

APHASIA AS AN ORGANIZATIONAL PATHOLOGY: TAKING SOME LESSONS FROM APHASIA IN NEUROLOGY

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Abstract

Individuals, groups, organizations and societies experience various problems. Some problems at a social analysis unit can also be beneficial to see some difficulties at a different analysis level and produce some solutions for them. In this study, it is discussed that whether a neurotic disorder experienced by some individuals can be used to define and understand better some communication based organizational problems or not. Therefore, the aim of this study is to obtain benefit from concept of aphasia for gaining deeper insights about particularly external communication problems of organizations. In this study, organizational aphasia is conceptualized as communication problems in organizations stemmed from top management and affect relationships of organizations with their stakeholders in external environment.

Keywords: Pathology, Organizational Pathology, Aphasia, Organizational Aphasia.

Clasificare JEL: M0, M1

Introduction

Previous studies in the field of management and organization (e.g. Baruch & Lambert, 2007) have used some disorders at individual level to explain some organizational problems and produce some solutions. For example, Kets de Vries and Miller (1985) showed that how troubled personality of a CEO can affect culture, strategy and structure of his/her organization. It is obvious that one of the important problems for organizations is some lacknesses in skills of external communication. For example, Patel et al. (2005) discussed the importance of practices of public relations in creation and maintainance of organizational legitimacy. By taking some support from concept of aphasia, a special type of communication problem in organizations can be determined and some solutions for this problem can be produced. For this aim, firstly, the concept of aphasia will be defined. Then, meanings of organizational pathology and organizational aphasia will be clarified and then, basic assumptions of this concept and some recommended solutions for this disorder will be shared. The study will be ended with a part of conclusion including some recommendations for future studies.

1. Aphasia

Some examples of discussions on the relationship between head injuries and loss of speech go back to ancient Egyptian civilization between 3000-2500 BC (Thomsen, 1975). In addition, although they didn't use the concept of "aphasia"; Schimidt in 1670, Morgagni in 1718 and Gall in 1810 suggested that language problems of individuals may stem from disorders in

their brains. Finally, Broca in 1861 preferred to use of “aphemia” instead of “aphasia” to show language difficulties originating from disorders in brain (Özcan, 2009). However, as far as known, the concept of aphasia has been used firstly by Trousseau in 1874 (Kargın, 1993).

Aphasia is a focal neurotic disorder stemmed from some damages in the parts of human brain responsible from language functions and result in some difficulties in communication functions of individuals such as hearing, reading, writing, understanding and speaking (Memiş & Tülek, 2004; Özcan, 2009; Armağan, 2011; Dokur, 2013). However, it is mainly related to problems in speaking and understanding of conversation (Dokur, 2013). Since language functions are localized in mostly left hemisphere, aphasia is often result of a pathology in this side of brain (Armağan, 2011). In addition, in terms of degree of disorder in understanding and self-expression, there are various types of aphasia such as anomic, Broca, conduction, global, transcortical and Wernicke. For example, in Broca’s aphasia, patients know meanings, however, they can’t express their feelings and ideas with appropriate words called as “verbal paraphasia” (McCaffrey, 2001). This type of the disorder is also named as “motor aphasia”. For example, wrongly saying “cheese” instead of “butter” may be an example for this type of aphasia. On the other hand, in Wernicke’s aphasia, patients are fluent in speaking and they can make good sentences, however, they don’t understand what the other side of communication process says or writes (Tarhan, 2010). This is also called as “sensory aphasia”.

It may be a congenital or acquired disorder (Cohen et al., 1976; Kargın, 1993) and it may be a result of some other possible disorders in human body such as hemorrhagic strokes, traumatic brain injuries, brain tumours, epilepsy and infections in central nervous system (Kargın, 1993; Armağan, 2011).

Aphasia has some negative consequences for patients. Patients experiencing some problems in understanding and speaking (self-expressing) may feel loneliness and get into depression. Furthermore, aphasia may affect quality of life of individuals (Toğram & Maviş, 2012). Therefore, it should be diagnosed and treated immediately. Although aphasia is a treatable disorder, amount of needed treat depends on level of disorder. Therefore, degree of treat will vary across patients (Memiş & Tülek, 2004). Damages in brain can be mild or higher in terms of location and intensity of aphasia, some demographic and socio-cultural factors of patients (Toğram & Maviş, 2012). When damages are mild, this type of aphasia is called as “dysaphasia” (Özcan, 2009).

Finally, in USA, about 80 thousands of people experience one type of aphasia every year (Özcan, 2009). Therefore, regarding it as a common disorder is possible.

2. Organizational Pathologies and Aphasia in Organizations

Organizational pathologies are deficiencies and malfunctions that may put life of an organization into danger or decrease it’s effectiveness at least. These may be organizational crimes, corruptions, politics etc. Like pathology studies in psychology aiming at understanding and curing mental disorders of individuals, studies of organizational pathology endeavour to diagnose and treat disorders to enhance survival chances of organizations (Samuel, 2017).

