

Survive & Thrive: A Journal for Medical Humanities and Narrative as Medicine

Volume 6
Issue 1 *"I Think You're Muted': Voices from the
Coronavirus Pandemic"*

Article 3

2021

Silent but Not Incommunicado: How the Pandemic Helped Overcome My Communication Barriers

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Recommended Citation

Wais-Hennen, Erin M. (2021) "Silent but Not Incommunicado: How the Pandemic Helped Overcome My Communication Barriers," *Survive & Thrive: A Journal for Medical Humanities and Narrative as Medicine*: Vol. 6 : Iss. 1 , Article 3.

Available at: https://repository.stcloudstate.edu/survive_thrive/vol6/iss1/3

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Cover Page Footnote

Special thanks to David Beard for his encouragement to submit this piece and my partner in life and crime, David Hennen, for his continued support.

Abstract

The unfamiliar and strange apps and workarounds that many found themselves using during the COVID-19 pandemic have become an important ally in my daily life. Honestly, they have been critical to my very existence. I have largely become mute during the pandemic, meaning I have lost my ability to speak due to a progressive neurological disorder. In this piece, I will explain how I have communicated better with my peers and my community because of various workarounds developed to promote social distancing during this pandemic. I will also reflect on these experiences via Burke's concepts of screens existing as a way of "direct[ing] the attention and shap[ing] the observations" of others. While this is not research in the strictest sense, it is lived experience that is embedded with a few theoretical communication applications.

Silent but Not Incommunicado: How the Pandemic Helped Overcome My Communication Barriers

To many (most) friends and colleagues, this year of the pandemic was a time filled with stress and inconvenience due to the issues that came from social distancing. My peers and I have all been asking ourselves the following questions: "How can I teach my classes online as effectively as I had face to face?" "How can I buy groceries without risking being infected with COVID-19?" "How can I socialize with my peers when I cannot see them?" All these questions and more were at the forefront of my mind, but another issue was even more persistent: how can I do this without a physical voice? During the pandemic, I completely lost my ability to speak due to a progressive neurological disorder. This was not what I had planned in my life (before this issue, I ran a successful WAC QEP and was teaching at a small liberal arts college in Kentucky). The pandemic was a massive help to my overall quality of life. I hate to speak about the positives of a worldwide pandemic. I know that at the time of writing this, over 600,000 Americans and upwards of 3,400,000 people worldwide have perished due to this horrible disease. Still, I intend in this piece to speak to the positive and innovative communication tools that have either become more popular (and therefore used) or were invented because of the pandemic's social distancing requirements.

I will also tie these experiences to Burkean terministic screens. Burke states in *Language As Symbolic Action* that "any such screen necessarily directs the attention to one field rather than another. Within that field, there can be different screens, each with its own ways of directing the attention and shaping the range of observations implicit in the given terminology" (Burke, 1966, p.50). In this piece, I will discuss how each pandemic workaround has become its own screen for me, it "directs the attention and shapes the observations" of others past my disability and to my words. In this way, these modes of communication act as a screen that allows for my actual terms to be understood effectively by others, something that is currently impossible with my speech disorder.

My saving grace, academically, has been the Zoom or WebEx meeting. I know that many of the readers of this journal are sick of them, but for someone who can not speak during a typical face-to-face meeting, the chat function is absolutely essential! I can wave my hands or ring a bell (I have one on my phone) to help alert members of the meetings that I have messaged something important to the conversation in the chat. This has been so important to my professional

existence. Because of the "Zoom reality" that has come with the pandemic, I have participated in two different conference-type experiences over the past year. I created videos ahead of time for viewing and then participated using the chat function in the program. Without this, I seriously doubt that I would have been able to participate in my field as effectively. Zoom as a Burkean screen is a physical one, that of a computer, but because of it, my actual words can be understood in a very effective way. In a face-to-face meeting, I would have to type my messages into my speech app on my phone and then play them. This would not have occurred in such a way that most people could have heard me in a traditional face-to-face meeting. As a small female in stature, it is hard enough to be heard in one of these meetings when you can speak loud enough to really project, much less using a small phone-based speech app. Zoom allows me to "direct the attention" of the conversation to my ideas and not to the fact that I can not speak. It further works to "shape the observations" of those that I am working with to what I have to contribute to the conversation and not having others dwell on the fact that they can't hear the robot-sounding speech app that I use on my phone.

