Digital Storytelling and Self Healing of Women Survivors of Violence: Evidence from Pakistan

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ABSTRACT
With the revolution of information and communication technology (ICT), various digital means have been explored to interact and share life experiences with others. Among them, digital storytelling is a pioneering technique that allows ordinary people to share their stories from unique, personal perspectives. Digital storytelling is being effectively utilized in education, health, and for political awareness as well. Women survivors of violence are also being effectively exploiting this innovative technology worldwide in sharing their voices with others to suppress gender based violence. Studies have been conducted to investigate the potency of digital storytelling in various fields. The current study explores the use of digital storytelling as a means to induce self-healing for the women survivors of violence, specifically victims of domestic violence and sexual harassment incidents. A one month long workshop with women survivors of violence was conducted to analyze this behavioral transformation. Pre and post assessment was done to observe the state of self healing. By analyzing data through Wilcoxon Signed rank test, a significant difference has been noted in the women survivor’s state of self healing as analyzed through changed self-expression, mental health and self-confidence. However, this study has been conducted with small sample and further investigation is required to validate this aspect of digital storytelling with larger sample.

KEYWORDS
Digital Storytelling, Self Healing, Gender, Violence against women, Pakistan

1. INTRODUCTION
Information and communication technologies (ICTs) have been diffused into almost all spheres of human activity at an unprecedented rate (Joseph 2002). This increasing spread has opened up new opportunities particularly for women to harness these technologies for their political, economic and social uplift at unprecedented scale (Mansell and When1998; Melhem, Morell and Tandon 2009; Macuve et al. 2009). Gender based violence is the social problem being faced by the women of all regions and cultures across the globe. Statistics imply that violence against women is quite pervasive as one in every three women worldwide will suffer some form of gender-based violence within the course of their lifetime (Perveen 2010).

According to the report of Global Gender Gap (2011), Pakistan places at 133rd position off the total 135 positions. It is due to the steep rise in violence against women incidents, crippling the overall women development and participation in the economic and social activities (Banerjee 2009). Efforts are being made to create channels and platforms to raise voices of the women survivors of violence in order to create more awareness around this issue (Pickup, Williams and Sweetman 2001). ICTs can be used strategically by the survivors of violence themselves for voicing their own stories, and to make these available to a wider audience in order to trigger action and change (Take Back the Tech 2011).

In this context, digital storytelling is being tactically utilized by the women survivors of violence to develop digital stories based on their life experiences and share their voices with global community to undermine gender based violence across the globe. Silence speaks (2009) is one of the pivotal projects initiated for women survivors of violence in Africa. This project aimed to support survivors of violence in sharing their own stories through short videos and presenting these videos in training, community organizing, and policy advocacy setting. Voice Beyond walls has been another significant initiative of training refugee
camp youngsters on digital storytelling (Sawhney, 2009). Similarly in Pakistan, a training of trainers’ initiative was undertaken in Pakistan at the Feminist Tech Exchange (2010), for building initial capacity among mentors of survivors of violence on digital storytelling. Gawahi project was also an effort made to develop digital stories to disseminate information on underreported cases of violence against women (Sarfraz et al 2012). In addition, Subh-e-Nau project was executed with similar motivation for the awareness on gender based violence.

Digital storytelling is the practice of using digital devices to create media-rich stories using images, music, narrative, and voice together. Such an amalgamation presents a vivid characterization of events, situations and feelings. Digital stories are used to share personal experiences and can effectively embody moving messages that thrust a far reaching effect on its spectators (Yuksel, Robin and McNeil 2011). Digital storytelling has emerged as an established methodology for awareness-raising because of the relatively low cost of digital devices and the ease of learning to create digital stories. In this context, digital stories are also used as a tool for political activism due to its strength to connect personal stories with the broader public issues that a community faces (Sanchez 2011). In addition, this technology is being widely used to trigger action and change around incidents of gender based violence as well. This process has also been stated as a powerful therapeutic, healing, resilience building and resilience enhancing tool (Hill 2008). However, empirical investigation has not been done yet to testify the effectiveness of digital storytelling process in improving state of self healing that what is the effect of digital storytelling on the state of self healing of women survivors of violence which personally developed digital stories? To investigate this phenomenon, a study was conducted with women survivors of violence participated in Subh-e-Nau project. Subh-e-Nau project, a digital storytelling workshop was designed and executed on the motivation to provide platform for Pakistani women survivors of violence in sharing their voices with others (Sarfraz et al 2012). By building their capacity on ICTs, they have been trained in making digital stories to share their life incidents with global community. The section below details the literature review on the relevant concepts, study design, findings and conclusion.