There are some other theories that focus on factors affecting survival chances of organizations. For example, population ecology (Hannan & Freeman, 1977) aims to explain birth and death rates in large populations of organizations with external and contextual predictors. On the other hand, organizational pathology endeavours to explore and explain factors affecting

organizational disorders in a single organization or a small sample of organizations with some internal variables such as leadership, culture, structure and strategy of organizations (Samuel, 2017).

There are some studies in the literature of organizational pathologies introducing several disorders. For example, Kets de Vries and Miller (1985) suggest that neurotic personality of top managers can cause some problems in organizations decentralized and managed by small group of dominant managers. In other study, Shenkman (1996) mentions about “corporate axorexia”. According to him, it implies much more downsizing of a company than it needs. In addition, Othman and Hashim (2004) focus on the concept of “organizational amnesia” and define it as “the failure to utilize learning that has taken place to make the necessary adaptation or create value” (p.276). In a similar vein, by using the concept of “organizational anxiety”, Baruch and Lambert (2007) claim that organizations facing some difficulties can experience anxiety and this disorder in organizations can be diagnosed and cured in a very similar way to cases of anxiety at individual level. Finally, by citing to study of Perez Rios published in 2012, Allende et al. (2017) mention about three types of organizational pathologies such as “structural”, “functional” and “information system and communication channel”.

Indeed, organizational aphasia isn't completely new concept for management and organization field. It was taken into consideration in some few previous studies. For example, organizational aphasia was defined by Shenkman (1996: XVI) as “inability to see a business's organization as a source of creativity and strenght”. However, a different view to organization aphasia is preferred here. In this study, organizational aphasia means some communication difficulties of organizations caused by top management and frequently result in some problems with stakeholders in external environment. For example, some of top managers of an organization charged with representation of related organization in crucial meetings with stakeholders can't select the most appropriate words to express position of their organization. Top management of an organization can also be unsuccessful in correctly reading messages of various stakeholders. Reason for disorder in this situation may be quit of some key top managers from organization who took responsibility of external communication in the past.

Main assumptions about organizational aphasia can be found below:

- Organizations are natural and open systems. They born, grow, mature and sometimes die. In addition, they are open systems since they have permeable borders and continuously interact with their environments by receiving inputs, processing them and sending outputs back to environments.
- Organizational aphasia is a disorder or disease that can affect survival chances of organizations in a negative way.
- Aphasia is a disorder based on language skills related to human brain. Therefore, since the top management teams of organizations can be regarded as brain of organizations, organizational aphasia mainly focuses on communication problems caused by top managements in organizations.
- Aphasia may be congenital or acquired. Therefore, even some organizations don't have external communication problems currently, it doesn't mean that these healthy organizations will not experience an aphasia during next periods of their life spans.

- Aphasia may be related to problems in speaking (e.g. Broca’s aphasia) and/or understanding (e.g. Wernicke’s aphasia). Therefore, organizational aphasia may be related to lackness in skill of self-expression of an organization and/or in understanding messages coming from external environment.

Some solutions can be produced by organization to cure organizational aphasia by following cases of individual level aphasia as presented below:

- Existence of aphasia in individuals is evaluated with some appropriate tools such as “Aachen Aphasia Test”, “Boston Diagnostic Aphasia Examination”, “Ege Aphasia Test”, “Gülhane Aphasia Test” and “Western Aphasia Battery” (Toğram & Maviş, 2012; Ulusoy & Kuruoğlu, 2013). Therefore, as was done in Allende (2017), some measurement tools should be improved to check that whether related organization experiences organizational aphasia or not.
- In aphasia, one of success factors for treat is an early diagnosis (Sadiyeva, 2004). Therefore, organizations should build systems controlling effectiveness of their external communication efforts. When some performance decreases are detected, needed cures should begin. Furthermore, preventive medicine has become popular in recent years. In organizations, some preventive tools can be improved for organizational aphasia.
- In individual cases of aphasia, doctors (or other responsible medical personnel such as nurses) should re-teach understanding and speaking to patients (Memiş & Tülek, 2004; Tarhan, 2010). During the therapy, a team including people coming from various disciplines such as linguistics, psychology and neurology should work together for an effective intervention (Sadiyeva, 2004). In a similar vein, organizations suffering from aphasia can re-learn some critical points of communication with their external environments by some trainings. During these trainings, some linguists, psychologists and sociologists should jointly work to provide more effective results.
- Organizations may also employ an aphasiologist at their top management or as an asistant to top managers.

3. Conclusion

Individuals can experience some psychological and physiological disorders. These experiences can also be used to understand and solve some problems in organizations. In this study, it is claimed that aphasia as an individual level disorder can provide some benefits to researcher in management and organizations field to see and treat some external communication problems.

This is an introduction level study. In future, cases showing aphasia and solutions for it in organizations can be valuable. In addition, some tools for diagnose of organizational aphasia can be improved.

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