



*Circle of Research and Practice*

## **Digital Storytelling: An Emergent Method for Health Promotion Research and Practice**

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**Keywords:** *community-based participatory research; digital storytelling; emergent methods*

“Talking about the future these days often means talking about technology,” according to Caroline Wang (2000, p. 77). Wang critically assesses the way new technologies, such as digital cameras, computers, and the Internet, are used to deal with social inequities in health promotion research by getting those concerned directly involved in the research process. On the downside, she cautioned that these technologies also can potentially contribute to a digital divide separating those with access to technologies from those without access.

Community-based participatory research (CBPR) approaches promise to resolve this shortcoming by addressing participatory issues. The approaches challenge the failure of nonparticipatory approaches to study health problems in minority and underserved communities, for example, by expressly including such participants as research partners (Israel, Eng, Schultz, & Parker, 2005; Minkler & Wallerstein, 2002). This requires

researchers to shift traditional power dynamics. Actions that address disparities can take different forms, from increasing participants’ feelings of control over their lives to reversing structures of health promotion and practice that have historically excluded or placed them at the bottom of institutional priorities. CBPR approaches allow new knowledge to emerge that is mediated by indigenous perspectives and returns this knowledge to communities as indigenously informed. The key to resolving inequities in access to new technologies is to put CBPR approaches to work in expansively inclusive ways.

Digital storytelling is an innovative CBPR method that increases community members’ participation in research on local health issues (Lambert, 2006). Digital stories are 3- to 5-min visual narratives that synthesize images, video, audio recordings of voice and music, and text to create compelling accounts of experience. Although digital storytelling has been used in primary education as a way to increase student access to alternative forms of literacy (Educause Learning Initiative, 2007; Kajder, 2006; Ohler, 2007), it is still a nascent method for community health promotion and practice. The application of digital storytelling is equally pertinent to research. If practice is indicated, health promotion research in particular stands to profit from the grounded way the method inserts

indigenous empirical material into research endeavors. Health promotion research that does not take into account the experience, understandings, and agency of those to whom efforts will be directed are likely to be as less successful in application than research that does. This article discusses how digital storytelling works in practice as well as its benefits and challenges to health promotion research.

### ► **THE DIGITAL STORYTELLING PROCESS**

As a CBPR method, digital storytelling can bolster community building and a locally relevant ability to address community health issues. The process of digital storytelling may be linked to the growth of the spoken word as a reflexive mechanism for literacy. Based on a Freirian model (Freire, 2000), in which participants construct stories as they construct change, the goal is to listen to the generative themes or collective issues of community members to create a dialogue. The assumption is that everyone can participate in constructing a shared reality of concrete interest to members. Creative aspects of the Freirian approach emphasize the transformation of these generative themes and shared understandings into physical form, such as digital stories. These transformations provide participants

#### **Health Promotion Practice**

April 2009 Vol. 10, No. 2, 186-191

DOI: 10.1177/1524839909332600

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new lenses on their experience and subjectively pertinent ways of representing shared realities (Wallerstein & Duran, 2002). Digital stories can influence indigenous healthiness and resilience by offering a means of owning and being able to tell one's own story. The digital storytelling process incorporates both a group orientation in the form of focus group-like story circles and an individual orientation in which participants construct digital stories from personal experience.

The digital storytelling process was originally codified by the Center for Digital Storytelling ([www.storycenter.org](http://www.storycenter.org)), where those who have experience with digital storytelling (the trainers) train others (the participants) how to construct their own digital stories. Participants "learn by doing," producing their own digital story during a training workshop held over the course of three, 8-hr days. By the end of the workshop, all participants will have constructed a digital story. The aim is to have participants construct their own digital story and to avoid having the experts, the trainers, construct stories for them. The responsibility of the digital storytelling trainer is to work with participants through the phases of the digital storytelling process.

Training workshops may include as many participants as can be accommodated by available computers. It is recommended that the number of participants not greatly exceed the number of trainers available, as trainers

► **ASSOCIATE EDITORS' FOREWORD**

From its very first issue, *Health Promotion Practice* has published articles on community-based participatory research (CBPR), a strategy for purposeful and meaningful inquiry based on true partnerships between researchers and community members. This issue adds to that growing body of practical and useful material with an article on digital storytelling.

One of the factors that make CBPR such a powerful tool is its inherent attention to new ideas and emergent strategies for communication, exchange, and dialogic awakening between research and community partners. In CBPR, the power to define and articulate meaning is explicitly redistributed. Participatory assessment and evaluation, risk and asset mapping, photovoice, and community-driven dissemination are just some of the strategies used to determine and explore questions of relevance to participants, with community members driving the expression of meaning. Redefining the right to name, define, and share powerfully reignites the circle of research and practice.