2. DIGITAL STORYTELLING AND SELF HEALING

To Lewin (2011), Digital storytelling provides genuine, non-stereotypical and often unexpected representations of people, gender roles and relationships. These representations often contradict dominant images of both men and women. She believes this technology has potential source of change for both creators and viewers. Because of digital storytelling’s emotive power and its participatory approach, it is an excellent tool to build awareness, strengthen groups with a shared agenda or facilitate mutual understanding amongst those who do not.

In her study Indigenous Digital Storytelling in Video: Witnessing with Alma Desjarlais, Iseke (2011) investigated the potential of digital storytelling in sharing indigenous knowledge. She discussed the story of Alma Desjarlais to witness and understand the histories of trauma and the resilience and strength of indigenous peoples. By analyzing the story of Alma, Iseke (2011) found that this process contained three levels of testimony (Felman and Laub 1992) by sharing her experiences through digital story. According to Iseke (2011), the action of sharing testimony is part of the healing process for the one sharing the testimony and because the speech act is addressed to others, it can aid them in releasing emotions too.

Salazar (2010) conducted a study with migrant youth in Western Sydney for a critical examination of community media practices. By taking digital storytelling as an approach of citizen media, he argued the efficacy of citizen media in changing attitudes of people specifically the migrant youth. They have become more active citizens by exercising their civil rights and presenting their self expression through created content in shape of digital stories. By assessing the stories of migration and settlement in Sydney, the participants were able to use the digital stories as a form of healing historical disruptions in cultural knowledge and social memory.

Taking digital storytelling as community-based participatory research (CBPR) approach, Gubrium (2009) discussed the applicability of this innovative technology in health sector. According to her, it can play a vital

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1 http://www.cle.org.pk/subhenau/
role in community health promotion and practice. In developing digital stories, she identifies this as a process of healing for those who are dealing with difficult experiences.

Wilcox (2009) analyzed the some digital storytelling projects in her study “digital storytelling: a comparative case study in three Northern California communities”. In Abriendo Las Cajas (Opening Boxes); a multi-year digital storytelling campaign focused on violence recovery and prevention designed to decrease domestic violence in the Fruitvale neighborhood, she reported participants who felt digital storytelling process had “facilitated opportunities to build new skill-sets for youth and adults and help assist in the healing process”.

Freidus and Hlubinka (2002) conducted a study to investigate digital storytelling as reflective practice in communities of leader. Schön (1983) define reflective practice as periodically stepping back to ponder the meaning to self and to others in one’s immediate environment about what has recently transpired. It illuminates what has been experienced by both self and others, providing a basis for future action. It thus constitutes the ability to uncover and make explicit to oneself and to one’s colleagues what one has planned, observed, or achieved in practice. In particular, it privileges the process of inquiry leading to an understanding of experiences that may be overlooked in practice. To Freidus and Hlubinka (2002), Digital storytelling for reflective practice is a valuable, transformative tool for personal, professional, organizational, and community development. As stories are shared, the sense of community itself is strengthened.