While Zoom was something that existed in my life before the pandemic, Brightwheel did not. Brightwheel is an app that my daughter's preschool adopted in response to the pandemic. Before this, we relied on random bits of paper brought home and verbal communication during pick-up and drop-off to know how she was doing, if and what she was eating, etcetera. Now, I do not have to worry about trying to have a conversation with the people at the preschool entrance. Instead, I can communicate through the app with her specific teachers. I go to the message center of the app and ask a question, such as "Can I bring cupcakes to school for Anita's birthday?" and by the next day, I have an answer from either her teacher or the director. I asked the director why they adopted this program when they did, he said that it was something that they had wanted to do for a while, but the pandemic forced the issue because no papers could be brought home, at least at the beginning of the pandemic. Also, not having to hang around the office and wait for news on your child helps to promote social distancing. This Burkean screen is also a physical one. The Brightwheel app (located on both my computer and my phone) allows me to "direct the attention" of the conversation to my concerns about my child and not to the fact that I have this disability. It further works to "shape the observations" of the people who care for my daughter that I am both a present and competent parent. This is something that might not be as obvious if I was trying to communicate with them face-to-face through a voice app as I fall over (my balance has also been affected by the neurological disorder) while trying to communicate with them by vigorously typing into my phone.

Another set of apps that have been promoted due to the pandemic are fast food shopping apps. Few things are as bad (when it comes to communicating) as having to order a sandwich at a Subway with no or very little ability to communicate quickly with others. Typing it all into your phone (for text-to-speech communication) and then waiting for them to put it on your sandwich and then ask four or five more sandwich-related questions takes forever! All the while, everyone behind you is getting antsy, and so you just start pointing and grunting! I was so happy when they came out with their app! All I have to do is go to the app on my phone, punch in what I want, and in 20 minutes, I go and pick up my sandwich. Then all I have to do is go in with my phone app and type into it, "Hello, my name is Erin Wais-Hennen. I ordered a sandwich to pick up on the app." They are always happy to give me my sandwich! This app (and others) is also a physical Burkean screen. These apps (located on my phone) allow me to "direct the attention" of

the people who are working at the Subway (and other places) to my order, and not to the fact that there is this woman trying to communicate through her phone while the line grows. It further works to "shape the observations" of the people who work there that I am a competent paying customer who just wants her sandwich and should not be treated any differently. This app has been very successful for me in helping me to get my sandwich and not exasperate the people working there! Pizza Hut also has an app, which is awesome because now I no longer have to rely on my spouse to call in my pizza order. I can do it all on my own! These apps are not just convenient; they are empowering for people with speech disorders.

Another empowering aspect of this pandemic was the proliferation of self-checkout options at our local stores. You may be wondering, why is this a communication issue? Well, I live in a medium to small-sized town in rural Kentucky, and when you check out your groceries with a traditional checkout clerk, they want to talk with you about everything, from the weather to the local sports team or my cute and spunky child. Having to either bring out my phone and start typing (which slows down the line for everyone) or wait for my four-year-old to say something like "my momma lost her voice like Ariel" (of *Little Mermaid* fame) is pretty demoralizing. I would rather just check out my own groceries. For this reason, I choose to get my groceries most often at the store in my town with this option. This checkout option allows me to "direct the attention" of the people who are working at the store away from the fact that I can not speak. This privacy, even in a small rural town, is nice. It further works to "shape the observations" of the people who work at the store, that although I am using a mobility cart, and my four-year-old is riding in front of me (and loving it). I am a capable shopper who can effectively both shop and manage a four-year-old who can be helpful, but also a bit squirrely at times!