In this article, Dr. Aline Gubrium introduces *HPP* readers to an emergent research strategy called *digital storytelling*. Dr. Gubrium describes the participatory method of "producing 3- to 5-min visual narratives that synthesize images, video, audio recordings of voice and music, and text." Created through a participatory process involving researchers (the technical advisors) and community members (the storytellers), digital storytelling is "an innovative method of ethnographic inquiry from the bottom up." The article provides a step-by-step guide for implementing the method as well some thoughts on the challenges—and potential—of moving from storytelling to advocacy.

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are expected to work closely with participants in a mentoring relationship. Three-day workshops are recommended because a concentrated period

of time allows the participants to become more absorbed into the digital storytelling process. However, when operating within a workaday

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setting where participants may not be able to commit to a concentrated period of time, the schedule can be more flexible, such as meeting for shorter sessions over a longer period of time.

Prior to the workshop, participants are asked to come to the first day's session with a draft of their story that is about 1.5 pages or 250 words in length and to bring along digital photos, printed photos to be scanned, or video clips they may want to incorporate into their stories. Participants may be asked to focus their stories on a particular topic or may be given more latitude for choosing the topic of their stories.

Workshops and the digital storytelling process are commonly organized into phases, but there is flexibility in this. The first phase of the workshop proper usually is devoted to an overview of digital storytelling in which participants become better acquainted with the digital storytelling process. The moderator presents several digital story samples to exemplify the final product. Participants often arrive at the workshop not quite sure how to identify a completed story. Trainers then present a brief lecture on the seven elements of digital storytelling: point of view, dramatic question, emotional content, voice, soundtrack/music, economy, and pacing (Lambert, 2006). The elements represent the basic ingredients of a multimedia story and are kept in focus throughout the process. Participants are asked to take these elements into consideration when revising their own stories and when listening to and commenting on other participants' stories. Participants also may be asked to take part in several talking or writing activities, which can be used as warm-up activities and to encourage them to write in a less-formal manner that more closely follows the way they would tell a story in their spoken voice.

The second phase of the workshop deals with participants crafting the script of their stories, beginning with the story-circle process. The purpose of a story circle is to create a safe and comfortable space for participants to present the first draft of their stories and to allow participants to come together as a community in discussing and mutually mentoring each other in story construction. It is during the story circle that participants share in developing the generative themes of their stories, which can be used for dialogue within the digital storytelling group, and later fuel related public dialogue at the community level. The story circle serves as an opportunity for storytellers to find a way to resolve issues they may be facing in telling their stories.

A few ground rules guide this phase. Due to the fact that participants (and at times trainers) will be discussing and producing material from their personal experiences, some of which stem from difficult and emotional circumstances, participants are asked to keep story-circle discussions confidential within the group. Participants also are asked to allow speakers to complete their ideas without interruption, to make appreciative comments about the participant's story before providing suggestions, and to support participants' ownership of their stories. All participants are given the same amount of time to present and discuss their stories, with listening participants encouraged to consider the seven elements of storytelling when discussing the storyteller's narrative. This provides a shared format for both story construction and supportive commentary. Out of the discussion of participants' stories, a unity of mission develops, forming a sense of collaborative accomplishment. Tangentially, story circles can be a process of healing for those who are dealing with difficult experiences. They may provide the first outlet for

participants to acknowledge and create something positive from these circumstances.

After the story circle is completed, in another phase, selected trainers may present a tutorial on working with a digital image-editing software program such as Adobe Photoshop Elements. This allows time for participants to recover from what may be an emotionally draining story-circle session and to begin focusing on technical elements of the digital storytelling process. Participants are taught to scan printed photos into their computers and to visually modify scanned and digital photos for use in the digital story. Trainers can add a separate lecture on photography and/or run a photo activity with participants so that they become better able to think with visual images in the development of their digital stories. Participants then engage in independent work, revising their story scripts with the assistance of their trainers, taking on board comments made during the story circle.

Participants are given a deadline for rewriting the scripts of their stories and arriving at a final draft. They then record a voice-over (voice recording) of their scripts in an application for recording and editing digital audio—such as Sound Studio 3.0 or Audacity, which is free, open-source software—onto a computer. The voiceover is used as the audio portion of the digital story. Voiceovers are usually recorded in a room separate from the main training area. This provides the participants privacy in audio recording their stories and allows for better acoustics in recording. Trainers work with participants to teach them how to use the voice recording software, advise them in ways to properly position themselves in front of the microphone, and encourage them to speak in a voice congruent with the story they are about to tell.

