Figure 2: Example of Pluralistic Narrative Analyses Organisation

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| **Participant** | **Structural Narrative Analysis** | **Thematic Narrative Analysis** | **Dialogical Narrative Analysis** |
| Removed for publication | * Regressive plot * Youth spent playing sport and being active * University to job transition and progressive promotions * Married with children – active in children activities and family events * MS diagnosed at 48 – Turning point * Severe onset requiring hospitalisation – paralysis on right hand side * Gained function back but never the same as before ‘flare’ * Strain on marriage and youngest child living at home – took on role of carer * Big mistake at work, chose early retirement or would have been ‘pushed’ – work understanding but participant not satisfied she could do job * Husband had affair, currently going through divorce * Friends also have health conditions so perceives she is normal for age and just part of trajectory of life * Spends time seeking joy through spending time with friends, children, grandchildren, cooking when she has energy, going to museums and theatre * Is aging as expected but not aging well – takes meds for symptoms but not MS – progressive * Fears becoming dependent especially without husband as carer. * Fears living too long and being a vegetable but wants to see grandchildren grow | Initial identity of athlete, healthy lifestyle important part of identity.  Aligned with family values and expected narrative  Normalcy in diagnosis – age intersection – culturally aligning to expectations of age and illness.  Normal compared with friends also with chronic health conditions  Living ‘best life’ through joy and earned rest  Fear of living too long – dependence – quality over quantity | Influenced by societal narratives – marriage, kids, career, aging  Connects to others her age – all have experience of managing chronic illness – linked with age  Hurt, angered, bitter towards husband but not MS – MS normal, husband not living to vows  Aging narrative driving decision to accept decline and seek joy in life through ‘treats’.  Embraces role of ‘Nana’ and identifies as this – invested in grandkids  Fear of aging and illness affecting brain – strong dementia influence regarding narratives she is exposed to. |