Vinogradova (2006) analyzed the usage of digital storytelling in symbolically presenting social identities by the users. To investigate this phenomenon, ten digital stories were collected and analyzed. Findings show that digital storytelling allows the creators to present their positive social identity by using a combination of verbal and visual narrative means. In an exploration of personal experiences of taking part in a digital storytelling project, Shea (2011) also investigated the role of digital storytelling in changing behaviors of its creators. This study based on the experiences of seven people who took part in a Patient Voices digital storytelling workshop. By using semi-structure interviews and a mixed method approach, these experiences were analyzed on the perspectives of the life story model of identity (McAdams, 2008), the Dual Process Model of grieving (Stroebe & Stroebe, 1991), and constructivist conceptualizations of grieving (Niemeyer, Burke, Mackay & Stringer, 2010). By synthesizing the experiences of their participants on these perspectives, findings show that during the workshop the participants were able to reflect on their past, present and future, then form a coherent story, experience changes to their narrative identity and make meaning out of their traumatic experiences. Researcher also noted that digital storytelling process is the process of healing for those who had traumatic experiences.

To McWilliam (2009), recuperative digital storytelling is an emergent form of digital storytelling programs executed with a primary focus on digital storytelling as a healing, even therapeutic process, which is usually approached through personal reflection and story sharing in a safe space. Subh-e-Nau was similar type of digital storytelling workshop conducted for the women survivors of violence to share their violence based experiences as therapeutic process and for their self healing. Following paper presents the empirical investigation of this phenomenon as have not investigated yet by the scientific community, however, in fewer studies observed as secondary outcome.

3. STUDY DESIGN

The current study designed to see the impact of digital storytelling on women survivors of violence in changing their state of self-healing. For this purpose, researcher first explained the concept of self healing in detail and then developed the indicators of this phenomenon in order to assess the state of self healing of women survivors of violence. This assessment was made by using pre and post assessment method.

3.1 Self healing

Self-healing is a unique phenomenon attached to complementary and alternative medicine (CAM) discipline (Smith 2003). As Waldspurger Robb (2006) analyzed the concept of self healing and found that this concept is not well defined in literature. However, she defined self-healing as “the process of accessing your own innate power to create better health.” Segen (1998) define self healing as “paranormal phenomenon: a general term for the use of a person’s innate vital forces to heal himself through affirmation, imagery and
visualization, and prayer”. It may thus be deduced that self-healing is the process of recovering the physical or psychological health (from trauma). Certain methods are practiced for improving state of self-healing like art therapy, counseling, religious ritual, music (Waldspurger Robb 2006) and digital storytelling (McWilliam 2009).

Following a rigorous concept analysis presented by (Waldspurger Robb 2006), three basic indicators defined by (Segen 1998) have been adapted and contextualized as improved mental health, self-confidence and self-expression. These three concepts are further defined as follows.

a) Mental health is defined as “a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community” (World Health Organization 2011). This includes the measurement of an individual’s level of stress, anxiety, memory, anger, retention, etc.

In this study, psychologists assessed the mental health of the participants through a clinical assessment technique called Mental Status Examination (MSE) (Trzepacz and Baker 1993). MSE is a structured way of observing and describing a patient's current state of mind, under the domains of appearance, attitude, behavior, mood and affect, speech, thought process, thought content, perception, cognition, insight and judgment (Trzepacz and Baker 1993). MSE was conducted by undergoing an informal assessment of each participant regarding their sleep, mood, attention/concentration, negative thinking and memory. During this informal assessment, subjects were interviewed and asked different questions on each of the mentioned indicators to assess their psychological stability and constancy. The informal assessment was followed by a formal assessment in which each subject was assessed on a self-report lickert scale questionnaire based on 22 items. This questionnaire assessed the subjects on depression, anxiety and hopelessness. Total test administration time was between 15-17 minutes. Each participant was assessed twice, once before and once after the completion of digital storytelling workshop. Results of this examination were ranked in three states being, (i) disturbed to a great extent (value = 0), (ii) disturbed to some extent (value = 1) and (iii) not disturbed (value = 2).

b) Second factor studied as an indicator of self-healing is the self-confidence of the participants. As defined by Corsini (2011), self-confidence means “self-assurance, trust in personal abilities, capacities and judgments.”

