

## Investigation of the linguistic construction of Identity in Individuals with Traumatic Brain Injury

What people are, to themselves and others, is a product of a lifetime of interpersonal interactions superimposed over a very general ethological endowment (Harré, & van Langenhove, 1999). According to Eckert (2000) an individual is a linguistic agent building social meaning in their mutually-engaged community. Individual identity is constructed with group identities, and engagement in the world is a constant process of identity construction (Eckert, 2000). Harré and van Langenhove (1999), also support this social constructivist view of social phenomena generated in and through conversation and conversation like activities. Selfhood, therefore is manifested in various discursive practices such as telling autobiographical stories, taking responsibility for ones actions, expressing doubt, declaring an interest in care, decrying the lack of fairness in a situation and so on (Harré & van Langenhove, 1999). As described by Schiffrin (1988) 'conversation is... a vehicle through which selves, relationships and situations are socially constructed'.

Much of the research on traumatic brain injury (TBI) indicates that identity and sense of self plays a significant part in the rehabilitation process (Ylvisaker & Feeney, 2000; Cloute, Mitchell & Yates, 2008; Fraas & Calvert, 2009). Ylvisaker and Feeney (2000) describe how an individual without a positive identity or sense of self due to the disability, that is reinforced through their interactions with others, may continue to result in intensified negative reactions from the person with disability. Negative behaviour and the associated oppositional sense of identity can feed on themselves and once constructed, this negative cycle has the power to trigger negative somatic states, feeding a self-sustaining loop that does not require negative feedback in the environment (Ylvisaker & Feeney, 2000). Similarly a study by Shotton, Simpson and Smith (2007), found that individuals have subjective experiences of coping and appraisal after TBI and such experiences were salient in relation to their overall adjustment. The participants in this study that had adjusted well after the TBI reported the need to come to terms with their abilities and learn to set themselves achievable goals, in a sense accept their disability and allow it to become part of their identity (Shotton, Simpson & Smith, 2007).

It has been well established that identity is an important factor in the rehabilitation of those with TBI (Ylvisaker & Feeney, 2000) and that such identity is socially constructed through interactions with others in the environment of the individual (Eckert, 2000). Cloute, Mitchell and Yates (2008), one of the few studies that look at identity construction use an ethnographic interview to establish evidence of identity construction as well as the identities constructed. This study plans to go beyond this and investigate the process of identity construction through language in everyday communication settings, outside of the therapeutic environment. Therefore, this study investigates how identity is linguistically constructed in the interactions of those with TBI and their communication partners.

A qualitative case study design is employed in the investigation of this phenomenon as the different manifestations of TBI and diverse consequences due to an idiosyncratic mix of physical, cognitive and affective impairments (Cloute, Mitchell and Yates, 2008) preclude generalisation across participants. This case study focus is suited to the context-specific analysis of the discourse observed using the methods of analysis described by Systemic Functional Linguistics (Halliday & Matthiessen, 2004).

Systematic Functional Linguistics (SFL), as a method of interaction analysis, has gained increasing popularity in the field of clinical communication and the framework that will be adopted in this research is outlined by Halliday and Matthiessen (2004). SFL is socially orientated and recognises the importance of the context in interaction, while its analytical focus is on the choices that individuals make in order to create meaning with others (Halliday & Matthiessen, 2004). In SFL the meaning making is viewed in terms of strengths rather than deficits, it integrates the linguistic and extralinguistic aspects of conversation and characterises the language function by three major social 'meta-functions' (Müller & Wilson, 2008). The ideational metafunction is to understand and represent the world and the speakers' experience of the world, and can be experiential, meanings at and below clause level and logical, meanings created at the level of complex clauses. The interpersonal metafunction involves the representation of the speakers' experiences to each other, that is, the roles and relationships they form with on another. Finally, the textual metafunction is the facilitating metafunction, referring to the speakers' ability to organise and construct the text in a cohesive manner. SFL is of late becoming more popular in research regarding individuals with TBI. Togher, Hand and Code (1996), Togher et al. (2006) and Jorgensen and Togher (2009) all use SFL components to examine and investigate the differences in the communication of those with TBI in various different situations and with various communication partners. It has become apparent from such studies that the social distance, the world knowledge and the nature of the interactions has an impact on language choices made by the individual, their communication partners and hence the construction of identities (Kilov, Togher & Grant, 2009).

For the purposes of this study participants can be categorised into primary participants, the individuals with TBI, and secondary participants who act as conversational partners for the individual with TBI. Kennedy et al (2008) in a review of the literature in traumatic brain injury identified that there is a lack of research on veterans that have sustained such brain injuries on deployment and since these blast injuries differ from other types of TBI such individuals are the focus of this research. Participants must also have no history of neurological deficits prior to the injury. The secondary participant is a caregiver, close friend or family member of the primary participant who typically interacts with the primary participant on a regular basis. Additionally, the case study approach, where each case is examined separately, means that it is most suitable to have a small number (3-6) of primary participants.

A video recorder, set up inconspicuously in the participants home, provides the data for this study. Participants were asked to record two hours of video over a period of one week, at times when they typically have conversations, since this was found to be effective in obtaining typical interactions in by Wilkinson et. al (1998). Transcriptions of these interactions then provide the data for analysis. SFL, (Halliday & Matthiessen, 2004), as described above is the framework for investigating how linguistic recourses are used to create meaning and collaboratively construct identity in the conversation. The focus of analysis is on the ideational meanings created and interpersonal metafunction (Halliday & Matthiessen, 2004) in describing how the exchange of information results in the construction of an individual's identity or sense of self.

This study is currently in its beginning stages, and due to the qualitative approach taken results cannot be predicted or hypothesised. Results will therefore, be available for report at the Clinical Aphasiology Conference in June 2011, after the data analysis has been carried out.

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