STEPHANIE BROWN
ChronicIllnessSpecialist · Speaker · Coach

THE VISIBLE FRAMEWORK

For Women Living with Chronic Illness

Peer-grounded · Evidence-based · Built from lived experience

THE VISIBLE™ FRAMEWORK

> ***A framework document for women who want to understand the whole journey, and for professionals who want to understand the methodology.***

Restructured into two parts so neither reader has to wade through content meant for the other.

Part One is the seven pillars in Stephanie's voice, no citations.

Part Two is a separate, clearly labelled reference section with outcomes and evidence, for anyone deciding whether to refer or commission.

Part One: The Seven Pillars

Chronic illness does not just change your body. It changes the story you tell yourself about who you are and what you are allowed to want.

The VISIBLE Framework names that experience. Seven stages, one journey, yours. It is not a linear checklist. It is a living, cyclical journey. You may find that some stages feel very settled right now and others feel urgent. That is entirely normal.

VISIBLE is built around two pathways. Your VISIBLE Foundation covers Voice, Identity, Solidarity, and the beginning of Insight and Boundaries, for women at the start of this journey. Your VISIBLE Landscape completes the framework with Liberation and Elevation, for women who are ready to go further.

VOICE

Telling yourself the truth about your experience.

Voice begins not with speaking to others, but with hearing yourself clearly. Chronic illness teaches you to shrink the story so it is easier for everyone else to hold, until the version you tell no longer resembles what is actually true. This stage is about noticing where that happens, and beginning, gently, to name what is real, starting with yourself.

IDENTITY

Who you are beyond your diagnosis.

Chronic illness takes things: certainty, capacity, often the external markers of identity you spent years building. What it cannot take, though it can make harder to see, are the values, qualities, and ways of being that were always yours. This stage is about finding those again.

THE VISIBLE™ FRAMEWORK

S

SOLIDARITY

You are not alone in this.

The loneliness of chronic illness is a specific kind. It is the absence of people who understand without you having to translate, who know what you mean without needing the context. Being witnessed by someone who already knows changes something that love alone cannot reach.

I

INSIGHT

Self-knowledge as power. Begins in Foundation, deepens within TRIUMPH.

Years of being told that what you feel is not real teaches you to distrust your own signals. Insight is about learning to listen again, to your energy, your patterns, your body's early warnings, and treating that knowledge as expertise rather than complaint.

B

BOUNDARIES

Protecting your energy without guilt. Begins in Foundation, deepens within TRIUMPH.

For women with chronic illness, where energy goes is a health decision, not a lifestyle preference. And yet most of us carry guilt around saying no. This stage asks you to start looking honestly at where your energy is going, and whether that is truly your choice.

L

LIBERATION

Freedom from shame, performance, and the pressure to be well enough.

Chronic illness brings shame with it, not because of any failure, but because of what the world communicates about bodies that do not cooperate. Liberation is not the end of difficulty. It is the end of shame about the difficulty, and the end of the second job of managing everyone else's comfort with your illness.

E

ELEVATION

Rising into a version of yourself shaped, not stopped, by your experience.

Elevation is not toxic positivity. It is not the claim that chronic illness was a gift. It is the honest recognition that you are still here, and that what you have navigated has produced something real in you: capacity, wisdom, a particular kind of knowing. Elevation is purpose and ambition on your own terms.

The life you are building now still counts. Even if it looks nothing like the one you planned.

Part Two: Outcomes and Evidence

Reference material for professionals, referrers, commissioners, and those interested in the research behind each stage. Not meant to be read cover-to-cover. Each VISIBLE Framework stage is based on peer-reviewed research, not just lived experience. This is a summary; full references available on request.

V - VOICE

Women can name their experience clearly, to themselves and to the people around them, without minimising it for anyone else's comfort.

Hajdarevic et al., 2025, Journal of Clinical Nursing: a review of 28 qualitative studies found that chronic illness disrupts the link between body and self, and that being able to put language to the experience is central to adapting to it.

Roussi & Avdi, 2008: people who lose the ability to narrate their illness experience coherently are at risk of losing their sense of self and purpose altogether.

I - IDENTITY

Women leave with a stable sense of self that isn't contingent on their diagnosis or what they can produce on any given day.

Clur & Barnard, 2025, Journal of Health Psychology: people living with chronic disease rebuild identity through active work, not passive acceptance, reconstructing a purposeful, connected, determined sense of self.

O'Donnell et al., 2022, British Journal of Health Psychology: internalised stigma is strongly linked to negative self-concept in chronic illness, underlining why proactive identity work matters.

S - SOLIDARITY

Women move from isolation into genuine community built on shared lived experience.

Pearce et al., 2022, BMC Health Services Research: peer support offers connectedness and experiential knowledge unavailable from clinical sources alone.

Peer Support Needs Study, 2025, PMC: 72% of young adults with chronic conditions scored above the clinical threshold for loneliness, yet only 11% had been offered peer support by their healthcare provider. Of those who did access it, 94% found it valuable.

OUTCOMES CONTINUED...

