Co-constructing Narratives using the ‘My Story’ Protocol
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Background
Storytelling is a fundamental aspect of being human.¹ In fact, stories contribute to our identity and provide a lens through which we view ourselves.² Stories are a way to make meaning out of traumatic events, such as in the case of having aphasia.³ People with aphasia are disadvantaged in participating in this meaning-making experience due to their reduced language capacity — a necessary tool in storytelling.⁴ Speech-language pathologists (SLP) are particularly well suited for supporting identity renegotiation through narratives using their skills and expertise. Further, SLPs report having a role in supporting the renegotiation of identity in their clients with aphasia, yet also report not having the knowledge or skills to target such work directly.⁵ Generating personal narratives in therapy may be one way to target identity more directly. Interest in how the process of creating stories relates to identity renegotiation and improved well-being is emerging in aphasia research and practice.⁶-¹⁰

‘My Story’ Protocol Aims
This poster highlights one method of co-constructing narratives, the ‘My Story’ protocol (Strong, 2015). The premise of the ‘My Story’ protocol is that targeting communication and language through personal narratives about stroke and living with aphasia may impact identity in persons with aphasia, which may contribute positively to their adjustment to living with aphasia. The ‘My Story’ protocol was designed to co-construct and share a personal narrative about their life. The narrative used the following framework²:
• Who I was before my stroke and aphasia
• My stroke and aphasia
• Who I am today
• My future goals

Development of the ‘My Story’ Protocol
Methods for Supporting Identity through Narratives Which Influenced the ‘My Story’ Project
• Guiding Principles for Clinicians Co-Constructing a Personal Narrative with Persons with Aphasia
• Protocol for Co-Constructing a Personal Narrative for Persons with Aphasia

‘My Story’ Project Sessions
Conducted over 4 weeks in seven 90-minute sessions.
• Session 1: introduce concept of story co-construction
• Sessions 2-5: story co-construction, PowerPoint platform, printed copy provided after each session
• Session 6: practice session which involved editing
• Session 7: group celebration where stories were shared with all participants, researchers and their invited guests

Clinical Applications
Co-constructing personal narratives about stroke and life with aphasia may contribute to the well-being of persons with aphasia. SLPs may play a role in supporting this process. Clinical tools for co-constructing personal narratives with persons with aphasia are emerging in the literature but limited. The ‘My Story’ Protocol provides one method for supporting SLPs in personal narrative co-construction. Future projects should explore training of SLPs in concepts of identity, relationship of narrative to identity, and co-construction methods.

References