development of appropriate tools;
4. collection of data;
5. analysis of data;
6. interpretation of data, and
7. conclusions.

The methodology necessary for solving speech-language problems in the clinic and in research is the same—the scientific method. Perhaps a fundamental objective in training programs should be to demonstrate to students how the method of science can be applied to diagnostic and therapeutic processes. Meeting this objective may facilitate a growing number of clinician-investigators. "Tis education forms the common mind; just as the twig is bent the tree's inclined." (Alexander Pope. Moral Essays)

In discussing the ideal program to lead students to quality research in aphasia, problems encountered in most University training programs which provide realistic limitations were identified. Frequently, it is difficult to predict when a student will have knowledge in the neuropsychologies and if they will have time to begin and complete a research project. In most training programs, aphasia coursework is offered late in the sequence of courses. Additionally, many training clinics have 4 to 5 aphasic adults and students do not have the opportunity for heavy clinical contact with aphasia until they participate in off-campus hospital programs. The hospital
experience typically comes in the student's second year when it is unlikely that faculty or cooperating hospital personnel are willing to accept them as someone who is interested in research in aphasia, or that the student can complete a thesis option. Such limitations reduce the likelihood of a large number of students producing a reasonably significant contribution in aphasia that is publishable at the Master's level.

Further concern was voiced about students' ability to generate a clean design with well formulated and testable research questions in aphasia. Non-University professionals find themselves spending too many hours doing "remedial work," e.g., showing students that a literature review should funnel down to the statement of the problem and the purposes of the study. Many student proposals related to aphasia that are generated in Introductory Graduate Research courses are not feasible; they are not sufficiently delineated and/or testable.

The responsibility for teaching basic research skills belongs to the University and generally begins in the Introduction to Graduate Study course. If these courses provided the student with a step-by-step preparatory outline for a research project, perhaps the non-University professionals and the faculty aphasiologist would not need to do so much remedial work.

The general discussion questioned if we can prepare students to do research until they do it. Discussion did not support the notion of doing aphasia research to learn something about research. Rather, the emphasis in doing student research in aphasia was placed on contributing something to the literature and in learning more about aphasia.

Questions were raised concerning how many who are training M.A.s were interested in aphasia and what implications this has for a language or aphasiology certification program.

Perhaps, in facilitating the need for further professional inquiry and an appreciation for the tentativeness of research findings, we would benefit in remaining somewhat skeptical.

"Would you, my friend, a finished sceptic make,
To form his nature these materials take:
A little learning; twenty grains of sense
Joined with a double share of ignorance;
Infuse a little wit into the skull,
Which never fails to make a mighty fool;
Two drams of faith; a tun of doubting next;
Let all be with the dregs of reason mix;
When in his mind there jarring seeds are sown
He'll censure all things but approve of none."
(Stephen Duck, Proper Ingredients to Make a Sceptic)