For the assessment of the self-confidence of the participants, researchers conducted an activity of post card development prior and after the completion of digital storytelling workshop. Their participation was assessed by researchers through observation. Their confidence level as observed was ranked on low (value =0), medium (value =1) and high (value =2) levels based on the number of questions asked and help gained by the participants in completing the task.

c) Self-expression is another detrimental factor analyzed as a consequence of self healing. Self-expression (Corsini 2011) is “the free expression of personal feelings, thoughts, talents, attitudes, or impulses through such means as verbal communication, poetry arts, etc.” An improvement in self-expression is a manifestation of the belief in the ability of self to self-heal.

Researchers evaluated the self expression of the participants through their ability to express their idea or current state in shape of illustration prior to start digital storytelling workshop (pre-assessment). Similar type of activity (post assessment) was conducted on the last day of the workshop to assess the change in self expression. Their self-expression as observed was ranked on low, medium and high level based on the personal interviews conducted with each of the participant to present her idea and motivation for creating the specific drawing.

By gathering information on above three indicators, a score on state of the self healing was calculated prior and after the workshop presented below in the findings section.

4. FINDINGS

The following table synthesizes the information of each participant on the predictors of self healing and the state of the self healing before and after the digital storytelling workshop.
Table 1 Calculated scores of the women survivors of violence on state of self healing

<table>
<thead>
<tr>
<th>Participant</th>
<th>Mental Health</th>
<th>Self-Confidence</th>
<th>Self-Expression</th>
<th>State of Self-Healing*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Pre Assessment</td>
<td>Post Assessment</td>
<td>Pre Assessment</td>
<td>Post Assessment</td>
</tr>
<tr>
<td>P1</td>
<td>1</td>
<td>2</td>
<td>0</td>
<td>2</td>
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<tr>
<td>P2</td>
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<td>2</td>
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<tr>
<td>P3</td>
<td>1</td>
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<td>P4</td>
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<td>2</td>
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<td>P5</td>
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<td>P9</td>
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<td>1</td>
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<tr>
<td>P10</td>
<td>1</td>
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</tbody>
</table>

Scale for Mental Health (ME), Self-Confidence(SC) and Self-Expression(SE) Low =0, Medium =1 and High =2

* Values depicting State of self healing range from 0(Min) to 6(Max)

This value is calculated as a sum of (ME+SC+SE).

As table 1 depicts, the maximum improvement was demonstrated by P3 and P7 but P7 recognized herself as a most improved personality. As her score prior to workshop was less than P3. Only one participant P10 remained static and showed no improvement in her state of self-healing. P10 was one of the elderly participants included in the workshop to assess the types of issues that would be encountered when using digital storytelling with older participants. P10 demonstrated a particularly low level of participation in preparing her own digital story, and received a very high level of assistance from the facilitators, in almost every phase of digital story development including story circle, script writing, story boarding and story creation. This participant was non-literate as well. However, it should not be assumed from this case that digital storytelling is not an effective self-healing tool for non-literate or elderly people. There were other participants in the workshop as well who were non-literate, but still worked proactively on their digital stories, and only sought help where they were severely impeded, for example, in the script composition, etc. The case of participant P10 however does significantly demonstrate that the low or even negligible level of increase in self-healing level resulted from lack of participation.

Participant P9 shows the highest change in self-healing levels, and was interestingly another one of the non-literate participants. This participant however had a keen interest in the development of her digital story. She paid a lot of attention to fine details, and was very selective about the elements she was including in her digital story. This also supports the previous conclusion that a high level of participation correlates to a high level of change in self-healing levels.

In interview session conducted after the completion of workshop, questions was asked to each participant about their experiences of attending this workshop. One participant replied in such words, “I feel tense at my home but here I spent time with comfort.” While another participant responded, “This type of workshops must be conducted. I learn a lot from there and by seeing others sufferings, I feel that my misery is not more than them and it increases my courage.”

One participant said about the workshop, “I do not feel depress after coming here and forget my miseries. This workshop gives me faith again that I can face the world alone.” This workshop is a source of self healing, it can be assessed by the response of one participant; “I am pleased that I come here. They heard us and I feel comfortable now.” This workshop increases self confidence that can be seen in the words of one participant that are, “I was in the habit of watching computer from a distance but now I can use it. This gives me confidence that I am not dependent on any one. Everyone says that “this is computer age and now I am also able to use computer in routine life.”

