**Introduction**

- Peer mentorship can be applied to a variety of populations.
- A need exists in the stroke survivor community to meet and build relationships with others living with aphasia.

**Principles of Mentorship** (Zachary, 2006):
- Alignment: matching a mentor and mentee with a common vision and understanding of living with aphasia.
- Accountability: setting goals, defining expectations and measuring success of the program through the mentor and mentee's perspectives.
- Communication: matching the mentors' and mentees' communication abilities coupled with utilizing compensatory strategies, such as supported conversation (Kagan, 2001), to create a comfortable and trusting environment.
- Value: fostering and developing self-worth, as modeled through the mentors, to promote and build confidence for the mentees as functional communicators.
- Education: defining and educating the clinical staff (physicians, psychologists, SLPs, social workers, etc.) on the purpose of the program and the role of mentors and mentees.

**Mentorship Program at NRH**

- The Aphasia Mentorship Program began when a former NRH patient expressed the desire to volunteer his time in order to help others who were also living with aphasia.
- The Spinal Cord Injury (SCI) Mentorship Program at NRH was a springboard for development of an aphasia-focused peer support program.
- The mission of the program is to create an enriching, safe environment to enhance self-confidence and self-worth through communication with a peer.
- To date, 16 people have participated in the program.

**Process**

- Referral from primary outpatient SLP
- Mentor completes information form (with help of family or SLP if needed).
- Mentorship matches are based on location, communication style, availability.
- First meeting of mentor and mentee takes place at NRH, usually at end of a SLP session.
- Mentor and mentee "own" setting up meetings thereafter.
- Pair meets weekly for one hour x 8 weeks.
- Both mentor and mentee complete satisfaction surveys at end of 8 weeks.

**Case Study**

**Background Information**:
- 55 year-old female
- Sustained L intracranial hemorrhage w/ subsequent craniotomy 1/2007
- Past medical hx: Protein C deficiency, seizure disorder, depression
- Bachelor's degree in accounting; employed full-time as a controller.
- Married; no children; supportive family/friends.

**Speech-Language Therapy**:
- Diagnostic: Moderate Broca's aphasia.
- Outpatient therapy (9/2007-present):
  - Transitions Neurological Day Treatment Program.
  - Michigan Aphasia Program.
  - Outpatient single service.
  - Stroke Comeback Center.

**Aphasia Mentorship Program**
- Interested in developing her confidence in communicating with unfamiliar persons outside of the therapy milieu.
- Mentor: Lane T., 67 year-old male; LCVA 2/2006.
- Began meeting 10/2008, one time per week, for 8 weeks.

**In Their Own Words—Sample Survey Results**:
- From the Mentor's Perspective:
  - What was the best part of the program?  
    - "Meeting and talking."  
    - "My mentor is a good listener."  
    - "He listens to me..."  
  - Did the program have a positive effect on your life?  
    - Yes, my confidence.
  - Would you recommend this program?  
    - Yes.

- From the Mentor's Perspective:
  - Did meeting with this mentee help you?  
    - Yes, I have a continuing problem with expressing myself with others.
  - What was the best part of the program?
    - "She has helped ME by being optimistic...doesn't give up."  
    - "Very open...good sense of humor...interested in ME..."

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