I - INSIGHT

Women rebuild trust in their own body's signals, trust that medical dismissal often erodes.

Systematic Review, 2023, Neuroscience & Biobehavioural Reviews: the ability to attend to and trust bodily signals was associated with lower symptom severity in people with chronic conditions.

MAIA Study, 2023, PMC: the psychological impact of chronic illness measurably erodes body trust, making the rebuilding of that trust a legitimate and measurable goal, not a soft outcome.

B - BOUNDARIES

Women leave with a working system for protecting their energy, and the guilt that previously blocked it.

Johnson et al., 2021, Clinical Psychology Review: people who struggled to set boundaries reported significantly more anxiety and depression; those who held limits consistently were less likely to burn out.

Frontiers in Psychology, 2022: managing psychological energy is central to adapting well to chronic illness, and boundaries function as a form of energy conservation.

L - LIBERATION

Women release the shame produced by illness, medical dismissal, and social stigma, and process the grief of the life that changed.

Dolezal & Lyons, 2022, Humanities and Social Sciences Communications: shame prevents people from accessing healthcare and disclosing their experience, and is strongly linked to trauma symptoms, including in chronic illness.

Frontiers in Psychology, 2022: wellbeing in chronic illness depends on addressing the physical, cognitive, emotional, and social domains together, not managing symptoms in isolation.

.

OUTCOMES

E - ELEVATION

Women build a concrete, self-authored vision for what comes next, grounded in their actual reality.

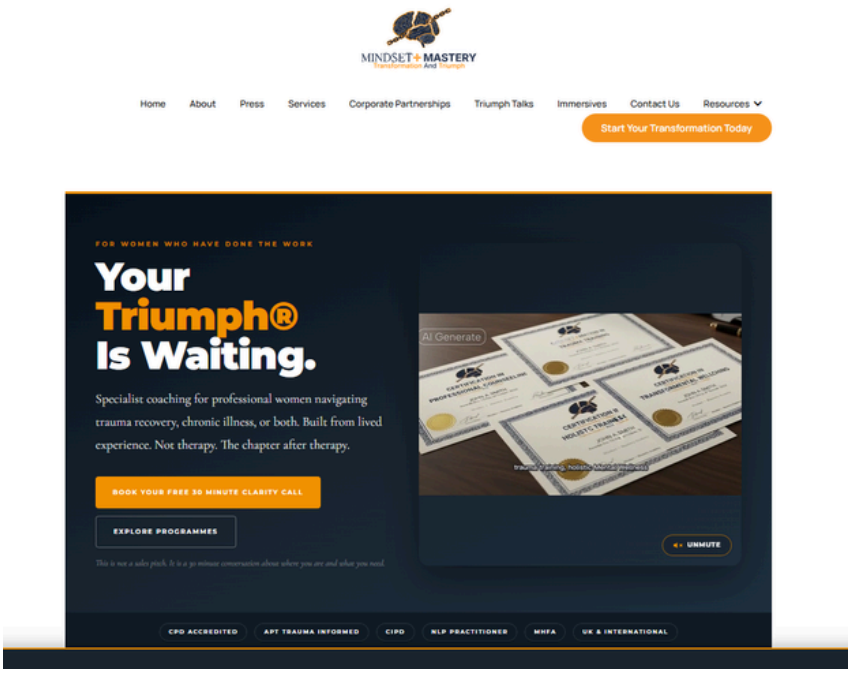
Tedeschi & Calhoun, 1996 / 2004: the foundational research on Post-Traumatic Growth: genuine psychological growth, including personal strength and new possibility, can emerge through struggling with major life challenges.

Meta-Analysis, 2022, Frontiers in Psychology: a consistent link between meaning in life and post-traumatic growth across populations, including chronic illness.

WHAT COMES NEXT

VISIBLE names the illness experience and builds the foundation. Some women are ready to go further with the illness itself; others are also carrying medical or relational trauma alongside it. Either way, TRIUMPH®, co-created by Stephanie Brown and trauma specialist Victoria Taylor at Mindset + Mastery, is where that deeper work continues.

EXPLORE TRIUMPH AT MINDSET + MASTERY



HOW TO ENQUIRE

info@stephaniebrowninspires.com · stephaniebrowninspires.com All enquiries responded to within three working days.

Stephanie Brown is a chronic illness specialist, speaker, and coach with twenty years of lived experience with systemic lupus erythematosus. She holds an MSc in Human Resource Management, a QLS Level 7 Executive Coaching qualification, CIPD, PTTLS, and extensive experience in Learning and Development. She is co-creator of the TRIUMPH® Framework and founder of Visibly Her CIC.

She does not speak about chronic illness from the outside. She has lived every word of it, while building two organisations, pursuing advanced qualifications, and refusing to let the diagnosis be the whole of the story.

MSc HRM · QLS Level 7 Executive Coaching · CIPD · PTTLS · L&D; Project Coordinator · IPHM · NLP Practitioner · Trauma-Informed Practice · Safeguarding · MHFA Level 3 · Co-Creator TRIUMPH® · Equal Co-Founder TRIUMPH RECLAIM · Founder Visibly Her CIC