To analyze the effect of digital storytelling workshop on the difference between the states of self-healing of the participants, Wilcoxon signed-rank test was applied through SPSS 17 to see if there was a significant difference in the state of self-healing of the participants after attending digital storytelling training. The
Wilcoxon signed-rank test is a non-parametric statistical hypothesis test used when repeated measurements on a single sample to assess whether their population means differ.

5. CONCLUSION

This digital storytelling project was executed with the aim of empowering women survivors of violence to raise their voices against gender based violence. By envisioning this workshop as recuperative digital storytelling (McWilliam 2009) training program for women survivors of violence, an effort was made for their self healing and empowerment.

Regarding their self-healing, digital storytelling allowed participants to express their selves through different ways. Women survivors of violence used their own made pictures, illustrations and identical images in highlighting their feelings on violence based incidents faced by them. Researchers also noted the efficacy of this technology in allowing less literate participants to present their feelings through their own blurred pictures and identical images. Moreover, study also showed that this technology were very useful for self reflection. All the participants realized that this digital storytelling training provided them an opportunity in assessing the sufferings and feeling the sorrows of others. This experience was very helpful for their self reflection while they were making their digital stories.

Learning always remains good experience at any stage of the life and especially the understanding of contemporary skills provide the belief of being able to solve the problems. This program was trained the participants on general ICT skills and digital storytelling. These skills gave them a lot of self confidence as one of the participants said, “Computer was a nightmare for me but I now feel that I could do anything in my life after getting this training”. Many of them were realized the significance of computer in today’s era as one of them said, “This is computer age and now I am also able to use computer in routine life”.

The process of digital storytelling were very therapeutic for the women survivors of violence, most of the participants faced severe forms of gender based violence in shape of domestic violence, sexual harassment, spousal violence and assault. Digital storytelling provided them a new hope for living a life. Before attending digital storytelling training, one participant was hopeless about her future. After creating a digital story, she was happy and committed to learn any art for her livelihood as she was very young and facing spousal violence.

This digital storytelling training was very significant for women survivors of violence. The significance could also be appraised through the actions of the participants. One participant who was nurse by profession changed her duty timings to night for attending this training. She came after doing her duty and participated in workshop each day. Consequently, her digital story was one of the finest digital stories produced through this workshop. Another lady who was office assistant attended this training because she recognized digital storytelling as a way of highlighting miseries that she faced in her life. Among them, one woman who taught children in private school joined this training with her sister and mother. Both sisters created one digital story and also brought one poem to raise motivation of others.

As said by McWilliam (2009), digital storytelling as recuperative digital storytelling has enough potential for underrepresented communities and for depressed people like women survivors of violence. The following study shows the effectiveness of digital storytelling in healing those who have traumatic experiences in their lives. The therapeutic potential of this innovative technology has provided the chances to the women survivors in regaining their energies and strengths for fighting against gender based violence. Findings
showed behavioral transformation among women survivors of violence and change in their state of self healing empirically as well.

This study was the pioneering initiative to investigate the potential of digital storytelling in changing the state of self healing of their creators especially for those who created it in a workshop or collectively. This study was disseminated the results of ten women survivors of violence who participated in Subh-e-Nau digital storytelling project. However, further investigation is needed to see the efficacy of digital storytelling in changing the state of self healing with larger sample.

ACKNOWLEDGEMENT

Subh-e-Nau was a collaborative project of Center for Language Engineering (CLE), Al-Khawarizmi Institute of Computer Sciences (KICS), University of the Engineering and Technology (UET) Lahore and All Pakistan Women Association (APWA), Punjab, funded by Bytes for All, Pakistan and Pakistan Software Houses Association for IT and ITES (P@SHA) through a sub-grant provided by the Association for Progressive Communications-Women’s Networking Support Program (APC-WNSP). Researchers are also grateful to the Department of Applied Psychology, University of the Punjab for providing the facilitation in data collection process.

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