

The majority of available aphasia resources are based on English-speaking persons with aphasia (PWA), making unbiased materials for non-English PWA difficult to come across (Beveridge and Bak, 2011), thus contributing to disparities in aphasia care. Other contributors to disparities in aphasia care include financial and geographical barriers. Thus, two potential solutions to helping address disparities in aphasia care are: 1) develop free, culturally appropriate therapy materials for professionals working with non-English speaking PWA to help reduce unwarranted biases derived from Eurocentric practices, and 2) provide free, at-home access of these therapy resources with adequate training to PWA and caregivers, to help relieve some of the financial and geographical barriers that follow treatment. The purpose of this study is to investigate the efficacy of a freely available, culturally appropriate web-based naming intervention (<http://bilingualnamingtherapy.psu.edu/>) developed by Sandberg, Gray, and Kiran (2020) when led by clinicians and trained caregivers. We hypothesize that 1) clinician-led treatment using the Website will improve object naming, and 2) caregiver-led treatment using the Website will improve object naming. Four PWA completed ten weeks of a biweekly virtual naming therapy in either English or Spanish using bilingualnamingtherapy.psu.edu. The SFA-based treatment was divided into two five-week sessions of clinician-led (phase 1) and caregiver-led therapy (phase 2). Findings support our hypotheses, contributing to identifying viable solutions to minimize inequitable disparities that exist in aphasia rehabilitation.