My Life, My Story:
A Narrative Life History Activity to Humanize the Veteran Patient Experience

Susan Nathan

 https://orcid.org/0000-0002-0591-1378
VA Boston Healthcare System, USA & Harvard Medical School, USA

Andrea Wershof Schwartz
 https://orcid.org/0000-0002-2076-6068
VA Boston Healthcare System, USA & Harvard Medical School, USA

David R. Topor
VA Boston Healthcare System, USA & Harvard Medical School, USA

EXECUTIVE SUMMARY

Contemporary healthcare institutions strive to provide humanistic and patient-centered healthcare. To reach this goal, healthcare systems must first look to the patient as a person, before treating a specific malady or pathology. This chapter will illustrate a humanistic approach to the provision of healthcare using the case of the My Life, My Story program in the United States Veterans Health Administration. My Life, My Story is a patient-centered, life story work intervention where learners complete a life story interview with a veteran using standardized prompts from the My Life, My Story protocol. This chapter will describe the My Life My Story program at the VA Boston Healthcare System, the steps and rationale in program development and discussion of impact on the learners, the patients, and humanizing the healthcare system.

INTRODUCTION

We can sometimes forget that our patients are more than their medical or psychiatric conditions. They are whole people with a lifetime of history that is influencing how they are coping with their condition and interacting with their providers. I think that the project allows us as providers to remember this and might also be a reminder to the patient that they are more than their medical condition. -Learner comment

Contemporary healthcare institutions strive to provide humanistic and patient-centered medical care. To reach this goal, healthcare systems must first look to the patient as a person, before treating a specific malady or pathology. To train future health professions practitioners in a way that emphasizes humanistic care, it is necessary to operationalize what it means to "know the patient as a person." This chapter will illustrate a humanistic approach to the provision of healthcare using the case of the My Life, My Story (MLMS) program in the United States Veterans Health Administration (VHA).

Life story work is a term given to biographical approaches in health care that give people the opportunity to talk about their life experiences (McKeown, Clarke & Repper, 2005). MLMS is a life story work intervention where learners complete a life story interview with a veteran patient using standardized prompts from the MLMS protocol. The interview is written up as a concise, roughly 1,000-word-first person narrative, which is then read back to the veteran. The veteran may provide feedback and adjustments before it is entered into the electronic health record with the veteran's approval, available for subsequent health care team members to view. The veteran is offered copies of the story for themselves, which they may share with family or friends. After completion of the story, interviewers can debrief their experience either in a facilitated small group setting with other learners or directly with their educational preceptor.

This program provides a direct service to the veteran, in the form of the learner bearing witness to the veteran's life story. The veteran is allowed a degree of agency in the telling and documentation of his or her own story. This is in contrast to usual healthcare, which is typically delivered in a hierarchical manner and with emphasis placed on the perspective of the healthcare system. The veteran can review and edit the story that is entered into the healthcare record, unlike the typical healthcare notes that only reflect the clinician's voice. The use of the first-person voice empowers the veteran and allows them to tell their own story as the expert in their own lived experience, rather than being relegated to the passive, third person. Rather than being a transcript of the interview, the learner writes a story, allowing the narrative to capture the associated lyricism and emotional impact on the veteran, the learner conducting the interview, and the healthcare team who have access to the final

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