Aside from daily concerns like feeding my family, communicating with our childcare provider, and maintaining a professional life, I have been dealing with another issue during this time: doctors' visits. Not only was I diagnosed with this neurological disease during this pandemic, but as things were heating up with COVID in February, we found out that we were pregnant with our son. It was entirely unexpected but very much a happy moment for our family. Here the divide between access and empowerment has been stark. With my neurologists at the University of Louisville and Cleveland Clinic, their patient portals and telemedicine have been great. If I have a question, I can go to my laptop, punch in my username and password, and I message my doctor. I can also see all my tests. Although both the telemedicine and patient portals were established a decade ago at Cleveland Clinic, at the University of Louisville, both were implemented or were significantly upgraded during the pandemic.

Things in rural Kentucky are a bit slower. I still must have my spouse call and make appointments for me for my family doctor, and my OBGYN (who was wonderful throughout this whole experience) is part of that same small-town hospital that lacks the basic infrastructure to deal with electronic patient charts in large numbers at a rapid rate, much less have a functioning patient portal. So, there are issues with navigating a small-town medical community with a communication disability. One perk of it being a small town is that the OBGYN folks came to know us (since we were there almost weekly), and they became powerful advocates for us. If looks could kill, we would have died dozens of times! Most everyone was not allowed a spouse or anyone with them during any pregnancy exams, including the ultrasounds, but my spouse was allowed because I needed him for communication. Also, while I was in the hospital with our son,

these people were all about empowering me to make decisions on my and my son's behalf. Granted, I was using my phone and my thumbs, but it was a great experience.

Using the patient portals has allowed me to "direct the attention" of the doctors to my concerns about my care. Having to physically go to Louisville or Cleveland and have my husband speak for me or having him call on the phone takes away from the doctors' own observations of me and shapes their impressions of how capable I am to make my own healthcare decisions. While I never wanted to be the kind of person who talked about their level of education with others, the reality is that we start most introductions with medical professionals with a brief bio, including that I have a Ph.D., that I currently teach online, and that I am pursuing a second masters at Purdue University in instructional design. This was after two different interactions with doctors that ignored me and only spoke to my husband until he "directed their attention" to the fact that I have a speech disability, not an intellectual disability. While a perk of living in a small town is that your doctor knows you and remembers you, it has not been as easy to deal with the staff that you have to get through to see some of these doctors physically. It is much harder to get your needs met when you have to speak with two, sometimes three, different people before you actually get to see your doctor. The looks of "what?" and having to give them my license when I check-in. I have to give them my license because they can not understand the speech app. I deal with this every time I see my family doctor. I have found that it is nearly impossible to "direct the attention" of the staff past "this is weird" to actually getting the care that I need. This is such an issue that I bring my husband with me just so that he can talk for me before I get in to see my doctor.

A great deal has been said about Kenneth Burke's concept of language as symbolic action. I want to think about the existence of language as actual action. By this, I mean situations in which an action takes the place of language. The textbook example of this is if someone gets up and leaves during a conversation, that action indicates that they don't want to continue that conversation at that moment. For me, life has turned into a language of thumbs. By this, I mean that my husband and I often communicate by him, asking me questions and waiting for a thumbs up or down. There is no time for us to learn sign language, and honestly, no one else in our small town to talk with, even if we did. This communication is not language per se in the same way that sign language functions. Instead, it is a reaction to words, and so it is more of an action and less of a function of language. So, we spend time figuring out daily tasks, him asking questions, and me replying through my thumbs, "Have the dogs gone outside?" "Have they been fed?" "Has the cat been fed also?" We do this all through thumbs. You should see us go through the potty questions about our four-year-old, it is funny, but I will spare you the full minutia of my daily life.

My training as a rhetorician told me that life was about communicating with words. Honestly, in retrospect, I learned from this experience that many things could be expressed without words, as the "thumbing" example from above testifies. There is also hugging my daughter, even when she giggles and says, "you squeeze me too much, Mom," but I know that she loves it. Also, like many families during the pandemic, we spend a lot of time together. One thing that I love is, is when my daughter and I snuggle on the couch, between episodes of Minnie Mouse and Bluey. In these moments, we have wonderful "discussions" without words where there is a shared understanding that we love each other and the time that we share.

