Introduction

Each aphasic stroke survivor has a unique stroke story, although many have to struggle to communicate it. Clinicians should learn to help people with aphasia (PWAs) communicate their stroke and recovery stories, and other stories, for several reasons, all relevant to the Life Participation Approach to aphasia.

1. PWAs need people to communicate with them directly. Lloyd et al. (2006) note that much qualitative research has effectively omitted people with communication difficulties, selecting articulate participants and interviewing caregivers rather than PWAs about their experience. They argue that it is essential to interview those who actually have language difficulties to respond effectively to their needs.

2. PWAs need to tell stories, especially the story of their stroke, and clinicians need to hear them.

“... our voice is the story we construct to make sense of our lives are fundamentally about our struggles to reconcile who we believe we were, are, and might be in our heads and bodies with who we were, are, and might be in the social contexts of family, community, the workplace, ethnicity, religion, gender, social class, and culture writ large.” (McAdams, 2008)

Illness narratives can help accomplish that goal.

Illness narratives are just as important as hard neuroscience.” (Oliver Sacks, 1993)

3. Clinicians need to facilitate stroke narratives and learn from them. Each story furthers our understanding of what it feels like to have a stroke that compromises the easy communication that most of us take for granted. Each story also contains implicit or explicit clues about what might help the story-teller communicate the story more successfully.

Objective

Describe one way to use AphasiaBank stroke stories as a teaching/learning tool for facilitating story-telling.

The Exercise: for a group, including students and instructors


Students each choose and present a video, demographic and test data for one AphasiaBank participant and tell what kinds of support they would try and why. Group/instructors discuss.

No “right” or “wrong” answers, just thoughtful possibilities

Stories from a wide variety of PWAs are available, with video linked to transcriptions:

330 Stroke stories in AphasiaBank as of March 2015

Age range = 25 to 91 years old

Aphasia types, by Western Aphasia Battery (WAB) classification:

<table>
<thead>
<tr>
<th>Type</th>
<th>No.</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anomic</td>
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<td></td>
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<tr>
<td>Broca</td>
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<tr>
<td>Wernicke</td>
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<tr>
<td>Conduction</td>
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<tr>
<td>Global</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Transcortical Sensory</td>
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<tr>
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<td>Normal Range</td>
<td>31</td>
<td></td>
</tr>
<tr>
<td>No WAB</td>
<td>19</td>
<td></td>
</tr>
</tbody>
</table>

WAB Aphasia Quotients range from 10.8 to 99.6.

Examples

Story improves with help

Summary

Many fields, including speech-language pathology, are increasingly understanding the importance of telling personal narratives, including illness narratives.

References