While individual participants audio record their voice-overs,

selected trainers work with other participants to create storyboards for their digital stories. These serve as a visual layout or menu for digital story construction. Storyboards may be laid out on a large piece of paper on which participants align the oral element of their stories (story scripts) with visual elements (photos or video clips). This helps them to think holistically about putting their stories together. Another way to construct a storyboard is for participants to use sticky notes on which they write out the different sections of their story script and affix the notes to photos they plan to include in the digital story. Participants are taught to consider the timing and placement of elements of their stories, such as the order of parts of their story, as well as the interaction between elements, such as how the narrative meshes with digital images and possibly with a background sound track (Lambert, 2007). Here again, participants are encouraged to think holistically about their digital stories and to keep the seven elements of storytelling in view in constructing their entire project.

The final phase of the digital storytelling workshop centers on incorporating the components of the digital story (voice-over, digital images and video, and soundtrack) into a digital editing application, such as Final Cut Express or iMovie for Macs and Adobe Premiere Elements or Movie Maker for PCs. Through a trainer-provided tutorial, participants learn how to import and work with their materials within the software, beginning a rough edit of their digital stories. Participants focus on editing their stories with the digital editing software. A final edit of their digital stories culminates the production process.

By the end of the workshop, each participant is expected to have a digital story ready to present to the group. As a collaborative effort,

closure is important in the digital storytelling process, where screening each individual's digital story is a way of celebrating the groups' collective accomplishments (Lambert, 2007). Digital story screenings are restricted to participants and trainers. This sustains the safe space developed earlier, in this case for the purpose of presenting their work. Participants are asked not to invite their family members or friends to the initial screening as this can weaken the sense of support built up between group members over the course of the workshop. It also may instill in participants an external sense of self-criticism or embarrassment when presenting before outsiders. Before actually screening a digital story, each participant is asked to introduce the piece. After the showing, viewers are encouraged to offer comments of validation and to thank the participant for sharing the story.

As Wang (2000) pointed out, it is important that the technologies involved in emergent CBPR methods be seen as tools in promoting an agenda from which participants' own stories are heard and adhere to basic health promotion ethics. Wang stressed that "concepts such as community participation and community building [should provide a shared basis] to carry out our good intentions" (p. 79). Digital storytelling serves as a method for community participants to produce something concrete and tangible out of their experiences, thus being a forum for advocacy on issues of concern.

### ► RESEARCH BENEFITS AND CHALLENGES

Incorporating digital storytelling into a CBPR project has a number of research benefits and challenges. In the context of research, the story-circle process may serve much the same function as a focus group in that it

allows participants to openly discuss issues of common concern in a group setting. In contrast to the traditional focus group method, however, story circles call on the participant to guide the topic of discussion.

Experience shows that this commonly unfolds along two substantive lines dealing with identity issues. Researchers interested in individual identity issues will find fertile empirical material in the many stories that feature themes such as gender, ethnicity, and marginality. Because the story circle process works from a participant-generated agenda, the indigenous nuances of personal identity are encouraged and vividly featured.

Another substantive line centers on group identities. Researchers interested in family, community, and national identities, for example, will find fertile ground in accounts of participants being in particular contexts of domesticity, such as alternative types of families. The narrative nuances of oppression, change, and reform would be of interest to researchers studying the lived experiences of social movements, refugees, migration, or ethnic cleansing, for instance.

There also is methodological benefit to the researcher. In my own experience conducting a digital storytelling workshop subsequent to completing individual interviews with participants concerning reproductive health, the workshop allowed me to position myself more as a participant observer in the research process. This provided me with new and varied perspectives on participant concerns. The discussions I held with participants while working with them to overcome difficulties of script writing or working with digital editing software were illuminating for me as a researcher as I gained more nuanced information on participant concerns and the lived

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realities of their reproductive health experiences. For example, in one instance, while working one-on-one with a workshop participant, I asked her about the intent of her story (one of the seven elements of storytelling being the point of view) and gained a better grasp of the ways that she made meaning out of her health experiences and thought about herself as a woman and a mother. During her interview, this participant portrayed herself with a rather static identity set, centered on identity choices constructed according to the questions that I posed. Over the course of the digital storytelling workshop, however, the participant cast herself more broadly. She presented herself in ways that accorded with the shifting contexts of the digital storytelling process. As in traditional participant observation, as opposed to structured interviewing, I witnessed the many facets of “I’s,” “me’s,” “we’s,” and “them’s” that the digital storytelling brought forth, many of which would seem to be contradictory if these contexts were unknown. I also witnessed how participants themselves animated the meaning-making of their experiences. The digital story process featured the agency of participants in ways a prestructured research agenda could not.

