Storytelling for trauma and the global health humanities
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Authors
Ayesha Ahmad*

Abstract
Trauma and narrative are inextricably linked due to the nature of suffering being in response to an individual’s life events. An individual must find ways to respond to ruptures in their familiarity of their life-world. Consequently, trauma narration is an integral part of approaches that have been developed to help individuals recover. Stories are an integral part of our sense of self and the meaning we ascribe to the world around us. Trauma challenges both our sense of self and the way we view our surrounding world. Individuals who suffer trauma are faced with finding new stories to hold their narrative and make sense of the rupture of their world-view. Narrative is also an important part of the therapeutic process for trauma recovery.

However, very little has been done to explore alternative discourses of trauma narration in the context of trauma therapy, which relies heavily on a prescribed biomedical framework of narrative, or most specifically, the measurement of a reconstructed narrative for evaluating trauma recovery. Furthermore, the act of silence is counteractive to the therapeutic notion of recovery, which relies on a specific way of telling a story about the traumatic event.

In this paper, I explore alternative modes of disclosure such as writing and poetry by examining what stories mean to individuals. This paper is based on a recent research project conducted in Afghanistan,¹ which interviewed women currently residing at ‘safe houses’ to examine the juxtaposition between stories and trauma narratives arising from gender-based violence. There is a rich literary heritage in Afghanistan with an overt role of storytelling in society through various media such as poetry. Typically, women have been prohibited from writing poetry during the Taliban era. Thus, a sign of post-conflict recovery in society is creating spaces where women are permitted the freedom to write.

¹St Georges University of London, London, UK
²Email: a.ahmad@ucl.ac.uk

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In this sense, I consider that storytelling reflects the individual’s life and sense of their surrounding world.

To this end, the paper considers the overall role of the humanities in global health interventions that aim to improve the well-being of lives around the world. The notion of storytelling for trauma and global health humanities symbolizes the need for creating spaces for the discourses of the marginalized. The case study of Afghanistan illustrates that such marginalization is socially-constructed from factors such as conflict. The paper concludes with emphasizing the need for humanities-based approaches to understand lived experiences of conflict to help improve mental health interventions in diverse settings.

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**References**


**About the author**

Dr. Ayesha Ahmad is a lecturer in Global Health at St Georges University of London, where she developed a specialty area in Global Health Humanities. She also holds an Honorary Lecturer position at the Institute for Global Health, University College London, where she is co-investigator on an MRC/AHRC funded projected called SHAER: Story-telling for Health: Acknowledgement, Expression, and Recovery, involving partners and collaborators in Iraq, Turkey, Kashmir, Afghanistan, South Africa, and Tunisia. She also writes for the online blog for the *British Medical Journal of Medical Humanities*. She is also a writer of poetry with a special interest in medieval Islamic writings and Persian poetry. She is the co-editor of an edited book volume, *Humanitarian Action and Ethics* (Zed Publishers, 2018).