As a facilitator of the storying process, I took several roles, including technical consultant, a shoulder to lean on, and a participant observer. In contrast to the academic researcher role that I take in the context of interviews, in the digital storytelling setting I was able to interact with participants on several levels and with a different power dynamic than is created in the interviewer–interviewee relationship. Although I may not have obtained as much conventional data from participants about their reproductive health experiences during the digital storytelling process, I came away with a

more complex understanding of their lives and the ways they chose to represent themselves and their worlds. As a facilitator of the digital storytelling sessions, working with the women whom I had interviewed to produce their stories, the multiple dimensions of their experiences were always center stage, not merely background information.

Another research benefit is that workshop participants also became their own participant observers. As they sought to represent their experiences in a more technical and visual way, they became more conscious of the ways they could represent experience. Although in my own work I was able to gather data on the participants’ reproductive health experiences during individual interviews, in the digital storytelling process I witnessed the women become actively involved in choosing between alternative ways of framing experience. I was virtually treated to participants’ theoretical skill in this regard. Participants made decisions about ways to narratively position themselves and their experiences within the context of their written scripts, the ways they could talk about and explain their experiences during the story circle, the choices available for constructing voiceover recordings, the types of images they could use to present themselves, and the sound track options for creating particular moods and outcomes. Participants’ digital stories clearly stood out as a set of interpretive choices as they represented themselves as certain kinds of women with particular types of experiences depending on the story they wished to produce. If it is duly acknowledged that interviewing is an active process involving both the research participant and the interviewer (Holstein & Gubrium, 1995), the digital storytelling process turns this into a concerted production, from scriptwriting, revisions, and story circles

to putting the stories together in a digital media format and airing the stories at the end of the session.

For some participants, the reflexive experience of studying and theorizing the presentation of their experience can prove cathartic, even empowering. Through activities, such as story circles, script revising, digital media construction, and semiprivate and public airings of their stories, participants often gain a sense of ownership of their experiences. For many, maybe for the first time, they have talked openly about an experience previously unarticulated. The process also can build community at the group level, both among workshop participants while mutually mentoring each other through the digital storytelling process and within the community at large as it allows participants to create conversations with other community members about issues of common concern. This benefit clearly rests at the intersection of research and application.

The digital storytelling process also faces a number of research challenges. One is the challenge of obtaining institutional review board (IRB) approval for incorporating digital storytelling into the research process. As a new method for CBPR/public health research, the process of applying for IRB approval for conducting a digital storytelling workshop has not yet been codified. Issues that may arise in obtaining approval include addressing the informed consent process, in particular obtaining consent to air digital stories in the context of advocacy such as on a Web site or in an exhibition of the digital stories. There also is the matter of maintaining the confidentiality of participants if digital stories are to be used in public health media and reform campaigns. As a CBPR strategy, the aim of digital storytelling is more than just using digital storytelling as a therapeutic mechanism for individual participants. Another by-product of

digital storytelling is the use of digital storytelling as a tool for community health reform. Digital stories aired only within the confines of the workshop may protect the confidentiality of those participating in the process, but there may be no tangible public health outcome aside from a strengthened sense of community for individual participants. The IRB approval process faces the challenge of extending this to community health actions, which are rent with debates among key public health players, including policy makers, healthcare providers, and the community at large.

Another research challenge is the recruitment and retention of participants. Although digital storytelling workshops targeted toward community-based organization staff and educators may flourish because participants are often encouraged by their employers to participate in the workshop as a form of professional training and/or capacity building, those participating in a research project are not usually supported by a professional development agenda. The difficulties of conducting interviews and focus groups with research participants in general also are encountered in recruiting and retaining participants for a digital storytelling

workshop. For example, in conducting a digital storytelling workshop in tandem with my research project on women's reproductive health experiences, I found it difficult to get in touch with participants who initially expressed interest in participating in the workshop. Although I offered daily participation stipends, meals during the workshop, and child care coverage to those I was able to contact, many were not able to commit to the 3 full days required for the workshop. As mentioned previously, one solution is to offer workshops with more flexible hours, so that participants are not required to put aside 3 full days for workshop participation.

All told, whether they are research benefits or research challenges, it is clear that the digital storytelling process provides eye-opening options to participants, trainers, and researchers. As an emergent method of CBPR for public health, the benefits outweigh the challenges in my view. The challenges can only expand the awareness horizons for all concerned as solutions and innovative resolutions are put into place.

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